

Temple Beth El Child Development Center

Plan of Operation related to **FAMILY HANDBOOK**

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Celebrating 60 years ! Riverside Temple Beth El 1965

Licensed by the California State Department of Social Services,
Community Care Licensing Division
Licenses: #334843545, #330900842, and #334805617

Updated August 2025



Accredited by the National Association
for the Education of Young Children

Plan of Operation / Family Handbook

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Sources for numerous policies:

Caring for Our Children -- National Health & Safety Performance Standards:
Guidelines for Out-of-Home Child Care Programs, 3rd Edition 2011
Model Child Care Health Policies, American Academy of Pediatrics, 4th Edition,
September 2002, published by NAEYC
NAP SACC sample policies, Riverside University Health System

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Hello to our Families,

Welcome to Temple Beth El Child Development Center! We know you have a choice, so thank you for your time and energy in choosing our school for your child with 60 years of service to our community.

We're looking forward to an engaging year together as partners in your child's development and education – and thank you for your on-going suggestions and support as we integrate on-going program quality. We successfully achieved accreditation renewal with the National Association for the Education of Young Children (NAEYC) in November 2023, valid for the next five years. Thank you for your family's ongoing feedback as we remain committed to working together toward common goals of your child's development for life-long joy of learning through hands-on, interactive, and engaging activities.

Please refer to this family handbook, calendar, and financial agreement throughout the year. Continued improvements and enhancements are integrated based on your feedback, including updates from accreditation standards. To be eco-aware, each new family will be offered a printed handbook. A **full, current version** can be found on our website at www.TempleBethElCDC.com at all times. We will continue working with each family for a smooth transition through year-round enrollment.

As questions arise about daily activities, please communicate regularly with your child's teachers. At any time, please feel welcome to stop by the office, drop us an email, or just give us a call.

Trudy J. Oliver, M.A., Administrative Director

Tanya (Soleski) Giatroudakis, A.S., Associate Director & School-Age Coordinator

Yvette Gilmore, Administrative Specialist

TBD, Program Support Specialist

1.0 HISTORY and MISSION of Temple Beth El Child Development Center

Temple Beth El Child Development Center (herein "TBECDC") has a rich heritage and an excellent reputation within the community of Riverside. In 1965, the original Riverside Temple Beth El Nursery School was born out of a vision of a few Temple families, who desired a non-denominational, non-sectarian nursery school in their neighborhood for children to attend. Since opening, the center has evolved, incorporating numerous program improvements and enhancements in response to the changing needs of the community and the requests of school families, continuing as non-denominational and non-sectarian.

In its on-going pursuit to provide the best services, TBECDC undertook the extensive and prestigious accreditation process from National Association for the Education of Young Children (NAEYC). Accreditation was successfully completed in 1993, again in May 2000, and August 2003. We are proud to have been one of the first in the country to achieve re-accreditation in 2008 with NAEYC under their newer rigorous, comprehensive, and prestigious system. Similarly, in 2018 we received formal recognition with accreditation renewal through NAEYC's new "streamlined" model, with and most recently successfully renewed in November 2023. *NAEYC's new tiered accreditation will be reflected in our 2029 renewal.* TBECDC continues to be a Tier 4 participant in Riverside's First 5 Quality Start program, which includes Asthma certification, eco-healthy practices, and NAP SACC (nutrition and physical activity) certification.

Last program year, we began our partnership with Renu Hope Foundation to provide breakfast, lunch, and afternoon snack through the California Child and Adult Care Food Program (CACFP). There is a required form to complete along with notification of any food allergy or dietary need, but all attending children will be offered age appropriate, fresh, and diverse food (including formula for infants), regardless of income. *NEW this year in partnership with RHF, we'll be integrating State Preschool and CCTR funding for families!*

TBECDC maintains current licensure through the State of California Community Care Licensing (CCL) office, 3737 Main Street, Suite 700, Riverside, California. Effective August 2015, we are licensed for infants and walkers, children two through five years of age, and school-aged children grades TK-6 children, and – *new State Preschool starting soon.* We are subject to, and comply with, State Licensing regulations (Title XXII), and Title 5 in select rooms, State Health and Safety codes, and Fire codes, and NAEYC accreditation standards (NAEYC 10B-1322(R)).

Amidst changes in name and pivots in program configuration, the overall mission of the center has remained consistent; that is, to provide a developmentally-appropriate curriculum that builds a solid foundation for future learning. Any change in content or numbering in this handbook and portfolios will be indicated by *italics*.

**To learn more about NAEYC, the accreditation process, & quality care...
check out their new website: www.naeyc.org and www.rightchoiceforkids.org**



2.0 ORGANIZATION & TBE/CDC Board

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1. Temple Beth El Child Development Center is a non-profit, non-sectarian, non-denominational school. All families in the community are welcome. No religion is specifically taught or promoted, and each family's uniqueness is celebrated. Families (and staff) are not required to participate in any religious or political activity in order to attend or receive services.
2. TBECDC's sponsoring corporation, Riverside Temple Beth El (herein "RTBE"), ultimately governs TBECDC through its Executive and General Boards. The previous parent "Board" of TBECDC was re-formatted by RTBE as the "TBE/CDC Board," comprised of RTBE representatives. Currently RTBE designates representatives to meet monthly with the Administrative Director.
3. Whenever possible, at least one of these Board representatives shall have a child currently enrolled in the school or be an alumnus parent, and have attended the Center for at least one year, in order to serve on the TBE/CDC Board. Term of office is for one year.
4. Board representatives provide expertise and guidance regarding the business / legal aspects related to program operation, including reviewing policies and establishing tuition rates, overseeing financials and operations, strategic planning, marketing, services and recommendations regarding the personnel decisions related to the Administrative Director. The RTBE General Board oversees and authorizes the Administrative Director to administer the daily workings of the policies and procedures.
5. An annual highlight report is provided by the Administrative Director to the TBE/CDC Board, which is then shared with all the congregants of RTBE and is available to all interested parents. Results of the optional annual survey / evaluation are posted, copied, and also on our website.

Check out our website at "www.TempleBethElCDC.com"

6. *NEW with State funding for CSPP and CCTR, we welcome participation in a Parent Advisory group, to provide input, support, and informational opportunities. Watch for more information!*
7. Please feel free to inquire in the office if you ever have any concerns or questions regarding the policies and/or procedures. You are requested to first communicate directly with your child's teacher(s) regarding classroom information, thank you.
8. The Administrative Director, staff, and the TBE/CDC representatives assess the needs of the program through various methods including periodic surveys – *along with input from families*. Working together, the Administrative Director, staff, and interested persons then set and prioritize goals, monitoring the implementation of policies, evaluating effectiveness of the program, establishing and monitoring the school budget, coordinating fundraising activities when offered, advertising the school within the community, providing support to staff, and assisting in special events.
9. Having weathered COVID-19 precautions, many of our opportunities for parents to be active in the school in various ways throughout the year have been phased-in again, a few in modified format. Projects vary, such as planning and implementing special events, and similar. Every classroom appreciates volunteers to record video of books, make fresh play dough, on-site field trips, book fair, family events, working on the playground or other projects, share photos or videos of hobbies/talents/occupations – if you have an idea, let us know!
10. We love to hear about your family traditions, skills, hobbies, foods, and occupations at select times during the year. In-class volunteers will be on reservation basis. Please check with your child's teachers.

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11. The TBE/CDC Board, CDC administration and teachers, and parents may provide input into the program's vision and mission, outcomes desired for children, services provided to children and families, and short- and long-term planning.
12. In Spring 2023, we had our highest response rate ever using *SurveyMonkey* (summarized results or highlights provided.) TBE/CDC reserves the right to final determination of program offerings, activities, and related operations. In response to the 2021 family survey, we began providing the survey results in new enrollment packets and on our website. Based on the 2023 survey, we are considering offering a hot lunch program, keeping the *Remind* app as preferred communication, and retaining primary care groups as available – thanks for your continued feedback. *We heard the angst from transaction fees, and are working with our bank to minimize those fees ... watch for more information..*



Invest those precious minutes with your child –
Please, no cell-phones while dropping off or picking up!

3.0 PROGRAM PHILOSOPHY, GOALS & Preschool CURRICULUM

The program philosophy of TBE CDC (Temple Beth El Child Development Center) impacts every decision and policy, so is explained first in this handbook. The following foundational statements are built on current child development research and widely-held beliefs about how children grow, develop, and learn. Program standards and curriculum have been developed from the guidelines set forth by NAEYC (National Association for the Education of Young Children) as developmentally appropriate practices. Throughout the year, you will hear and see us refer to the general guidelines of *Creative Curriculum*, as well as the recommendations outlined by the State of California in *“Pre-Kindergarten Guidelines.”* Administrative staff keeps abreast of trends in the State of California related to universal preschool and preschool guidelines for integration into the program, including the *“California Preschool Foundations and Frameworks.”*

1. The continual growth of children's knowledge and understanding of themselves and their world allows learning to flourish. TBE CDC provides a safe, caring, warm, nurturing, and stimulating environment with opportunities to develop positive social relationships with children and adults, and to foster the growth of each child's self-awareness and self-esteem.
2. We recognize and celebrate that children are always learning. Our learning environments (indoor and outdoor) and activities are intentionally planned through the entire year for children to develop. Every month has a general theme, which is then focused into weekly lesson plans based on the interests, skills, and needs of the children in each particular classroom.
3. Teaching themes are provided by TBE CDC, based on *Creative Curriculum / Teaching Strategies* for curriculum development, allowing for adaptations and modifications based on the needs of individual children. Goals & objectives guide ongoing assessment of children's progress. Intentional learning opportunities will be developed with access to all enrolled children.

4. Physical, social, intellectual, and emotional development in every child is essential. A broad range of needs, learning rates and styles, knowledge, experiences, and interests are accommodated and celebrated by incorporating a variety of instructional models, strategies, and resources. TBE CDC provides opportunities for each child to develop at his/her own rate, building on what children can do, promoting self-help and independence, and encouraging children to represent what they know in a variety of ways, to create a climate of respect, and joy necessary for lifelong learning.
5. Exploration, discovery, and play are key components of our early childhood program, based on the developmental stages of learning of Jean Piaget, and the theories of Lev Vygotsky. **HANDS-on, interactive, engaging PLAY** is recognized as the natural means by which children develop large and small muscle coordination, imagination and curiosity, and social relationships. Activities and materials are provided indoors and out of doors to encourage creative play and stimulate conversation and problem solving.
6. Teaching staff help children enter into and sustain play, supporting and challenging children's learning during interactions or activities that are teacher initiated and child initiated.
7. Teaching staff also are active in identifying and countering any teaching practices, curriculum approaches, or materials that are degrading with respect to gender, sexual orientation, age, language, ability, race, religion, family structure, background or culture.
8. Field trips are being phased in for 4-5 year olds and summer school-agers. On-site field trips (such as Fire Department, dental hygienists, reptile or dinosaur presentations have resumed.



9. A stimulating environment encourages growth and learning of **interactive**: math, language, emergent reading and writing, art, science, social studies, and music. The environment influences and builds foundations for all children to become creative, independent, responsible, fully functioning, self-directed adults who can make decisions for themselves. Teachers use innovative methods and materials, such as creative arts and crafts, science discovery projects, nature study, stories and puppetry, activity centers, manipulative materials, music and movement, cooking and games, to enrich this learning environment.
10. Teachers create experiences that engage children in purposeful and meaningful learning related to key curriculum concepts, including spontaneous activities that emerge.
11. The curriculum guides the development of the daily schedule that is predictable yet flexible, and responsive to the needs of the group of children. This provides time and support for transitions, and is responsive to a child's need to rest or be active. Segments of time are provided to encourage exploration, experimentation, and discovery, while promoting action and interaction.



12. Projects sometimes extend over the course of several days, incorporating a variety of learning opportunities through: play, self- or child-initiated learning, creative expression, large-group, small-group, and teacher-guided activities.

13. The outdoors is viewed as an extension of the indoor classroom / learning environment. It is not simply a place where children run around to release energy, nor simply a time when teachers take their breaks. Teaching occurs at all times throughout the day, with teachers interacting and engaging with the children. Anything we do indoors, we may do outdoors – you'll see us painting and reading books -- in addition to the wonderful things we only do on the outdoor learning spaces such as riding tricycles.
14. Our goal is continuing to implement additional "outdoor classroom" elements – as well as bringing more of the nature to our indoor classrooms ☺, facilitated by our outdoor coordinator.
15. Learning about our world and environment, each classroom takes a weekly turn at keeping our "campus" litter-free. Please recognize your child's participation and encourage related discussions, and promote recycling. We welcome your suggestions as we integrate concepts of "going green." Every classroom is participating in a recycling project – and we appreciate your participation!
16. Other small ways to be eco-health and reduce air pollution, please avoid idling your vehicle in the parking lot, wipe your shoes on the walk-off mats when entering, and avoid strong scents.
17. Teaching staff scaffold children's learning by modifying the schedule if needed, intentionally arranging the equipment, and making themselves available to the children, using their interest in and curiosity about the world to engage them with new content and developmental skills (NAEYC 3E-642).
18. Curriculum is designed to reflect responsiveness to family home values, beliefs, experiences, and language (NAEYC 2A.6) Teachers shall use their knowledge of individual children to modify strategies and materials to enhance children's learning, including knowledge of children's social relationships, interests, ideas, and skills to tailor learning opportunities for individuals and groups.
19. Throughout the day, teaching staff actively seek out children's ideas and discern how they understand things by observing, talking with, and listening to them. Teachers use their knowledge of content to pose problems and ask questions in small groups and with individual children that stimulate children's thinking, helping children express their ideas and build on the meaning of their experiences.
20. Teachers help children identify and use prior knowledge, and provide experiences that extend and challenge children's current understandings. Children's engagement and learning are promoted by teachers responding to their need for and interest in practicing emerging skills, and by enhancing and expanding activities that children choose to engage in repeatedly. (NAEYC 3G-704-707).
21. Teachers create experiences that engage children in purposeful and meaningful learning related to key concepts.
22. The daily schedule is predictable yet flexible and responsive to individual needs of the children, including time and support for transitions, indoor and outdoor experiences, and responsiveness to a child's need to rest or be active. Primary Care Groups will be implemented to insure connections and small group interactions (NAEYC 10B-1457).
23. The schedule provides learning opportunities, experiences, and projects that extend over the course of a few days and incorporates time (refer to ECERS-R) for play, creative expression, large group, small group, and child-initiated activities.

24. Teaching staff join children in learning centers to extend and deepen children's learning. They observe children, engage children in conversation, and position themselves at eye-level with children while scanning entire area for supervision.
25. Children's engagement and learning are promoted by teachers by guiding them in acquiring specific skills and by explicitly teaching those skills (such as tooth brushing.) Teachers are able to determine the different components of a task and break it into meaningful and achievable parts (such as hand washing or tying shoes) (NAEYC 3G-715).
26. Materials and equipment used to implement the curriculum indoors and out shall reflect the lives of the children and families, as well as the diversity in our community including: gender, age, language, and abilities. Items shall provide for children's safety while being appropriately challenging, encourage exploration and discovery, and promote action and interaction (NAEYC 2A-152-153).
27. Materials are organized to support independent use, rotated to reflect changing curriculum and accommodate interests and skill levels, rich in variety, and facilitate special needs (NAEYC 2A-152-153).
28. The environment shall be reorganized when necessary to help children explore new concepts and topics, sustain their activities and extend their learning (such as an "in progress" block creation) (NAEYC 3E-635-636). The environment is arranged to be welcoming and accessible.
29. Curriculum guides teachers to incorporate content, concepts and activities that foster social, emotional, physical, language, and cognitive development. Key areas shall include literacy, math, science, technology, creative arts and movement, health & safety, and social studies. (NAEYC 2A-157,159).
30. Activities and materials support development of fine and large motor skills. Teachers plan for children to revisit experiences and materials over periods of days, weeks, and months (NAEYC 3D-305). Sufficient quantities of materials and equipment are available to occupy each child in activities that meet his or her interests.
31. Environmental elements include:
 - Multicultural materials that promote appreciation for diversity while being respectful of traditions, values, and beliefs of families being served
 - Defined places where families can gather information regarding the schedule and events
 - Defined places where families sign-in, sign-out, and gather related information
 - Places for displaying children's work
 - Features that moderate visual and auditory stimulation
 - Soft, washable elements
 - Nearby toilets, available drinking water (filtered), and hand washing sinks
32. Indoor space of at least 35 square feet per child (NAEYC 9C-1230) is designed and arranged to:
 - Accommodate children individually, in small groups, and in a large group
 - Divide space into areas/centers that are supplied with materials to support children's play and learning
 - Provide semi-private areas where children can play or work alone or with a friend
 - Provide full access with reasonable adaptations as necessary (NAEYC 9A-1197-1198).
33. Outdoor play areas shall be protected by fencing to prevent access to streets and to avoid other dangers, and arranged so staff can supervise children by sight and sound, with 75 square feet per child, now with additional licensed and fenced grassy area. Reed fencing has been added to cut down on environmental

pollutants (traffic.) These spaces have equipment that is age and developmentally appropriate so children can play along or with a friend, or accommodate larger groups to include:

Motor experiences such as running, climbing, balancing, riding, swinging
Activities such as dramatic play, block building, or art
Exploration of the natural environment
Adaptations for full participation

34. Further, outdoor play areas shall protect children from injury from falls, protect children from sharp or protruding hardware, safe from entrapment and tripping hazards, and protect children from excessive wind and sunlight. Sandboxes are covered when not in use, and are checked/cleaned daily for foreign matter, with sand replenished or replaced when necessary to keep clean (NAEYC 9B-1218, 1222-1223).
35. Many areas of the center meet Americans with Disabilities Act requirements including access to buildings, toilets, sinks, drinking fountains, outdoor play space (NAEYC 9C-1237).
36. Large motor experiences are provided to stimulate a variety of skills, enhance sensory-motor integration, develop controlled movement such as balance, strength, enable children with varying abilities to participate, range from familiar to new and challenging, and help them learn age-appropriate physical games with simple rules and structure with minimal competition (NAEYC 2C-207).
37. Teaching staff help children follow a predictable but flexible daily routine by providing time and support for transitions, and coach and support children as they learn to participate in daily cleanup and maintenance of the classroom (NAEYC 3D-616-617).
38. Time and space are organized to allow children to work or play individually, in pairs, in small groups, and as a whole group. This includes opportunities to engage in group projects and to learn from one another.
39. PreK 4's and Transitional Kindergarten teaching staff facilitate smooth transition from preschool to kindergarten, which includes: end-of-year visitation to local Kindergarten class (when available at Alcott), distribution of materials and suggestions, reading books about K in class, discussions about similarities and differences.

LANGUAGE / LITERACY

40. Children are provided opportunities for language acquisition, to experience oral and written communication in a language their family uses or understands, and to develop competence by responding to questions, communicating needs, thoughts and experiences, and describing things and events. Vocabulary is developed throughout the day through center activities, conversations, experiences, and field trips (PreK 4's and TK 5's).
41. Various opportunities are accessible for children to become familiar with print such as items belonging to a child are labeled with his/her name, materials and centers are labeled, print is used to describe some rules and routines, and staff helping children recognize connection of print to spoken word (NAEYC 2E-249-250, 255, 258).
42. Toddlers/twos have varied opportunities to experience books, songs, rhymes, and routine games (NAEYC 2E-249-250).

43. Throughout the day, children have varied opportunities to be read books in an engaging manner in group or individualized settings at least twice a day in full day attendance, be read to in small groups of 2-6 children, explore books on their own with a conducive place to enjoy books, have access to various types of books, be read the same book on repeated occasions, retell and reenact events in storybooks, engage in conversations that help them understand the content of the book, be assisted in linking books to other aspects, and to identify the parts of books and differentiate print from pictures (NAEYC 2E-271, 280, 282).
44. Teaching staff provide multiple and varied opportunities for children to: recognize and write letters, and have access to books and writing materials throughout the classroom, including: writing materials and activities available in art, dramatic play, and other centers, various types of writing are supported including scribbling, letter-like marks, and developmental spelling, daily opportunities to write or dictate their ideas, provided assistance in writing words and messages they are trying to communicate (NAEYC 2E-283, 285, 287, 288-290, 292-293, 295-297).
45. Preschool and kindergarten children are given the support they need to write on their own, including access to the alphabet and to printed words about topics of current interest, which are available at eye level or on laminated cards, with teaching staff modeling functional use of writing and discussing the many ways writing is used in daily life (NAEYC 2E-283, 285, 287, 288-290, 292-293, 295-297).
46. Kindergarteners (before & after school program) are provided varied opportunities to learn to read familiar words, sentences, and simple books; also encouraged to identify phonemes in words through varied activities, being encouraged to write independently each day (NAEYC 2E-320, 322).

MATH CONCEPTS

47. Toddler/Twos are provided varied opportunities and materials to use language, signs/gestures, and materials to convey mathematical concepts (such as more and less and big and small), see and touch different shapes, sizes, colors, and patterns, build number awareness using objects in the environment, and read books that include counting & shapes (NAEYC 2F-325-328, 334).
48. All children are provided varied opportunities and materials to build an understanding of numbers, number names, and their relationship to object quantities and to symbols (NAEYC 2F-337, 340).
49. Teachers provide varied opportunities and materials to categorize by one or two attributes (such as shape, size, and color), and shall encourage children to integrate mathematical terms into everyday conversation (such as more/less, big/little, round, square, add/take away, first, etc.) (NAEYC 2F-343). Extending for Kindergarteners to use numerical symbols and to explore operations on quantities ($-$ $+$ $=$), and shall be encouraged to use written representations in everyday experiences (NAEYC 2F-363-364).
50. Opportunities and materials are provided that help children understand the concept of measurement by using standard (rules, measuring cups) and non-standard (unit blocks, etc) units of measurement. Kindergarteners further are given opportunities and materials to assign numerical values to measurements (such as graphing) (NAEYC 2F-357-358).
51. Further, children are provided varied opportunities and materials to understand basic concepts of geometry by (for example) naming and recognizing two-and three-dimensional shapes and recognizing how figures are composed of different shapes (NAEYC 2F-350-351).

52. Teachers provide varied opportunities to build an understanding of time in the context of the children's lives, schedules, and routines. Kindergarteners are introduced to conventional tools for understanding time (such as a calendar and clock). Children also are provided varied opportunities and materials that help them recognize and name repeating patterns (examples: clapping, loud-loud-soft, dance steps, Connect 4 game) (NAEYC 2F-355-356).

53. Kindergarteners are provided varied opportunities and materials to create, represent, discuss and extend repeating and growing patterns (such as clapping song Bingo) (NAEYC 2F-359-360).

SCIENCE

54. Toddler/Twos are provided varied opportunities and materials to use their senses to learn about objects in the environment, and discover that they can make things happen and solve simple problems (NAEYC 2G-368-372).

55. Preschool, Transitional Kindergarten, and afternoon Kindergarten children are provided varied opportunities and materials to learn key content and principles of science, such as the difference between living and non-living things (plants vs rocks) and life cycles of various organisms, earth and sky (seasons, weather, light and shadow, sun, moon, stars), and structure and property of matter (hard/soft, float/sink) and behavior of materials (melting, etc.) (NAEYC 2G--381).

56. Children are provided varied opportunities and materials that encourage them to use their five senses to observe, explore, and experiment with scientific phenomena.

57. Teachers provide simple tools to observe objects and scientific phenomena, and shall be provided opportunities and materials to collect data, and to represent and document their findings (drawings or graphing) (NAEYC 2G-390, 392).

58. Further teachers encourage them to discuss scientific concepts in everyday conversation, providing children with opportunities and materials to learn and use scientific terminology associated with the content areas (NAEYC 2G-399).

59. Conversation, opportunities, and materials are provided that encourage children to think, question, and reason about what they observed (such as "What would happen if? Why do you think? How did you?") (NAEYC 2G-396).

TECHNOLOGY

60. Technology is included in the curriculum in various ways to enhance other hands-on learning. These include digital cameras, computers in each classroom, listening centers, and more. The use of passive media such as television, movies, videotapes / DVD's, and audiotapes is limited to developmentally appropriate programming.

61. Please do not send electronic devices such as i-pads, GameBoy / DS, Nooks, cell phones or similar with preschoolers. TBECDC accepts no liability for such items if a parent chooses to send with his / her child. School-agers may bring an electronic item on Fridays only, at solely at the risk of that child / parent. Games must be rated "G" or "E."

62. Software for children is age-appropriate, rated "E," related to or supporting the theme or concepts, and generally "open-ended" wherein they may create and explore. Matching, sorting, and identifying colors, shapes, sounds, and similar may be used as well. School-agers enjoy programs such as Carmen San Diego. Exposure is typically limited to 10-15 minutes at a time, monitored to allow every child to participate as desired, and being aware of ergonomics/screen distance to avoid eye strain. Teaching staff may access the internet in classrooms for special e-books or programs, as listed on lesson plans only and with direct guidance, though internet is not otherwise accessible to children.

63. Various types of technology are integrated to extend learning within the classroom, and to integrate and enrich the curriculum. All preschool-kindergarten children have opportunities to access technology they can use by themselves, collaboratively with their peers, and/or with teaching staff or a parent. Includes simple tools like gears, wheels, scales, rulers, and levers).

CREATIVE ARTS & MOVEMENT

64. Teaching staff provide all children varied opportunities to gain appreciation of art, music, drama, and dance in ways that reflect cultural diversity (NAEYC 2J-407-408, 410, 412, 414).

65. Toddlers/Twos are provided varied opportunities to explore and manipulate age-appropriate art materials, and to express themselves creatively through freely moving to music, and engaging in pretend or imaginative play (NAEYC 2J-416-417).

66. All children will be provided varied (2 or more each) opportunities to learn new concepts and vocabulary related to:

Art (such as posters, supplies / collage, watercolor, Picasso),
Music (such as songs, CDs, instruments, tempo, rhythm, jazz, drum, Greg & Steve)
Drama (includes dramatic play areas, puppets, imagine, act)
And dance (such as CDs, swaying, scarves, movements, ballet) (NAEYC 2J-427-429).

67. Varied opportunities are provided to all children to develop and widen their repertoire of skills that support artistic expression (e.g., cutting, gluing, and caring for/clean-up of tools) (NAEYC 2J-430).

68. Preschool-TK-Kindergarten children are provided time and many and varied (two or more) open-ended opportunities to express themselves creatively through music, drama, dance, and two- and three-dimensional art (NAEYC 2J-435, 1554).

69. Children have opportunities to respond to the art of other children and adults (may include sharing, posters/books about famous artists, or local artists.)

HEALTH & SAFETY

70. All children are provided varied opportunities and materials that encourage good health practices such as serving and feeding themselves, rest, good nutrition, exercise, hand washing, and tooth brushing.

71. Full day children are provided an opportunity for tooth brushing (NAEYC 5A-944).

72. Teaching staff provide varied opportunities and materials to help children learn about nutrition, including: identifying sources of food, and recognizing, preparing, eating, and valuing healthy foods. (May include menus, play foods, field trips, growing a vegetable garden).
73. Varied opportunities and materials are provided to increased children's awareness of safety rules in their classroom, home, and community in a developmentally appropriate manner, including opportunities to practice safety procedures/ rules (drills, stop signs, community helper figures, feet first down slide).
74. As mentioned, additional "Eco-healthy" practices are being integrated, such as walk-off mats to enter the rooms, green cleaning products, and environments free of artificial scents. Additionally, nutrition and physical activities will be specifically added to curriculum plans in accordance with NAP SACC program and guidelines.

SOCIAL STUDIES

75. Teaching staff provide varied learning opportunities that foster positive identity, esteem, and emerging sense of self (photos, mirrors) and others, and to become of the classroom community so that each child feels accepted and gains a sense of belonging (job charts, art displays, cubby names, props).
76. All children are provided varied opportunities and materials to build their understanding of diversity in culture, family structure, ability, language, age, gender in non-stereotypical ways (NAEYC 2L-475, 476, 478).
77. Opportunities and materials are provided to explore social roles in the family and workplace through play.
78. Children are provided opportunities and materials to learn about the community in which they live, including introduction to physical characteristics of their local environment as a foundation for learning geography (NAEYC 2L-484-485, 496-497). Photos of our community are displayed in the room or in photo books.
79. Teaching staff provide varied opportunities for preschool-kindergarten children to engage in discussions about fairness, friendship, responsibility, authority, and difference.
80. Teaching staff provide varied opportunities and materials to learn how people affect their environment in positive (recycling) and negative (polluting) ways. Each class sponsors a recycling project each year to the entire school, rotate trash pick -up of playground and filling bird feeders, and promote in-class recycling of non-food items.
81. Children are provided opportunities and materials that build a foundation for understanding economic concepts (e.g., playing restaurant, identifying money/ATM card) (NAEYC 2L-505-506).
82. Transitional Kindergarten children and after-school Kindergarten are provided opportunities and materials that help them link learning about their hometown, their state, the United States, and their country of origin to previous learning, as a foundation for learning geography, history, and social studies in meaningful connections to their daily experiences.

4.0 ANTI-BIAS

1. Human diversity is valued, as well as the fair treatment of all people. Gender equity refers to equal access of children to learning opportunities and to equal role expectations, encouraging all children to participate in all activities. Cultural pluralism refers to exposure to the different ways people celebrate national and religious holidays, by stressing basic values common to all cultures and religions (such as love, compassion, family ties) without the teaching of particular religious beliefs.
2. The learning environment is enhanced by the diversity of children's origins, beliefs, values, and first languages, where children are helped to understand and appreciate their own cultural heritage and the heritage of others. Staff members model tolerance, cooperation, creativity, imagination, and independence, helping each child to learn limits of behavior regarding safety, health, and respect for others, and encouraging parents to be partners in their children's education by celebrating diversity and traditions of cultures.
3. Teaching staff's daily interactions are intended to demonstrate their knowledge of the children they teach, the children's families, and the social, linguistic, and cultural context in which the children live.
4. In addition to reflecting individual children's cultural lives and ethnicity, an anti-bias curriculum goal is set forth to eliminate stereotyping and discriminatory behavior related to gender roles, various physical attributes, socio-economic position, and family structures.
5. Teaching staff intentionally counter potential bias and discrimination by treating all children with equal respect and consideration, initiating activities and discussions that build positive self-identity and teach the valuing of differences, intervening when children tease or reject others, providing models and visual images of adult roles, differing abilities, and ethnic or cultural backgrounds that counter stereotypical limitations, and avoiding stereotypes in language references (NAEYC 1D-66-67, 71).
6. Another anti-bias curriculum goal is to help children feel good about themselves, teaching about and valuing similarities and differences. On-going skills will be developed for identifying and countering the hurtful impact of bias on themselves and others. Cooperation, tolerance, understanding, communication, and compassion will be modeled by staff and actively encouraged with children.



CULTURAL PLURALISM & HOLIDAYS

7. As a non-sectarian, non-denominational center, we affirm and celebrate the diversity of our families represented. Curriculum does not include the teaching of religion, nor does it exhibit favoritism of one view or religious denomination or "faith."
8. However, cultural pluralism recognizes that as children come from different ethnic and cultural backgrounds, there is a positive virtue in sharing with each other music, customs, symbols, and/or rituals which shed light on the individuality of different people's religion, culture, or national origin.
9. Basic values common to all cultures and religions, such as love, compassion, family ties, peace, and kindness will be stressed rather than teaching particular beliefs.

10. Holidays are often an important part of family tradition, yet many are religious-based or media-driven. For curriculum to be void of all holiday experiences leaves out an important part of families' lives. We welcome you to let your child's teacher know when you are available to share a favorite recipe, hobby, or activity with your child's classroom.

11. Therefore, to respect diversity, to connect lives at home and school, to demonstrate that similarities and differences are good, and to maintain a balanced curriculum, monthly themes and activities may include holiday traditions from represented families, but they will not be the main focus of the curriculum. Thank you for your thoughtful time and energy in completing the two forms in our enrollment packet: "Tell Us About Your Child" and "Family Traditions."

As a requirement of our participation in the Quality Start program through the State of California, parents are requested to designate with which ethnicity(ies) they identify on provided form, thanks.

12. Children will often hear: "in some families..." or "some people..." or "how does your family..."



13. To avoid a "tourist" approach of participating in a few isolated activities at certain times of the year, our program seeks to promote culturally relevant interactions, environment, and activities of daily life in everyday curriculum.



PASSOVER

14. During the eight days of Passover, Jewish people are not allowed to eat bread or other products that contain flour, yeast, or related products. Though our school is non-denominational, we respect the Temple in which our school is housed. *During these days, we will not serve typical breads, cakes, or cookies during the Passover days unless they are clearly marked "Kosher for Passover" such as Matzo or other non-grain crackers through the food program.*

15. Please note that the Passover holiday is based on the lunar calendar and will not necessarily fall on the same date each year.

16. *New this year, the food program will provide a monthly birthday snack for celebrating, rather than foods brought from home, such as carrot cupcake and milk, during non-Passover days.*

5.0 AUTHENTIC ASSESSMENT

1. Assessment of children's developmental levels and skills occurs informally each day and week, in Primary Care Groups and individually, and more formally twice each year with written reports (may be electronic), utilizing a variety of methods for authenticity. Parents are encouraged to speak often with teachers about their child's progress, and to attend parent/teacher conferences throughout the year. We currently use the simplified assessment version of State DRDP's (Desired Results Developmental Profiles).

2. Authentic assessment and evaluation are integral components of the teaching-learning process, supporting the child's learning and enabling the teachers to make appropriate curriculum decisions. Assessment and evaluation are utilized as important tools for the on-going process of learning and teaching. They assist teachers in the development of activities and curriculum based on the interests and needs of the children in each classroom.

3. Teachers use multiple sources (informal and formal assessments) including children's initiations, questions, interests, and misunderstandings to identify what children have learned, adapt curriculum and teaching to meet children's needs and interest, foster children's curiosity, extend children's engagement, and support self-initiated learning.

4. Observations and assessments guide the curriculum planning of teaching staff. This allows teachers to individualize learning, and to be responsive to children's skills, needs, and interests, in addition to family experiences and language.

5. Teachers who know the children will utilize a variety of methods such as observations, checklists, and rating scales to document onto assessment tools along with other information to design goals for individual children, and overall guidance of curriculum planning, including monitoring of progress and making adjustments as determined accordingly (NAEYC 4D—763-764). All classroom staff gather observations.

6. Teaching staff are provided training to inform families with information about the choice, use, scoring, and interpretation of assessment methods that include:

The purpose and use for which an assessment is designed, and its use
The interpretations of the results and their meaning
Overview of training and conditions under which children are assessed, and
Access to and/or information about the tool used

7. Parents are encouraged to provide developmental input and anecdotal information, photos, and similar.

8. Assessment plans include these multiple purposes and uses:

Planning for overall program improvements
Arranging for developmental screening and referral for diagnostic assessment when indicated
Identifying children's interests and needs
Describing the developmental progress and learning of children
Improving curriculum and adapting teaching practices and the environment
Gathering, evaluating, planning and implementing overall program improvement,
Targeted professional development for educators,
Distribution of program resources and budget items and
Communicating with families

9. A variety of assessment methods will be utilized which are sensitive to and informed by family culture, experiences, children's abilities and disabilities, and home language; are meaningful and accurate; and are used in settings familiar to the children.

10. These assessment methods:

Are aligned with curriculum goals
Provide an accurate picture of all children's abilities and progress

Are appropriate and valid for their stated purposes
 Provide meaningful results for all learners
 Provide teachers with clear ideas for curriculum development and planning
 Are reviewed at least annually to ensure they are providing the needed information

11. Assessments obtain information on all areas of children's development and learning, including self-help skills. Teachers talk and interact with individual children and encourage their use of language to inform assessment of children's strengths, interests, and needs.
12. As children learn and acquire new skills, teachers use their knowledge of children's abilities to fine tune their teaching support, and adjust challenges as children gain competence and understanding (NAEYC 3G-691-692, 694). Teachers refer to and link curriculum goals and developmental expectations when interpreting assessment data (NAEYC 4C-761).
13. The Ages & Stages Questionnaire (ASQ) will be provided each new year to assist the parent in talking with a child's pediatrician or other expert to determine if additional support or assistance is needed in any area of development. Any time you have a question or concern, please talk with your child's Teacher or our office staff for additional resources.
14. Additionally, an annual health screening shall be submitted with proof of updated immunizations. Further, our new Program Support Specialist is coordinating with the Lions Club to provide a free vision screening for children each school year, and Loma Linda University for hearing screening.

15. As California State Preschool is phased-in, assessments will follow their schedule and DRDP content.

16. Confidentiality is maintained by:

- Limiting access to assessment results and the reasons for their access to: TBECDC personnel, NAEYC assessors, State Licensing analysts
- Copies of assessments to a child's elementary school when requested and signed by parent
- Posting rights and copy to parents
- Describing the procedures used to keep individual child records confidential
- Access restricted-secure electronic files, printed copies in envelopes



6.0 ELIGIBILITY & REGISTRATION

1. All children are WELCOME regardless of race, creed, color, religion, language, or national origin. Every family in our community is welcome. Notwithstanding, TBECDC reserves the right to offer enrollment according to the best interest of the center, based on the availability, needs, and match with this program, and subject to prior circumstances such as unpaid past balance.
2. Registration is accepted on a first-come, first-served basis subject to availability with year-round enrollment. TBECDC maintains a waiting list from which next availabilities are filled, with priority therein given to current, alumnus, and active Temple families. If there are openings, enrollment is then open to the community at large.

3. Please refer to the financial policies in this Family Handbook and/or Financial Agreement. Parent shall provide written schedule change to office with 2-week notice of implementation. Written notice given within 2-week window is ½ rate if eligible, same week notice no discount.
4. A minimum of two half (½) days of enrollment or payment is due for seamless enrollment through the summer into the new "school year" for all enrolled children. School-agers may pay registration in May to confirm Fall enrollment. Dropping summer attendance places the child on the waiting list (call for priority as returning family) for enrollment in the Fall (space is not automatic or guaranteed.)
5. A child will only be enrolled if there is a space available in the appropriate class. If no space is available, the child will be placed on a waiting list. When a space is initially available, or when a space becomes available, enrollment is reserved with the payment of the non-refundable registration fee and the completion of the registration form.
6. Enrollment is based on availability. When a parent is offered a space, enrollment must begin within two weeks, with paid registration. No tuition will be due during those two weeks, but if needing to start attendance past that period, there is the option of paying the half-day rate of the scheduled days to "hold" the space until regular attendance begins. If that option is declined, the child will be placed on the waiting list for the next available space, whenever that may occur. The child has priority as a returning family, but an enrollment space is not held or guaranteed.
7. All paperwork included in the enrollment packet must be completed and returned to the office PRIOR to child's attendance at the school. This includes emergency information, physician's report, health history, financial agreement, earthquake kit, ASQ, and proof of immunization. Signed receipt of child's personal rights and parents' rights must be completed and returned also.
8. Prior to attendance in school, the parent/guardian must provide the school with proof of current, updated immunizations as required by the Health Department and the State of California (yellow immunization card is most common) for all preschool students. The Varicella vaccine or documented chickenpox history is required for enrollment. California State Law has eliminated personal preference to immunization exemption unless exemption of file prior to January 2016.
9. Proof of current immunizations must be provided prior to attendance, unless the child's physician provides a signed medical exemption or exemption on file prior to January 2016. This form will be placed in that child's file, with the information indicated on computer, and notification to the State Health Department on TBECDC's annual report. Parents will be notified of all communicable disease occurrences. At this time, the COVID vaccine is not required for preschool children.
10. Due to the Covid epidemic, a few children may be under-immunized. Parents shall promptly resume the process of "catching up" on the timeline allowed by local health authorities and child's pediatrician. Any such child will be promptly excluded if the child seems to show symptoms of a disease that is vaccine-preventable and may put other children in the program at risk, with clearance from the pediatrician to return.
11. Included in the enrollment packet is a Physician's Report form, which must be completed by the child's doctor and returned to the office within 30 days of attendance. Alcott school-age children are not required to submit the Physician's Report, as their proof of immunizations and overall health is obtained as part of the public school system. (Watch for health dept. updates.)

12. All parents are required to sign and return the "Family Handbook Acceptance Form" (last page of this handbook.) The Family Handbook, along with its financial agreement, shall be considered in force upon orientation and enrollment.
13. In our program, children learn that they are more alike than different, and that every child has much to learn and contribute. TBE CDC will try to reasonably accommodate children with assessed special needs when possible, accompanied by an Individual Education Plan (IEP) or other written documentation.
14. Teaching staff create and maintain a setting in which children of differing abilities can progress, with guidance, toward increasing levels of autonomy, responsibility, and empathy.
15. Parents must complete a "Special Care Plan" form to notify us in writing of a child's required dietary or other restrictions that have been verified by the child's physician. *A new form may be supplied by food program participation.* Please see "Infant Center Specifics" if applicable.
16. Under the Americans with Disabilities Act, parents are not required to disclose a child's "protected" or diagnosed disability or special need UNLESS accommodation is requested. If accommodation is requested, a professional assessment and/or diagnosis and accompanying IEP shall be provided to TBE CDC, including any behavior modifications and strategies to coordinate services for the best interests of the child and family.
17. All children develop at different rates and in different ways. Some are born with needs that can affect their growth and development, and others may not show differences until later in childhood. If, for any reason, you suspect that your child may have special needs, please seek help and support immediately. The ASQ will be submitted each year, and is available to facilitate discussion with your child's pediatrician or other expert. A variety of materials are available in the office, including "Developmental Milestones," "Early Warning Signs," and "Your Child's Development."
18. Through observation, interaction, and assessment by teaching staff, signs may manifest indicating need for professional assessment of your child. The teacher(s) generally initiate the process with conversations with you and may then proceed, with your permission, with an observation by a trained professional, a visit to the pediatrician, then on to Inland Regional Center (if child is under age three), or to school district (if three and older), and then services and assistance will be determined.
19. Services recommended and provided by community agencies vary and may include speech or physical therapy, family counseling, staff and parent training, and/or a classroom aide. Some services are provided at no cost to families; others on sliding scale basis, such as Inland Regional or PCIT. Check with your **primary physician first**. On-site support from an agency must be coordinated with TBE CDC, meeting health department and licensing requirements.
20. There are many variations along the way, with the goal of support and assistance for full and successful participation within the child's home, schools, and community. Working together with families and agencies provides the maximum benefit for the child. Any aide or person observing or working with a child at this site shall first receive approval, checking-in each visit at the office, with any IFP, IEP, or similar will be coordinated and implemented within scope of TBE CDC's ability and philosophy.
21. Teaching staff, families, and program staff work as a team to develop and implement daily teaching and learning activities, including IEP's and IFSPs, and other individual plans as needed (NAEYC 3A-516).



22. Program staff develop and maintain partnerships and professional relationships with such agencies to meet the needs and interests of children and families we serve, and encourage continuity of services to achieve mutually desired outcomes, including support for participation in the program for children with disabilities, behavioral challenges, or other special needs (NAEYC 8A-1140).
23. Due to possible conflict of interest, teachers are discouraged from babysitting for Center families outside of work hours. If a family chooses to do so, TBE CDC specifically assumes no liability to either party.
24. TBE CDC reserves the right to determine whether it is able to reasonably meet the needs of any child in the program within current staffing patterns. This is done on a case-by-case basis. Referral information is available for more appropriate placement if the center is unable to meet a child's needs.



7.0 PROGRAMS OFFERED

1. The shift to new rooms generally occurs the first week of August. Enrollment for is for **year-round, continuous attendance** until drop notice is given. In summer 2024, we "flipped" usage of rooms to allow direct access to outdoor space for program quality with our youngest children (thanks to infrastructure grant from RiversideFirst5).
2. Maintaining a minimal two half (½) days during the summer promotes a seamless enrollment into the new school year. On-going enrollment provides continuity of learning and interactions for children, and providing more level attendance patterns and funding for the program.
3. *During the 2025-26 program year, we are beginning to integrate State funding opportunities for CCTR and CSPP (State Preschool).*
4. In custody situations, parents are responsible to communicate with each other about changes in their child(ren)'s schedules / payments / pick-up and drop-off and such between themselves, which is typically stated in court orders, without putting the Center "in the middle" or mediator role. TBE CDC is not required to notify either party of a change in a child's attendance.
5. Hours of Operation:

6:30 AM – 6:00 PM: Monday - Thursday	Office Hours:
6:30 AM – <u>5:15</u> PM: Friday	7:00 AM – 5:15 PM: Monday - Thursday
	7:00 AM – 4:30 PM: Friday
6. Days available:
 - Two days per week - Tuesday/Thursday (or alternate two days as available)
 - Three days per week - Monday/Wednesday/Friday
 - Five days per week - Monday through Friday

Varied or irregular days and schedules may be available, at an additional cost / Sorry, no custom schedules available for infants and walkers.
7. Attendance Hours available:
 - Half-day classes 9:00 a.m. – 12:30
 - Additional early or after hours, contracted or drop-in when available and approved in advance by the office

- Full-day classes 6:30 a.m. – 6:00 p.m. (5:15 p.m. on Fridays)
 - Half day PreK-5/Transitional Kindergarten (9:00-12:30), with before/after care available
 - Before and after public school care for TK, and Kindergarten through 6th grade (Alcott)
- After attending TBECDC, many of our children attend public schools within the Riverside Unified School District. All of our classes have switched to “ball & stick” style printing to coordinate with RUSD, and align our curriculum with State foundations standards.
 - The Before/After elementary school-age program and curriculum oversight is provided by our Associate Director/School-Age Coordinator. A typical afternoon schedule includes 40-45 minutes for homework, or reading if no homework, snack and/or cooking project, board games and/or computer, creative art or other project, and outdoor activities. Full-day activities are provided on select days when Alcott Elementary is closed, with reserved attendance at an additional fee.
 - School-age parents shall provide written 2-week notice of dropping attendance, such as summer break. However, in doing so, re-enrollment for the next school year is not guaranteed. To insure continued before/after school enrollment into the next school year, please retain a 2-day minimum summer attendance.
 - Alternative care for school-age children is prioritized for those currently attending our program. If your child is attending public preschool or TK, we cannot guarantee coverage days due to our limited space.
 - The enrollment form and financial agreement specify your current contracted hours. Children need reassurance about being picked up, so please be prompt. Drop-off or pick-up more than ten minutes of scheduled ½ day attendance times will incur an additional fee (see “tardy fees” for further information). Tardy fees apply promptly at center’s closing times.
 - During licensed hours of operation, children’s activities on TBECDC’s premises are monitored by California State Community Care Licensing, including drop-off and pick-up periods.** Thanks to a security grant, our premises are now monitored 24/7 (screen in office), in addition to a separate system for random classroom scanning available to office and Licensing personnel only, *and a security service during rotated hours during operations.*
 - For safety measures: please keep your child(ren) within arms’ reach after exiting your vehicle and until child enters his/her classroom.
 - Extra days may be added when available as determined by the office at an additional cost. **Sorry, days may not be exchanged.**
 - Drop-In Hours:**
To maintain required ratios for program quality and child welfare, drop-in hours must be approved through the office. These will be approved on a day-to-day and individual basis contingent on availability based on staffing. Please do not assume your child may stay past contracted hours simply by indicating such on the sign-in sheet, or by only asking the teacher.

Invest those precious minutes with your child –

Please, no use of cell-phones while dropping off or picking up!

Children are grouped into rooms by development and general age, typically as follows:

- Infants and walkers 6 weeks to 18 months in groups up to 12
- 18 months -36 months in groups up to 12
- Two-year old preschoolers
- Three-year old preschoolers
- Pre-kindergarten Four-year old preschoolers
- Transitional Kindergarten for children eligible for Kindergarten the next school year (5 by Sept 1st) or blend of PK / TK
- Before/after public school care for Transitional Kindergarteners, and Kindergarteners through sixth graders



- Enrollment is year-round automatically continuing from one year to another and through the summer unless we are notified otherwise (enrollment is dropped.) **Parents may modify their child’s schedule anytime during the year, subject to schedule and class availability, which may include reduced or increased days/hours.**

If enrollment is dropped, re-enrollment will be subject to availability and applicable fees, including re-enrollment fee. Returning families do receive priority over open enrollment based on availability, though schedule is not guaranteed when enrollment is dropped. Parent(s) may choose to pay ½ of the scheduled days to retain and guarantee the space.

- Alternative care for Alcott Early Release / Minimum days:
There will be certain days that Alcott Elementary School will have minimum days, or will be closed for which TBECDC will offer limited alternative care for K-6th graders, by reservation, and for additional fee (such as parent-teacher conference days.) Priority is given to families with current and continued enrollment. Alcott implements an “early release day” each Wednesday. Children will be picked-up at 1:20 unless notified otherwise, included in weekly tuition.
- Extra-Curricular Classes available:
 - Optional classes of tumbling/gymnastics are offered at an additional fee for 3+ year-olds, at designated times and days. The class is taught by one of our full-time employees. *Please indicate on the registration form if your child will be picked-up at the conclusion of class, or return to classroom to rest.*
 - A separate registration form is required, and is based on availability. The class fees will be billed on the monthly statement, regardless of child’s attendance, plus an annual insurance fee. Classes are year-round enrollment, with open start as available -- the instructor will contact you.
 - A 2-week written withdrawal notice to the office is required, including dropping for summer. Make-up class for absence (when available, not guaranteed) may be arranged with the instructor. There is no charge on days/weeks when class is not offered.
 - Depending on any health restrictions, a performance is given each June, OR a DVD will be provided. Typically GymKids starts the second week of the new year, with a 2-week break starting into summer. Enrollment continues until notice is given by the parent.



8.0 General CALENDAR Information

1. TBECDC's calendar approximates that of the Riverside Unified School District's "standard" year, observing similar holidays, and winter and spring breaks. Changes in RUSD's current calendar have been integrated into TBECDC's calendar.
2. With respect to the Temple, TBECDC will be closed when Yom Kippur and/or Rosh Hashanah or the first day of Passover occurs on a school day, as the classrooms will be in use by the Temple on those days. (Please refer to current Calendar and periodic updates.)
3. At the discretion of TBECDC Board, a one-day credit on five-day attendance may be given for multiple holidays in one given month, (such as 2021 but not 2022.)
4. Tuition fees include specific closed holidays; therefore, there is no change in payment or discount against tuition for the days the school is closed, nor exchanging days when a child is absent.
5. **NO TUITION payment is due the four weeks TBECDC is closed (two weeks in December/January, one in March/April, and one in July.)** Varies depending on RUSD calendar.
6. When alternative care is offered at the discretion of administration, payment for those days will be added to your account for reserved attendance. Space is limited, and priority given to families with continued enrollment.
7. As notified early in 2024, the additional vacation credit week has been phased-out going forward. We recommend planning your family vacations during weeks we are closed. *With the 2025-26 program year, we have phased out the closure during spring break.*
8. Special events such as photo days, fall parade, dress-up days, children's programs, or fundraising activities, are listed on the school calendar. Parents are encouraged and welcome to help plan, participate, and attend any or all events! Please refer to the current center calendar included for special events, holidays, and closed days. These will be modified during health restrictions.
9. In this 2025-w6 program year, we will celebrate our 60th anniversary – we welcome your ideas and participation!

9.0. BASIC SERVICES

1. Temple Beth El Child Development Center will provide the following basic services for your child as required by state licensing (refer to Title XXII if desired) (see Infant Center specifics):
 - a) non-medical care and appropriate early childhood education, including posted breakfast, lunch, and afternoon snack as applicable THANKS to Renu Hope Foundation partnering with us in the California Child and Adult Care Food Program!
 - b) policies and procedures for the protection of the child while participating in the program
 - c) appropriate assistance to the child in dressing, grooming, cleanliness, and other personal hygiene activities, including tooth brushing assistance for full-day children
 - d) opportunity for active and quiet activities throughout the day, including rest time for full day preschoolers

- e) adult supervision and instruction during child's schedule at school (general "wellness")
- f) central storing, distributing, and administering of prescribed medication with written parent authorization only

TOILET TRAINING

2. The center's program includes toilet-transitioning children, generally ages 2-3.5. A written **toilet training plan** shall be developed between the parent(s) and teacher, as consistency is essential for success. With so many personal variations, listing the words used at home for toileting and/or body parts is essential to teachers in knowing what a child is saying/needs.
3. Becoming toilet trained is a natural process of life, and should proceed only when the child shows all signs of readiness. Readiness includes having the vocabulary, awareness and desire, and muscle control to be successful. A child should not be pushed into being trained for ease or reduction of expenses, *nor forced to stay an extended time sitting on the toilet, or go diaper- or underwear-free.*
4. Children may gain muscle control over one toileting function prior to another, and during different times of the day (such as nap time.)
5. As preschool is often the first group experience for children, it is not uncommon for an occasional accident to occur – possibly due to the new surroundings, new adults, or just being too busy to go to the restroom.
6. It is expected that children who are toilet training (and once trained) will wear underwear, not diapers or pull-ups. Please send only commercially available disposable pull-ups or diapers unless your child has a medical reason that does not permit their use (notify teacher if so.) Parents are encouraged to send their children in easy-down shorts or pants (no overalls, please), and send extra clothes in case accidents do occur. Toilets with stalls for privacy are provided.
7. Staff will check children for signs of being wet or soiled at least every two hours when toilet-training children are awake, and will proceed with changing toileting/diapering process when wet or soiled. Children will be changed in the designated changing areas and restrooms. Staff will keep track of daily diapering, with forms kept for two weeks if a question arises.
8. Diapering areas are either separated by three-foot partial wall or located away from other activity areas used by children, and used for that group of children. Teachers maintain one hand on a child at all times if being changed on an elevated surface.
9. In the changing/diapering area, procedures and sanitation table are posted and followed. Surfaces are not used for any other purpose, and containers for soiled items have tight fitting lids with hands-free devices that are not accessible to children.
10. A staff member whose primary responsibility with preparing food shall complete those duties for the day prior to assisting with diapering activities. All these procedures are randomly and frequently reviewed for compliance, health, and safety.
11. Children are taught to flush the toilet, and wash their hands after every diapering and/or trip to the restroom.

12. Children will assist with toileting accidents, but are never made to feel shamed or embarrassed. Please be sure to send extra clothing, especially during changes in your child's life, if prone to naptime accidents, and even for school-age children as appropriate.
13. All supplies for diapering and toilet training (wipes, plastic bags, extra clothing, training pants...) will be provided by the parent.

10.0 SERVICES NOT PROVIDED

1. TBECDC shall **NOT** be responsible for providing the following services for children/families:
 - a) care for children who are recovering from illness or injury (mildly ill)
 - b) isolated care -- if your child becomes ill or injured, you must have your child picked up within one hour of notification. **(Be sure your phone number and emergency pick-up list are kept current throughout the year, though we update LIC 700 form each August.)**
 - c) assistance with medical / dental care of child, except as herein stated or may be reasonably accommodated under provisions of ADA
 - d) changing clothes for non-center activities (such as ballet or swim lessons)
 - e) transportation between home and center or elementary school
 - f) unless needed for verified dietary needs, personal foods sent from home will not be heated for children / exception: bottles will be safely heated for infants as designated
 - g) interpreter for special events unless two weeks' advance notice is provided, and then at discretion of center as available and subject to reasonable budgetary limitations.



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 check out www.naeyc.org and www.rightchoiceforkids.org

11.0 ATTENDANCE & ABSENCE

1. Children benefit most when attendance is regular. Frequent absences, inconsistent attendance, and late arrival make it difficult for the child to adapt to the program and to bond with the teacher and their peer group. We encourage parents to spend their days-off with their children, yet we encourage developing consistent routines for bedtime and school.
2. Parents are requested to notify the school if the child will be absent (951-682-7282.)

If your child has had direct exposure with someone who has tested positive for COVID-19, please notify the office and talk with your child's pediatrician. Current protocols based on current health guidelines for child care centers will be posted.

3. Tuition credit will not be given for occasional, periodic days of illness, or other (non-COVID) absence during the school year.
4. There are *three* weeks when TBECDC is closed to families when no tuition is due. As notified, there is no additional vacation credit, so encourage families to coordinate plans that coincide with those dates.
5. Absence of two consecutive weeks without notification (and/or non-payment) may result in termination of enrollment unless previous arrangements have been made with the office.



12.0 STAFFING & RATIOS

1. The administrative and teaching staff members at our school meet or exceed the education and teaching experience requirements of California's State Community Care licensing, Title XXII. All are involved in professional growth plans, keeping abreast of current information in the early childhood field.
2. The four core classes required by the State of California include this content:
 - a. Family centered practice
 - b. Atypical development and common health problems
 - c. IDEA and other applicable laws
 - d. Roles and responsibilities related to the IEP and IFSP
 - e. Strategies for supporting inclusion
 - f. Strategies for modifying and adapting curriculum, schedules, materials to meet individual needs
 - g. Referral and assessment process; and
 - h. Community supports and resources
 - i. Infant specific development and content in the infant class
3. Hiring procedures shall comply with requirements of Community Care Licensing which ensure that all employees at TBECDC who come in contact with children:
 - a. Have passed a criminal record check
 - b. Are free from any history of substantiated child abuse or neglect
 - c. Are least 18 years of age; any vehicle driver of children must be 21 or older
 - d. Have completed high school or the equivalent
 - e. Have provided personal references
 - f. Have received a current health assessment that attests to employee's ability to perform the tasks required to carry out the responsibilities of the position, including TB clearance
 - g. COVID vaccination is recommended, but not required.
4. Further, the Administrative Director and some Staff are members of NAEYC and CAEYC. All staff receive current training in pediatric first aid and CPR, and are mandated reporters of suspected child abuse and neglect.
5. Periodically we host intern teachers from Norco College and/or Cal State San Bernardino. Norco interns will be supervised at all times and accompanied by their college Instructor, health-screened each day, and have current immunizations as required. They are not counted within our Licensing ratios.

6. All staff must possess and demonstrate the ability to:
 - a. Interact with children without using physical punishment or any form of psychological abuse
 - b. Recognize health and safety hazards, and to protect children from harm (including tripping, burns, electrical shock) (NAEYC 9C-1253).
 - c. Encourage and provide children with a variety of opportunities for learning, and with a variety of appropriate social experiences
 - d. Adapt and respond to changing and challenging conditions in ways that enhance program quality
 - e. Effectively communicate with children, and their families
7. All teaching and administrative staff members participate in regular and on-going training sessions, such as CECO on-line modules, CPIN workshops, Institute of Child Nutrition courses, or the NAEYC or CAEYC conferences.
8. Our staff meeting topics generally coincide with the educational pieces provided with the emailed newsletter and throughout the month.
9. As a NAEYC accredited school, one unique quality is our goal for lower ratios, allowing for more teacher-child interaction. "Primary Care Groups" provide opportunity for connection in smaller groups.
10. For the majority of the program day, staffing is scheduled to maintain the goal of these lower ratios. Attendance patterns of families is monitored to ensure required Licensing ratio coverage, and is adjusted accordingly. Within our main classroom groups, teachers plan opportunities for those "primary care" connections to ensure greater connection-time and enhanced interactions! Periodically, ratios may be adjusted somewhat while we retain our commitment to the highest quality interactions and education.
11. Generally, 6:30-7:30 a.m. and 5:00-6:00 p.m., preschool rooms will combine due to lower attendance.

Invest those precious minutes with your child –

Please, no cell-phones while dropping off or picking up!



13.0 Routines and Procedures CLOTHING & PERSONAL ITEMS

1. Dress your child in washable, sturdy, play clothes suitable for the weather. Messy art, interactive, and creative activities are planned every day, and your child will want to participate. While we mix detergent with our paints to make removal easier (often using washable paint), and provide paint aprons, that sneaky paint sometimes finds its way onto clothing and shoes.
2. Please discreetly label all belongings with your child's name. While we try our best ... Please ... Do not send your child in clothes that are special or cannot be washed, or other items that you wouldn't want lost or broken.
3. Choose sturdy, comfortable, enclosed shoes for your child, such as tennis shoes. Sandals, crocs, and cowboy boots generally are not good choices for school, as they are awkward and unsafe for running and

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climbing on the playground equipment. Idea: perhaps leave a pair of tennis shoes in your child's cubby if they insist on wearing sandals to school, so they can wear the safe shoes on the playground.) No flip-flops please.

4. During the summer session and other (hot) days as weather permits (at the discretion of our office or Outdoor Coordinator), children will be allowed to bring sandals with back straps or go barefoot during special activities. Low-water activities may continue into Fall months when the weather remains hot.
5. Dress-up clothing related to aggressive cartoon characters (such as Ninja Turtles) is not appropriate for school due to the dramatic play that typically follows. Please, NO masks that cover eyes.
6. Clothing worn by school-age children shall generally comply with Riverside Unified School District's guidelines, conforming to recognized standards of decency, safety, modesty and cleanliness"...jewelry, apparel or items supporting or suggestive of gangs, sex, tobacco, alcohol, or drug culture are not permitted...including short shorts, saggy pants ("Dress & Grooming," RUSD). At the discretion of TBECDC, a child's clothing may be deemed as inappropriate, requiring adjustment or change.

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7. All children need an extra set of labeled clothing left in the classroom. Infants/toddlers should rotate every 3 months (they grow so quickly.) Remember to change these clothes as the seasons change and as your child grows. The center maintains a small supply of extra clothing for emergencies, so any donations of outgrown shorts and underwear are appreciated.
8. It is suggested to send children in clothing that is layered in cold weather, and sun-protective clothing or light layers during the heat.
8. To protect against cold, heat, sun injury, and insect-borne disease:
 - a. Children and staff wear clothing that is dry and layered for warmth in cold weather
 - b. Children have opportunity to play in the shade; parents are requested to apply sunscreen prior to arrival ("lotion up") with UVB and UVA protection with no less than 15 SPF.
 - c. If and when public health authorities recommend use of insect repellents, only repellents contain DEET will be used (there are pesky, aggressive mosquitoes this year) (NAEYC 5A-829).
9. Toilet transitioning children need additional underwear as well. Soiled clothing will not be washed at TBECDC, but will be sent home in a plastic bag.
10. Please LABEL all belongings (clothing, towels, sheets, toys) with your child's name.



14.0 SHARE DAYS & OBJECTS FROM HOME

1. Share days have resumed on an individual room basis. Please check with your child's teachers. PK/TK classes may have a designated "share day," and sometimes children want to bring special toys to school as a "bridge" between home and school. These are intended to be positive sharing experiences, yet

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become overwhelming and difficult to manage when too many items are brought at one time. Parents are encouraged to guide item choices by sending items related to the theme of study, which reinforces learning and promotes conversation.

2. However, comfort or security items may be sent (mostly youngest children), which will be for nap time, usually in the cubby, or while sitting at a table. These items will not be shared.
3. The teacher will attempt to send everything home at the end of the day, but is not responsible for lost or broken items. All items must be marked with your child's name. A lost and found basket is provided in the office for "waiting to be found" items. Please do not send anything that you wouldn't want lost or broken.
4. Certain items are not appropriate for school and should be left at home. Guns and other toy weapons, very small objects, gum or candy, and money are NOT allowed. TBECDC promotes a **non-violence, healthy atmosphere**.



15.0 NUTRITION & NUTRITION EDUCATION

Good nutrition is vital to children's overall development and well-being. In an effort to provide the best possible nutrition environment for the children in our facility, TBECDC has developed the following child care nutrition policies in conjunction with NAP SACC to encourage the development of good eating habits that will last a lifetime.

Since August 2024, all attending children will be offered breakfast, lunch and afternoon snack as applicable and age appropriate through partnership with Renu Hope Foundation and the California Child and Adult Care Food Program.

Participation in the food program follows the child care nutrition guidelines recommended by the USDA for all the foods we serve. To provide a healthy and balanced diet that includes fruit, vegetables, and whole grains, and at the same time to limit food and beverages that are high in sugar, and/or fat, here is a summary of our nutrition policy explained in further detail as well:

Fruits & vegetables

- ✓ We offer a fruit or vegetable product at each snack per day, including dark green, orange, red or deep yellow items
- ✓ We take advantage of local and seasonal items
- ✓ Canned fruit will be served in its own juice

Grains

- ✓ We serve whole grain foods, such as 100% whole wheat bread or rolls, whole grain crackers at least once a day

Fats and Sugars

- ✓ We offer lean meats such as "lean" turkey, chicken, fish, low-fat cheese
- ✓ We limit high processed meats such as bologna, sausage, hot dogs, chicken nuggets and fish sticks to no more than once each week. Pork products, and fried or pre-fried vegetables are not served.
- ✓ We limit sweet food items to no more than two times per week

Beverages

- ✓ Drinking water is available throughout each day indoors and outdoors

- ✓ We limit juice intake to no more than 1-2 times or less per week. When served, the juice is 100% fruit juice.
- ✓ We do not serve sugar-sweetened beverages
- ✓ Low-fat or 1% milk is served to children age 2 years and older. Whole milk is served to toddlers. Select formulas and baby foods are now provided to infants under 12 months of age through the CACFP, based on individual feeding plans (remember to update quarterly.)

Role of Staff in Nutrition Education

- ✓ Annual nutrition training is provided to staff in order to understand the import role of nutrition in the overall well-being of children. Staff focused training on nutrition modules in the 2024-25 school year through the Institute of Children's Nutrition (CECO) website.
- ✓ Staff provide opportunities for children to learn about nutrition one time per week or more, including discussion about trying and enjoying healthy food, and integrating posters/books/pictures
- ✓ Staff act as role models for healthy eating in front of the children.

Provided afternoon SNACK

1. As mentioned in the summary above, breakfast and lunch will be offered to all attending children, in addition to snack for those here in the afternoon. The children periodically participate in the preparation and serving of individual food items on "cooking days" as indicated on lesson plans.
2. Monthly breakfast, lunch and snack menus are carefully planned to follow child care nutrition guidelines. Each menu is designed to provide a wide variety of nutritious foods that are different in color, shape, size and texture. Additionally, we include foods that are culturally diverse and seasonally appropriate. We introduce new and different foods and welcome children's favorite recipes.
3. Menus follow portion sizes for ages 1-2 years, 2-5 years, and school age. Menus provided from Renu Hope are published in advance (on entry bulletin board, in classrooms, through *Remind*, and on website). Individual items for cooking day projects will be listed on lesson plans that are posted in each room. Please review these for children's allergies or dietary restriction. Families are welcome to share ideas.
4. Meals are commonly incorporated as family style.
5. Drinking water is available to children throughout each day (NAEYC 5.B.06), including dispensers and cups rather than drinking fountains. Low-fat milk will be provided to children, and 100% juice will be limited to once each day. Whole milk provided for children in the Toddler Option class.
6. Discussions about good nutrition are part of the curriculum for children to develop healthy eating habits for life. Activities and education are integrated related to fitness, nutrition, dental hygiene, and overall wellness emphasis – watch for informational fliers from the office.
7. For dietary allergies and **preferences**, please complete a "Special Care Plan" (or similar) form for your child, which includes providing physician's documentation of any **required** food restriction or dietary need.

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8. At least one support staff person possesses a current "food handler's permit," and works closely with the Renu Hope food service crew. Periodically, nutrition fliers will be distributed to families.

CELEBRATIONS

From birthday fun to holidays, there are various opportunities for celebrations in our center.

9. For holiday celebrations and other “special days,” CACFP will provide nutritional food items, and will be included on published menu when there is notice provided. Please check for allergies.
10. We suggest you send in a birthday book in honor of your child’s birthday. Other alternate ideas include bubbles, sticks, crayons or playdough. Watch for fliers with more ideas.
11. If you choose to bring a birthday snack, or a “just because” snack, please discuss in advance with the teacher:
 - Include two+ food groups healthy items such as cheese, sun butter, whole grain item, or fresh fruit,
 - Avoid sugary foods and beverages (no soda), and
 - Notify your child’s teacher in advance, thank you.
12. We implement family-style eating to promote language development, to practice self-help skills, to develop eye-hand coordination (pouring the juice), to encourage modeling by staff of age-appropriate table manners and hygiene, to develop estimation and math skills, to promote socialization and taking turns, and much more.
13. Group courtesy, “manners,” and good nutrition are modeled and encouraged through positive conversation and actions at school, for reinforcement at home. Food is not used as a reward or punishment (limited exception might be considered during toilet training.)
14. TBECDC avoids serving certain foods prone to choking hazards, or utilizes the suggestions below. When sending food from home, National Health & Safety Performance Standards recommend utilizing alternate serving choices provided below, or wait to provide certain foods until age 4 or older. At home, please cut these food items into ¼” pieces for infants, or ½” or smaller pieces for toddlers/twos. Here are alternate, safer suggestions for serving these foods:
 - Cut hot dogs or meat stick into strips
 - Cut raw carrots into sticks or cook
 - Cut grapes in half (top to bottom)
 - Remove peel from apples or pears
 - Avoid nuts, peanuts & seeds, or try creamed version
 - Cook or smash raw peas and corn
 - Avoid popcorn, break rice cakes into small pieces
 - Spread seed butter or cream cheese onto cracker or bread

15. Age-appropriate bowls, plates, and cups are provided by the CACFP. Children may bring a sports-bottle with water, to be labeled, and kept in their cubby or back packs.

16. It is expected that children be bottle-weaned for preschool-room attendance, including age-appropriate self-eating skills, unless medically-based exception.

17. Refer to Infant Center specifics for children 6 weeks to 18 months. If a bottle is needed for nap time in the Toddler room, a teacher will hold the child to drink the bottle, then put the child on his/her cot (may not lay down, prop, or walk around with a bottle.) A pacifier may be used by toddlers during naptime or

when sitting down, but not while walking around. Per Licensing, the pacifier may NOT have an attachment.

18. If you have declined participation in the food program, and are sending lunch from home: please **include all food groups in lunches**, focusing on healthy, “grow” foods, and **LIMITING** sugary, non-healthy foods. **Sweets should be reserved for home** whenever possible to ensure your child eats healthy foods while at school, for a body prepared for a busy day of activities.

19. Unless needed to accommodate a special dietary requirement documented by a physician, any food item sent from home is not re-heated for children. If required, these should include instructions with the meal item.



20. On the LIC 702, Parent’s Report of Child’s Health History, in the enrollment packet, parents may list food likes and dislikes (note: quite often these change during the year,) and family preferences. Food **allergies** will be listed on the child’s computerized file for kitchen and classroom awareness, and that allergy will be highlighted on the child’s physical file.

NOTES:

a) if your child has a confirmed allergy by the pediatrician of a particular food, **check labels carefully !!** (Many are made in a factory that also has nut products, for example.) If such a food item is sent from home by the parent for the child to eat while at TBECDC, an alternate “safe” item may be provided by the Center, with the allergy item returned home with an explanation.

b) Food preferences of the family may be listed as such, but are NOT the same as confirmed food allergies. Changes in food allergies must be verified by the child’s physician in writing and dated.

c) Food items brought for children’s potlucks, birthdays, or party days **MUST** be store-prepared and brought in the original container(s) in order to check for allergy products.

21. No nut products are included on the menu. We use sunflower or Wow butter © **Carefully check labels of any food brought from home.**

16.0 REST TIME

1. According to State Licensing regulations that govern our program, children in a half-day preschool program are not required to rest. While our morning program does provide active and quiet activities, a rest time is not included in the morning-only schedule for preschoolers.

2. Infants under 12 months of age are allowed to rest on their own schedule. Teachers will work with changing nap schedules of toddlers during transition to the walker room, and again as transitioning into the toddler rooms. A sleeping plan is required for infants under 12 months of age, which parents are requested to complete along with the quarterly Needs and Services Plan.

3. State Licensing requires that all children under the age of 5 be provided a designated rest time during a full day of attendance. Teachers cannot honor a parent’s request that children have NO rest time. A quiet time will be provided for TK / 5 year olds as well.

- If a child falls asleep, s/he must be allowed to sleep according to his/her needs under "Child's Personal Rights" during **scheduled** rest times. Cooperation is needed for resting by children to allow others to sleep. Children that are awake will lie quietly on their mats to rest for at least 30 minutes, and then will be provided alternate, quiet activities within the classroom.



- Generally, one scheduled rest period for preschoolers is included. Toddlers and Preschoolers attending past lunch-time will be provided an approximate 30-90 minute rest period, depending on age-group, that is included in the schedule as required by Licensing. Lights and music turned on by 2:45 to signal the end of the rest period, and to transition to toileting and snack time.
- Toddlers and Two-year olds are transitioning from two naps at home, and are welcome to rest in quiet areas of the room in the morning, though the scheduled nap time is provided for everyone.
- Following dental and pediatric recommendations, children will **not** be laid down for nap with a bottle (though teachers will hold them for the bottle, then lay them down and rub their backs.) A pacifier may be used at naptime if needed when laying down.
- A cot is provided by TBECDC for each full day toddler and preschooler. Infants will be provided a crib or cot (see Infant Center specifics.) Over 12 months of age, a cot will be provided.
- Parents of full-day toddlers and preschoolers are to provide a crib sheet for the cot and a small blanket for resting time, marked with the child's name, which will be sent home weekly for washing. The sheet and blanket must be stored in a zip-lock bag at school, provided by the parent (or purchased from school at nominal fee.)
- Please notify your child's teacher in writing of routines or suggestions that help your child to rest, or if you do *not* want the teacher to rub your child's back. Lights are dimmed, and quiet music is played. Parents of infants and walkers under age 2 will complete a "needs and services plan" and a sleeping plan quarterly.



17.0 HEALTH & SAFETY

- Physical Activity

TBECDC recognizes the importance of physical activity for young children. Implementation of appropriate physical activity practices supports the health, safety, and development of children in care, as well as assisting in establishing positive lifestyle habits for the future.

We want to ensure children in our care are supported and encouraged to engage in active play, develop fundamental movement skills, and to have limited screen time. Our center encourages all children to participate in a variety of daily physical activity opportunities that are appropriate for their age and skill, that are fun, and that offer variety. Some activities and materials have been modified during health restrictions.

High-touch items will be disinfected throughout the day. In order to promote physical activity and provide all children with numerous opportunities for physical activity through the day, we will:

Provide daily outdoor play (weather and air quality permitting):

- Encourage a least restrictive, safe environment for infants and walkers at all times
- Provide a designated safe outdoor area for infants (ages 0-18) months for daily outdoor play
- Provide toddlers (ages 1-2 years old) with at least 60-90 minutes of daily outdoor active play opportunities over 2-3 separate occasions (full-day children)
- Provide preschoolers with at least 90-120 minutes of daily outdoor active play opportunities over 2-3 separate occasions (full-day children)
- Provide before/after school-age children with morning and afternoon time of 30-90 minutes for daily outdoor active play opportunities
- Increase indoor active play time so the total amount of active play time remains the same if weather limits outdoor time
- Provide a variety of play materials (indoors and outdoors) that promote physical activity

Role of Staff in Physical Activity

- Encourage children to be physically active indoors and outdoors at appropriate times
- Participate in training each year on physical activity
- Provide 5-10 minutes of planned physical activities at least 2 times daily for children age 3 and older
- Provide posters, pictures, and books for visible support for physical activity (ages 2-5)
- Ensure children are not seated for periods of more than 30 minutes, and rarely use videos except as directly supporting theme and only for 10-15 minutes with opportunity for children to do alternate activities

- Illness

- If you have any thought that your child may be ill, or if you feel your child cannot participate in normally scheduled activities, please keep your child at home. Preschool is often the first group experience for children, and they are very vulnerable. Please call the school office to let us know if your child will be absent, and why. Tuition credit is NOT given for periodic illness or absence, neither can days be exchanged.

Please take extra precaution -- We have female teachers in the child-bearing age, so it is extremely important to reduce their exposure to communicable disease and illness at the Center. If your child is or has been sick, or has undiagnosed symptoms, please wait until your child's health has returned to "normal," thank you. (See #3 which follows.)

- Please monitor your child's health before arriving each day. A daily health check will be performed by the greeting teacher, which is required by State Licensing to protect the health of your child, and to keep all children and staff as healthy as possible. If in the opinion of the teaching staff your child is crying excessively or appears sick, or has had a fever of 100.4 or more the previous day, your child will not be admitted for the day.

- Exclusion from attendance (summarized):

- Any condition or illness prevents a child from participating comfortably in activities, or
- Creates a greater need for care than the staff can provide without compromising the health and safety of other children, or
- Poses a risk of spread of harmful diseases to others
- Has had fever of 100.4° or higher or active vomiting or diarrhea, or other virus symptom within past 24 hours
- Has an unidentified rash, which will be referred for medical opinion

- Has tested positive for virus / Take extra caution if a family member has been sick before sending!!
- (specifics based on *National Health & Safety Performance Standards*)

4. The following criteria will be considered in determining if your child must be picked up or not admitted for the day:



Forehead Temperature of 100.4° or higher (fever) without additional symptoms OR low-grade fever (under 100°) with a second or more symptom

2 or more occurrences of runny diarrhea (not contained in a diaper or underwear) not associated with medication or food unless child appears to be miserable

Inflammation of the eyes w/redness	Unexplained or uncomfortable Pain
Rash w/fever or behavior changes	Cough not associated w/disease or fever
Abnormal/change in behavior or Lethargy	Communicable disease
Excessive or green nasal discharge	Vomiting 2+/24 hrs (not car motion or coughing)
Headache or loss of smell	

5. If a child becomes or appears ill during the day, the child will be made comfortable in a location (generally the office) until s/he can be picked up an authorized and familiar caregiver. Please be sure someone on your contact list is available to pick-up **within no more than ONE hour and your contact information is current.**

6. After your child has been ill, or sent home from school ill, it is important to adhere to these guidelines when determining whether or not your child is ready to return to school:

Mood, appetite, behavior & activity are again normal
MUST BE Fever/Diarrhea/Vomiting "free" FOR 24 hours

**** Any exception requires Dr. note**

Antibiotics or eye drops (if prescribed) have been used for a full 24-hours
 Quarantine period has passed with no symptoms
 Frequent coughing, or excessive nasal discharge has resolved
 Pain (earache, cramping, headache, etc.) has resolved for 24 hours
 Free of live lice (AAP and CDC updated Sept 2015 return after treatment)

7. Last protocols from Riverside County Public Health: If cold/virus symptom(s) develop, please test. Stay home (isolate as possible) until fever-free for 24 hours without medication AND symptoms are resolving. A negative test is not required, as some symptoms linger. Families will be notified if there was probable or direct contact in the attending classroom.

8. If a child or child's teacher tests positive on a day of attendance, the classroom will be deep-cleaned and sanitized, and parents of children and staff in that room will be notified. / Becoming ill when not in attendance will be monitored, but notification not posted unless in attendance. Watch for periodic updates on Remind and phone voicemail.

9. At this time, neither staff nor children are required to receive COVID-19 vaccines.

10. A facial mask for children is optional. Please do not enter the premises if you are quarantining. If isolating, that person should remain home. Masks for children 2 and older continue to be available at the

Center. NOTE: Licensing has instructed us that forcing a preschooler to wear a mask who is refusing is considered a violation of the child's personal rights, which would be a citation to the Center.



11. Communicable and contagious diseases **MUST** be reported to the school office by the parent/guardian as soon as the illness has been diagnosed by a physician. Other parents will be notified of possible exposure, without mentioning the child's name, by posting of a notice. Certain (communicable) diseases must be reported to the Health Department and State Licensing by the center (comprehensive list found in Title 22, Section 101212(g)(2)(A).

12. Additionally, please notify the office immediately if your child becomes ill with **flu-like symptoms** or rash upon returning from any trip via mass transportation (such as airplane), have gathered with groups, especially if you have traveled out of the country.

13. Communicable (infectious) diseases that must be reported to the office (951-682-7282) and to be posted include: chicken pox, strep, pinworms, head lice, conjunctivitis (pinkeye), impetigo, ringworm, measles, and mumps.

14. If your child has been home with head lice, please stop by the office for clearance after treatment before returning to the classroom, thank you. We will be happy to provide your family with additional information on getting rid of those rascals (it happens to every family sometimes.)

15. A medical professional other than a parent or relative shall sign/determine a child's wellness (such as skin rash diagnosis) to return to school if a medical visit has been deemed prudent.

16. Please list on appropriate enrollment forms, and alert your child's teacher, of any allergies, sensitivities, dietary restrictions, or special needs with which your child has been assessed or diagnosed. As these conditions are found, please update your child's records. Any notation of allergies must be accompanied by a "Special Care Plan" which includes written instructions for what to look for and what to do, in case of allergic reaction.



17. During extreme weather conditions (heat, cold, wind, smog, ash from forest fire, etc), children will remain indoors for activities. The office and/or outdoor coordinator monitor air quality on a regular basis. In general, "100" is the magic number – whenever the outdoor temperature or air quality index reaches 100 or higher, the children will remain indoors.

18. Under the Americans with Disabilities Act, children shall be provided reasonable accommodation for disability that does not pose an undue hardship on the school. A parent is under no obligation to disclose the nature of the disability to the school unless accommodation is desired. Services must be facilitated through the office.

19. Sign language or other language interpretation will be provided whenever reasonably possible if **two weeks' advance notice** is provided to the office of that request. Documents will also be provided in other

languages whenever possible upon reasonable request, all subject to availability and discretion of center resources as we coordinate and maximize time of the interpreter. If you are able to help, please let us know.

20. An Individual Education Plan (IEP) will facilitate the coordinated efforts for the child's education and development. Careful precautions are expected of staff to protect the confidentiality of information regarding every child's assessment records, and any child's health condition, including a child on Ritalin or with AIDS or HIV infection. Staff, whenever dealing with body fluids takes universal precautions.
21. TBECDC supports "the right of each child to play and learn in inclusive early childhood programs to the fullest and extent consistent with the best interests of all involved. If the child does not appear to be benefiting from the program, or the child is seriously jeopardizing the ability of other children to benefit from the program, staff shall communicate with the family, and assist in researching an appropriate setting," (*NAEYC Code of Ethical Conduct*, Section I, I-1.6 and P-1.4).
22. Due to allergies (which may trigger asthma) of children and/or staff, please AVOID scented detergent and softeners, essential oils, lotions, perfumes, and other type products.

**To learn more about NAEYC or Code of Ethical Conduct
check out www.naeyc.org and www.rightchoiceforkids.org**



18.0 HEALTH & SAFETY – Safety

- Children must be supervised by sight and sound at all times. **NEVER** leave any child unattended on the playground or in the car while dropping off or picking up an enrolled child. Be sure to hold your child's hand while crossing the parking lot, and stay together until reaching the classroom.
 - Kaitlyn's Law requires that **children may not be left unattended in a vehicle**. For the safety of all children, parents and staff are asked to be vigilant in enforcing this law. (Please call the office for assistance if periodically you have a baby sleeping or sick child or need help to pick-up your child 682-7282.)
- State Licensing regulations require that programs notify parents of the safety-seat law. Please note California's state law was updated stating: **children must be in an appropriate car safety-seat in the back seat until at least 80 pounds or 4'9"**. This law applies to field trips as well – no exceptions. The car safety-seat notice is posted in the office. Car seat safety is taught at school, so parents are requested to practice safety with diligence.
- TBECDC is not responsible for any property damage to a parent's vehicle, whether fire, theft, collision loss, or damage. Parents should consult with their personal insurance agent to secure adequate collision and comprehensive insurance coverage, **especially if participating as a driver on field trips. NEVER leave a purse visible in your car!**

- The school's parking lot is a **one-way** direction. Please observe the directional arrows, and drive slowly and carefully through the lot. There is **NO parking in the "U" section** in front of the Temple office, PLEASE!
- Please note that on occasion, the parking lot may be crowded due to an activity or event at the Temple. When possible, we will "reserve" parking spaces for parents. Thank you for your patience during these times of shared usage – and we will notify you in advance if possible. Please drive carefully.
- The Center periodically provides and/or promotes various workshops related to child safety, such as proper installation of a car seat, CPR/1st aid, safe preparation of meats, or such. First aid/CPR training is provided each year for staff, wherein no less than one staff member who has completed that pediatric first aid and CPR is on-site at all times.
- All perimeter gates around the Center have levers that are locked from the outside, but accessible for exit. One-way exiting is still encouraged during peak hours to avoid crowds of arriving families.
- All staff members carry keys at all times to access gates in case of emergency. (Refer to emergency procedures, please.) Please utilize the access code provided to each enrolled family for the front gate (if you forget the code, simply push the buzzer.) The code is changed every July with the new school year, and as needed. Note: the premises are under 24-hour recorded surveillance and security service.
- Please encourage your child to use the "walk-off" mat at the entrance to each room to reduce the transmission of dirt and lead into the classrooms. / Classroom carpets are shampooed no less than two times each year. / Please do not "idle" your engine while dropping off or picking up your child(ren).
- Please **do not bring your pet on the school grounds** (except for a service dog according to ADA) when dropping-off or picking-up your child, as other children may be afraid or unaccustomed to some animals. During hot weather please call the office to "animal-sit" at your car while you pick-up your child from the classroom, as animals may not be left unattended in closed vehicles during hot weather (State law.)
- When able to do so based on health restrictions, and at the discretion of the teacher, pets may be brought in to share at school for short periods of time upon advance arrangement. The teacher will prepare the class, and check for children with allergies or special fears.



12. Pets must be in healthy condition and friendly. Sorry, the following pets are NOT permitted for handling:
- Ferrets
 - Turtles or other reptiles that can carry Salmonella
 - Birds of the parrot family
 - Any wild, exotic or dangerous animals

19.0 SIGN-IN AND OUT

- State Licensing law mandates that each child be brought to and picked up from their classrooms or playground.

2. A notebook will be placed outside the classrooms for sign-in/out. During opening and closing hours, generally these will be placed at the "front" of room location. After a required daily health check by the teacher, the child is to be signed-in on the provided form with:



- the child's printed first and last name
- the parent's/guardian's legal signature
- the time of drop-off
- then time and signature of person upon picking-up
- school-aged children will be signed out by Center staff when leaving for Alcott, and signed-in by Center staff when arriving from Alcott

3. The LIC 700 Identification and Emergency Information is THE most important form in your child's file, and we request an updated form EACH year. This form designates emergency contact information and who can pick-up your child.

4. Please be sure to list yourselves (parents) along the bottom section as authorized pick-up persons. (This is needful due to various custody issues.)

- If a child's legal parent/guardian is **not** allowed to pick-up, a copy of the document (such as **restraining or custody order**) must be on file with the school's office. Riverside Police will be called if the situation is so determined in the judgment of TBECDC staff. Special arrangements for pick-up, i.e. older siblings must be approved in writing through the office.
- It is helpful to know when the child will be picked-up in accordance with contracted hours. Sign-in/out sheets are legal forms between the parents and school that the office maintains for three months. Please do not allow your children to write on these forms.
- Occasionally a parent may require copies of sign-in/out sheets for court purposes. A \$1 per page copying fee will be charged for each request, provided a written, one-week notice is submitted to the office with a \$25 deposit.
- Adjustments in or additional attendance hours are approved by the office, not by the teacher, evidenced by an approval form to be given to the teacher by the office.
- For the safety of everyone, enrolled children and siblings must be well supervised (sight and sound) by the parent during drop-off and pick-up.**

Invest those precious minutes with your child –

Please, no cell-phones while dropping off or picking up!

10. State Licensing requires supervision of children during all hours of operation, whereby licensing regulations and minimum ratios must be maintained. Teaching staff shall supervise by positioning themselves to see as many children as possible, supervising Toddlers/Twos and Preschoolers by sight and sound at all times. Mirrors may be used to augment supervision but are not relied on in lieu of direct visual and auditory supervision (NAEYC 3C-577-579).

- Kindergarten children may be supervised primarily by sight, though for short intervals by sound is permissible as long as teachers check are aware of where children are at all times, frequently on children who are out of sight (such as using the restroom) (NAEYC 3C-587-589).
- When picking-up your child, please note that the classroom notebooks follow the classes for safety purposes. Children will only be released to a pick-up person who is listed on the authorization form, is 18 years of age or older, and provides verification if requested. / A parent may request in writing for a teenager to pick up his/her sibling from the center, subject to approval by TBECDC office. / Whomever you designate for pick-up is your authorized representative to receive boo-boo or incident reports for that day.
- Per State law any adult who appears under the influence of alcohol, or prescribed medication, or impaired judgment/ability will be required to leave the premises forfeiting the right to pick up any child under the care of TBECDC. An alternate, authorized representative will be called to pick-up your child.
- TBECDC has implemented a new version of *ProCare* (new) for electronic financial files of children. Hard copies of all other paperwork are maintained in each child's file. Please refer to current financial agreement.

20. HEALTH & SAFETY - *Hand Washing & Tooth Brushing*

- Frequent hand washing with soap and running water is necessary to prevent the spread of disease. Children and adults shall wash their hands upon arriving, before preparing or eating, before and after water or play dough play, after handling animals, after toileting, after playing outdoors, and after coughing and wiping noses.

EFFECTIVE hand washing:

- Moisten hands with running water and apply liquid soap. Rub hands with soap and water for at least 20 seconds (we sing a song.) Include between fingers, under and around nail beds, backs of hands and any jewelry.
 - Rinse hands well under running water with fingers down so water flows from wrist to fingertips. Leave water running. (from *Model Child Care Health Policies*)
 - Dry hands with paper towels and use the paper towel to turn off the faucet.
- Children are taught to **cough and sneeze into their elbows, shoulders, or tissues** (rather than onto hands or uncovered), and to **turn off the faucets using a paper towel**. Each class has chosen its own song or rhyme to use while washing hands, so don't be surprised if your child does the same at home.
 - Children will be encouraged to rinse their mouths with water after lunch, with toothbrushing for full day children.



21.0 HEALTH & SAFETY – Incidental Medical Services, including Medications / Smoke & Drug-Free

1. Effective May 2015, child care centers generally provide non-medical care and supervision to children; however, does not preclude the provision of some incidental medical services as determined by the licensee (TBE CDC) when the parent has provided written authorization and instructions A "special care plan" must be completed by the child's parent and physician as explained in this Family Handbook. Additional content is being provided to parents to explain services TBE CDC will and will not provide.
2. Physician's Medical Orders – The "special care plan" describes the written medical orders prescribed by a child's physician and parent, including: description of the incidental medical service needed and identification of any equipment and supplies needed, statement by the physician that the orders can be safely performed by a trained layperson or only by a licensed medical professional, and details of the administration of any medication.
3. Staff members retain current certification in Pediatric 1st aid/CPR every two years. These courses now include training in asthma and allergy related conditions, including usage of EpiPen and AED (which we now have in the office). At least one trained staff member will be onsite at all times when the child is in care, including field trips, and shall follow universal precautions and maintain appropriate records of administration and notification as set forth. Documentation is maintained in employee files.
4. Blood-Glucose Monitoring for Diabetic Children
 - TBE CDC designates specific trained staff to perform when needed a blood glucose test with written permission from the child's parent, and a completed "special needs plan." The test must be FDA approved, and administered according to written instructions provided from the child's physician.
 - A parent and/or medical practitioner provide training to designated staff. A list of trained personnel, with dates of training, is maintained in the medication notebook. Updates are provided at the start of each school year (August), or more frequently if/when an aspect of administration changes as notified by the parent.
 - Supplies are stored in the locked medication cabinet in the office. Universal precautions are posted and will be utilized by TBE CDC staff.
5. Inhaled Medication
 - All TBE CDC staff receive pediatric first aid training every two years which includes instruction in administering inhaled medication. TBE CDC designates specific trained staff to administer inhaled medication to children in care when written authorization, including telephone number and address of the child's parent, is provided along with specific written instructions from the child's physician.
 - A "special care plan" is required, which includes instructions dosage, when and how to administer the inhaled medication, instructions for storing, and symptoms and side effects.
 - Each usage will be logged on the child's med form and the child's parent notified at departure.
6. EpiPen Jr. and EpiPen
 - TBE CDC staff may administer the EpiPen Jr. Auto-Injector (children weighing between 33-66 pounds) or the EpiPen Auto Injector (people over 66 pounds) as prescribed by a physician in allergic emergencies only, such as insect stings or bites, foods, drugs or other allergens.

- A "special care plan" must be completed for authorize administration of an EpiPen in accordance with the physician's directions.
 - Medication shall be protected from light and extreme heat, while ready for use at all times yet inaccessible to children. Supplies are stored in the locked medication cabinet in the office.
 - Parents will be notified to replace the unit prior to an expiration date, and returned upon expiration or exit from the program. 911 and parents will be called immediately after administering an EpiPen Jr or EpiPen, then Community Care Licensing will be notified.
 - Usage of an EpiPen will be logged on the child's med sheet. A used EpiPen will be placed in a sealable plastic bag and returned to the parent.
 - Note: Epi-pens are now dispensed in a two-pack (in case a second dose is required), and must be accompanied by a special care plan to be kept at the center.
7. Based on National Health & Safety Performance Standard 3.2.3.4, bio-hazardous materials (blood contaminated material, used needles if applicable) will be handled using Universal Precautions, and will be placed in a plastic bag with a secure tie or zip-lock for disposal. Any epi-pen that is used will be returned in a secure bag to the parent. Blood contaminated materials will be secured in a bag and disposed in inaccessible trash can.
 8. At the discretion of TBE CDC, it has been determined that the following health related services will not be provided, therefore no storage or transporting of related supplies:
 - Glucagon, emergency anti-seizure medication, and insulin will not be administered. 911 and child's parent(s) will be called.
 - Injected medication will not be administered
 - Gastrostomy tube care (G-tube)
 - Emptying an Ileostomy bag
 9. On occasion, a child must take medication while at school for a specific number of days, even though the child has improved, or for a medical condition such as asthma or allergies. Under these circumstances, parents/guardians may request the child be given medication while at school with requirements discussed below.
 8. As required in Title XXII Licensing Regulations, all medication must be in the original container, with all prescription and over-the-counter types, including medications for emergency supplies.
 9. The container must be labeled with
 - That child's name (no sharing of medicine between siblings)
 - Date prescribed
 - Dosage
 - Doctor's name (if prescription)
 - Expiration date
 10. The "Permission to Administer" form must be completed, dated, and signed by the parent, indicating dosage and times to be given. If there is a discrepancy between what is stated on the prescription and what the parent has written, TBE CDC will not administer the medication until a parent corrects the medication form.
 11. The medication will be stored in the locked cabinet in the office for administering by trained staff, and the medication form filed alphabetically in the designated notebook. (Do **not** send medicine, including cough drops and suntan lotion, in lunch boxes nor leave in cubbies.) The "Permission to Administer" form will indicate when and by whom the medication was given.

12. While all staff receive 1st aid/CPR training, at least one office staff receives training and updates on administering medications and procedures at least every other year, documented and maintained in the medication notebook. Only these office staff shall administer prescription and over-the-counter medications to a child with written permission from parent, utilizing Universal Precautions. If evacuation is required (such as damage to building), one of the staff listed on the emergency and disaster form may administer medication according to the child's form.
13. For everyday situations, the child is brought to the office by a teacher to receive medication, and then returned to the classroom. In evacuation, the child will be brought to the medical station.
14. The administering person (Standard 3.6.3.3):
 - a) checks that the name of the child on the medication and the child receiving the medication are the same
 - b) check the name of the medication is the same as the name of the medication on the instructions to give the medication if the instructions are not on the container that is labeled with the child's name
 - c) reads and understands the label directions or the separate written instructions in relation to the measured dose, frequency, route of administration, and other special instructions
 - d) observes and reports any side effects
 - e) logs/documents the administration of each dose by the time and amount given on the child's medication form, along with person's initials
 - f) handles and stores all medications according to label instructions and regulations
15. When medication is left in the office for use "as needed" (such as for asthma or allergic reaction), the medication and form must be current, with a non-expired date and prescription (see additional information which follows.) Any administration of medication will be logged on the child's medication form, and parents notified at departure for the day. 911 will be called if emergency treatment is indicated, followed by notification to Community Care Licensing.
16. If your child requires an on-going medication, please send an additional dosage, appropriately labeled and with designated form, to be stored with our 72-hour emergency supplies only.
17. Parents are requested to apply sunscreen prior to arrival. A "med sheet" form is required for any additional sunscreen lotion or ointment, or similar, that a parent requests the school to apply to his/her child, though physician approval is not needed (only parent authorization). Sunblock with UVB and UVA protection of SPF 45 or higher is recommended.
18. Unused medication or lotions will be returned to parent upon completion, expiration, or upon withdrawal from the program. If not picked-up within 24 hours of acknowledged notification, unused items will be discarded as required by Licensing. TBECDC may participate in the medication take back program as determined.
19. Helpful hint: you can ask the pharmacist to divide your child's liquid prescription medication into two containers (or you can divide as long as the original container is brought to school.) This way, one may be left at school and one can be left at home during the course of administration without having to remember to drop it off and pick it up each day. Or, ask for chewable tablets ☺

20. TBECDC is a smoke, vaping, and drug-free environment. The use of any tobacco product while on the school premises or while on school business is prohibited by employees, parents, volunteers, and repair workers.
 - a. Educational materials will be available for parents and employees related to the dangers of personal tobacco use and to their children, and smoking cessation information.

21. California State law prohibits parents/adults from smoking in vehicles while minor children are present. Neither shall animals be left in vehicles in weather that might impact their well-being.



22. The possession, use, or sale of alcohol, unauthorized or illegal drugs, or the misuse of any legal drugs on school premises or while on school business is prohibited.
23. Employees, parents, repair workers, and volunteers are restricted from reporting for work with detectable levels of drugs or alcohol in their systems, and from picking-up or driving a child.
24. The term "school premises, or campus" includes all Licensed indoor and outdoor spaces occupied by TBECDC, such as school offices, classrooms, and kitchen, and outdoor areas, such as playground, parking lots, and any vehicle engaged in school operation or field trip.
25. Procedures for new Integrated Pest Management / Healthy Schools Act laws implemented. The Center is checked each month for pest presence, using the least invasive procedure to handle, which may include sticky pads, or spraying if needed generally occurring the 2nd Thursday of each month. Any other treatment will be posted in advance.
26. If and when public health authorities recommend use of insect repellents due to high risk of insect-borne disease, only repellents containing DEET will be used, and these will only be applied to children no more than once a day with written parental permission.
27. All TBECDC staff participate in emergency procedure review at least once each year as scheduled. Recent trainings have included Asthma Training, handouts related to "prevention of exposure to blood and body fluids" (Standard 3.2.3.4), "labeling, storage, and disposal of medications" (Standard 3.6.3.2), training on "occupational risk related to handling body fluids" (Standard 1.4.5.3); new IPM / HAS overview, Active Shooter Training (2025), interactive Emergency practices, and COVID-19 protocols.

Check out our website at "www.TempleBethElCDC.com"

22.0 HEALTH & SAFETY



Injuries

1. While precautions are taken to minimize and prevent injuries, they sometimes occur due to developing skills or accidents. Staff members have received basic training in first aid and CPR, and practice universal precautions whenever dealing with body fluids – and receive periodic re-certification as required (every two years).

2. A "Please Note" will be used to notify you of an injury more than a simple scratch, or similar incident. Documentation of the situation preempting the injury aids us in preventing future occurrences.
3. Minor injuries will be treated with soap and water, cold pack, and/or Band-Aids – and TLC. These will be documented on a "Please Note" form and sent home.
4. Related to nose bleeds, please notate on the child's LIC 702 form if s/he has frequent or recent occurrence. If frequent, please complete a special care plan. If a nose bleed occurs here from a child picking the nose, generally it will not be written up, depending on severity or takes more than a wipe to stop it. If caused by a bump or fall, or does not stop immediately, it will be documented. All surfaces and hands will be cleaned following any incident.
5. Whenever there is any question, and with any injury to the head, the parent will be called. The parent will be notified of the occurrence, and the child's condition, so that the parent may make any decision s/he feels necessary.
6. Please notify the office immediately if your child requires any professional medical services resulting from an accident that occurred at school, for our follow-up notification to State Licensing and to our insurance carrier.
7. It is imperative that current phone numbers and authorized persons are listed on the sign-in sheet and are in the child's file. In case of serious injury or emergency, the parent or other authorized emergency person will be reached by phone if possible. If no one can be reached, the physician you have listed will be called, or 911. An emergency treatment consent form (LIC 627) is included in the enrollment packet. Note: if electricity is lost, we may not have the ability for incoming or outgoing calls.



23.0 EMERGENCY PROCEDURES

1. Regular fire, disaster, and earthquake drills are practiced at school. Staff members receive periodic training, and children are taught to listen to the teacher's directions, and know how to safely exit a building. Classes assemble, and children are counted (this is why the classroom notebook follows the class throughout the day).
2. Our Administrative Specialist, (and Program Support Specialist when applicable), Administrative Director, Associate Director, and TBE/CDC Board, annually review of procedures for various emergency situations including, bee swarms, earthquakes, non-custodial parent pick-up, gang or violence, bomb threat, flooding, and power failure, etc.
3. Earthquake preparedness includes the "Rabbits in the Hole" story and practice with the children. An evacuation map and disaster plan are posted in each classroom, and office.
4. Interested parents are encouraged to assist office staff with preparation for emergencies.
5. TBE/CDC receives periodic emailed emergency announcements (such as Amber Alert.)

6. On rare occasions there may arise a situation in which the Administrative Director or acting director exercises precautionary safety measures. For example, staff may be notified to lock all remain inside if there is a disturbance at Poly High School. Parents are encouraged to notify the office of any suspicious behavior or appearance of individuals on the school premises (951) 682-7282.
7. In recent years, a security guard has been positioned on the parking lot as a PRECAUTIONARY measure during the Temple's high holy days, usually in September (near 9/11.) It is likely a guard will be posted during Temple activities when TBE/CDC is closed (Yom Kippur and/or Rosh Hashanah). The Riverside Police Department has provided a review of our school's procedure, in additional hours of training to TBE/CDC staff.
8. IF the Temple nor the CDC ever receives a credible threat to our site, the Temple has close contact with local and national authorities. IF a threat or incident were to occur, parents would be notified immediately. Please again – please be sure we have current phone numbers. It is anticipated that parents would be called directly for early pick-up while the center remained in lock-down / high-alert mode. Administrative staff have received "active shooter" training, and full staff in Spring 2025.
9. There is possibility of power failure (rolling black-outs or thunderstorms). Please note that school phone lines will not be operational. It is anticipated the center will remain open during normal operation hours, unless you are notified otherwise. We have implemented the "Remind" app system that can alert you by cell phone of announcements, as well as general information such as menus.



10. As part of enrollment, you are required to provide 24-hours of food for your child to be stored in the room, and an annual fee to cover the additional 48-hours of emergency food/supplies that is kept in storage. Flashlights, radio, first-aid supplies, and other items have been stored as well.
11. In addition to the support and aid staff members will provide, the personal note and photo you included in your child's supplies will bring comfort to your child until you arrive.
12. **Each family is urged to plan IN ADVANCE** what to do if disaster strikes during the day when you are separated at work, school, etc. It is recommended to store emergency supplies at home, and in your car. Practice home fire and earthquake drills as well.



13. A) If an earthquake or emergency occurs while **school-age children** are physically in attendance on TBE/CDC grounds, or in our care (walk over), TBE/CDC will provide care and responsibility up to 72 hours. For this reason, it is important for school-agers' to bring emergency supplies to TBE/CDC for those hours they are here.

B) If children are in attendance on Alcott premises, they will remain on the Alcott campus as responsibility of that school until picked-up by parents from that location.

14. Children will be released **ONLY** to those listed as authorized on written enrollment forms, and only with valid identification. They will **NOT** be sent home with friends or other family members -- unless they

are listed on your written forms to do so (be sure your forms are current!) Also, be sure **each authorized parent** is listed on the bottom section of the main identification/emergency form (LIC 700) for pick-up (important for clarification of custody.)

AUTHORIZATION via Telephone calls is NOT ACCEPTABLE. Parents must provide written authorization for pick-up persons on LIC 700!!

15. If there is a court restraining order or custody agreement, the office must have a current copy of those papers, and that agreement will be followed even in emergency. Please stop by the office to complete a "Child Release Designation / Clarification" form.
16. Building damage will determine which access gate will be utilized. In general, it is anticipated that the double gates on the playground/exit side of the parking lot will be utilized. Select staff members will serve as safety/security, coordinating dismissal with the Command Team.
17. The primary evacuation site has been determined as the playground. Primary egress in case of fire is the two swing gates at the exit end of the property, with path along the brickwall to the church parking lot next door. A secondary evacuation site will be the fenced grass area in front of the Temple office.
18. In case of disastrous or hazardous conditions of the building, evacuation off the center site may occur to the Mt. Rubidoux Church playground / parking lot, or Poly High School's or Alcott Elementary's grass field. Signs will be posted if relocation is needed.
19. In the event of an emergency evacuation, one of the designated 1st aid personnel on the emergency and disaster form will coordinate with administrative staff to gather medication authorization notebook and will transfer locked / inaccessible medications from the office to a provided secure container, while retaining custody or oversight and administration of any such medications.
20. Any child requiring an Epi-Pen shall have a completed Special Care Plan on file with the office, with medication stored in locked cabinet in the office, and must include a signed permission slip and original container. A designated teacher will secure and transport in a provided fanny-pack or other approved container any Epi-Pen for a child on the walk to/from Alcott Elementary and/or any scheduled field trip.

PLEASE REMEMBER:

- In event of a "lock down" scenario as determined by the Riverside Police Department ... NO ONE will be allowed to enter or leave the Center premises until it is cleared / approved by their situation commander. The doors will be locked, and children will be moved away from the windows. Even if you are able to enter the gate, the doors will be locked and children will not be released to you until approved. Staff will remain with children until authorized to release. Please be patient, as it will take time to release children to families.
- Our goal is to reunite children with their families as quickly as possible when it is safe to do so, and will be released to authorized persons only (again, **be sure your contact information is current, with copies of any court/custody orders.**) Bring a copy of identification. Please complete a "Child Release Designation / Clarification" form in advance at the office.
- Our first priority is safety of the children, and our attention must be to accounting for every child and their well-being, checking the buildings for safety, and making plans as needed. **Understand that we probably will NOT answer the Center or cell phones if you do call immediately following an**

earthquake or incident similar, depending on the severity, so we may do our safety check or comply with lock-down procedures from RPD.

- **DO NOT panic.** Staff members have planned to remain with your children up to **72 hours** if needed! Alcott TK/K-6th grade children must be picked-up on the Alcott campus if an emergency event occurs during those school hours. Please be patient, and be safe yourself.
- However, in the unlikely event that you or an authorized representative have not been able to pick up your child after 72 hours, your child would be transferred to the appropriate agency, i.e. the Red Cross, Riverside Police Department, or Child Protective Services.
- In some circumstances of natural disaster (such as severe earthquake), **phone lines may be out of service**, and will be needed for emergency contact.

Specific Community-Care Licensing Related

24.0 CHILD RIGHTS

1. A full listing of a child's personal rights pursuant to California Code of Regulations and State Licensing has been included in your child's enrollment packet (form LIC 613). Please read it completely before acknowledging that you have received said copy, **indicated by your signature and return of form to the Center** as required by Licensing.
Note: Licensing analyst has authority to view child files, and interview a child
2. In summary, every child has the right to be treated with dignity and respect.
3. No person may threaten or enact corporal punishment upon a child (including parents while on the center site). Ridicule, shaming, withholding of food is not allowed.
4. While courtesy is encouraged as part of the curriculum throughout the day, children will not be reprimanded for not saying please, thank you, sorry, or excuse me. These are best taught and reinforced as parents and teachers work together.
5. Children will be involved in the clean-up process. Toileting accidents are treated with helpfulness, and accidental spills are treated in a matter-of-fact manner.

Invest those precious minutes with your child --
Please, no cell-phones while dropping off or picking up!



25.0 PARENT RIGHTS

1. Pursuant to California Health and Safety Code and the Department of Social Services, parents have various rights related to their children's attendance in a child care facility. A detailed copy of these rights has been included in your enrollment packet.
2. The following is a summary of the parent rights:
 - a) Parent(s)/guardian(s), upon presentation of identification, have the right to enter and inspect the child day care facility, in which their child(ren) is receiving care, without advance notice to the provider. Entry and inspection right are limited to normal operating hours while their child(ren) is receiving care.
 - b) The law prohibits discrimination or retaliation against any child or parent/guardian for exercising his/her right to inspect the facility.
 - c) The law requires that parents/guardians be notified of their rights to enter and inspect (part of enrollment packet to be retained in child's file).
 - d) The law requires that this notice of parent rights to enter and inspect be posted in the facility in a location accessible to parents/guardians.
 - e) The law authorizes the person in charge of the child day care facility to **deny access** to a parent/guardian under the following circumstances:
 - 1) The parent/guardian is behaving in a way which poses a risk to children in the facility;
 - 2) The adult is a non-custodial parent and the facility has been requested in writing by the custodial parent to not permit access to the non-custodial parent (with legal verification, such as a restraining order).
 - 3) Unlimited and unannounced access need not be granted to families not enrolled
3. Parents have the right to inquire whether a person is employed on exemption, and will then be referred to Community Care Licensing for more information.



26.0 WELFARE OF A CHILD / Mandated Reporting

1. The welfare of all children is the concern of all adults at Temple Beth El Child Development Center. **By law, teachers are mandated reporters of suspected child abuse and neglect** with training every two years. Please be aware of and report to staff any situation and/or conditions that may affect the welfare of any child (please note: leaving young children unattended in a car, smoking in vehicle with minor present, or riding without a car seat is in violation of State law and may be reported.)

2. Under California law, the Department of Social Services (Licensing) "has the right at any time, without notice or prior consent, to privately interview children or staff at the school, to inspect and audit the child's records, to observe the physical condition of the child, including conditions which could indicate abuse, neglect or inappropriate placement, and to have a licensed medical professional conduct a physical examination of the child."

3. When a law enforcement officer reasonably believes there is an immediate threat to a child's health or safety, the center must release the child to the officer, who can take the child into temporary custody. In such a case, the law requires that the center provide the officer with the address and telephone number of the child's parent or guardian, so the officer can notify the parents in accordance with the law. If unable to reach the parent or guardian, the officer will notify a social worker to assume custody of the child (Health & Safety Code 1596.876).



27.0 RECORD KEEPING

1. The State Licensing Department of Social Services requires complete and current information maintained on each child enrolled.
2. Parents are required to notify the school in writing of changes in personal circumstances, i.e., address, phone, number, authorized pick-up persons, or allergies. It is your responsibility to provide the school with emergency information where you, or some other person willing to be responsible for your child, can be reached. As stated previously, the office must be provided with any restraining order, custody agreement, or other court agreements regarding visitation or pick-up. **Be sure to list yourselves as parents at bottom of LIC 700**, and/or complete a "Child Release Designation / Clarification" form if there are custody matters.
3. While children's files are available only to school and licensing staff, the Health and Safety code requires that a parent directory would be available each year. Typically, a message will be taken from the requesting parent and given to you for contacting that parent at your choosing. Please notify the office in writing if you specifically do not want to be listed in a parent directory.
4. TBECDC uses an updated version of *ProCare* for electronic files of children and connected account receivables for their parent(s). Hard copies of all paperwork are maintained in each child's file.
5. Sign-in/out sheets, and diapering and sleeping charts are kept for three months, and children's files are maintained at the school for three years, as required by Licensing.



28.0 PARENT-SCHOOL COMMUNICATION and PARTICIPATION

1. Though there are ongoing modifications based on current health restrictions, parents continue to be an essential component of TBECDC's successful, quality program. You are welcome to observe, eat lunch with your child, or volunteer in the classroom or in other school activities. Some of these opportunities include: field trips, Room Parent, fundraisers, sharing talents or time in the class, and more. Families are encouraged to engage in classroom experiences with their children (NAEYC 3F-676).
2. Parents are welcome to visit at any time, typically up to an hour per visit. (subject to any court order.) Please coordinate volunteer time with your child's teacher(s). Any parent or other volunteer who helps in the classroom must sign-in at the office each time on campus. This is a fire safety precaution so there is an exact count of on-campus personnel, as well as a Licensing issue, so only authorized persons are in classrooms. You will be given a name badge to wear while on campus.
3. Resuming in phases this Fall: **Parents shall read, sign, and return a Volunteer Guidelines prior to classroom or field trip assistance.** Regular volunteers must have TB clearance on file, and fingerprint clearance if more than ten hours per week are spent in the classroom. Newer State law requires volunteers to provide proof of immunizations before volunteering, with mask indoors.
4. Parents who volunteer to drive on field trips must read/sign/return a Volunteer Guidelines form – and provide a current copy of insurance for EACH field trip.
5. Parent(s)/guardian(s) need to communicate with the center on a regular basis. A parent bulletin board is visible as you enter the center, and a monthly newsletter is provided, as well as weekly news notes available in each class.
6. Please briefly greet your child's teacher each time you arrive. As teachers are responsible for the entire room of children, it is best to set a meeting to discuss concerns or lengthy questions.
7. Parent-teacher conferences to discuss children's development are set for December-January, with periodic written updates, though parents are welcome at *any time* to request a meeting with child's teachers. A second developmental update is provided the end of May.
8. TBECDC seeks to value and recognize family cultures and traditions in various ways. The family history page included in the enrollment packet helps staff to be aware of values and important events in the life of each child and his/her family.
9. We regularly review curriculum for family and cultural sensitivity, and we welcome your suggestions for incorporating accurate information that is neither biased nor simply "tourist"-based. This is achieved by integrating activities, books, foods, and similar in everyday curriculum (not just on holidays.)
10. Teachers and parents are encouraged to work in partnership to establish and maintain regular, ongoing, two-way communication in order to learn about children's individual needs and ensure a smooth transition between home and program, supporting the development and maintenance of children's home language whenever possible.
11. Family/parent conferences, daily "Child's Day" forms for full-day children, diapering log, emails, and similar are used to promote dialogue with families. Materials and communications will be translated as needed (sign language interpreter needs two-week notice, otherwise relay operator for phone calls).
12. Teachers shall work together with families to help children participate successfully in this setting when professional values and practices differ from family values and practices.

13. Individualized routine care is provided for Infants, Toddlers, and Twos by incorporating family practices whenever possible and respecting the home culture and the family's preferred language.
14. Children shall be given opportunity to participate in decision making related to the classroom rules, plans, and activities (NAEYC 1D-75-76). These classroom rules, expectations, and routines at enrollment and also throughout the year by teachers and as needed.
15. Teaching staff will encourage you, as families, to regularly contribute to information and decisions about their child's goals and plans for activities and services. A file in each room's crate is provided for suggestions, concerns, or similar.
16. Teaching staff are to be consistent and predictable in their physical and emotional care of all children, functioning as secure bases for children, responding promptly in developmentally appropriate ways to their positive initiations, negative emotions, feelings of hurt and fear, and by providing comfort, support, and assistance (NAEYC 1B-22).
17. Teaching staff encourage and recognize children's work and accomplishments, evaluating and changing responses based on individual needs. Staff vary their interactions to be sensitive and responsive to differing abilities, temperaments, activity levels, and cognitive and social development (NAEYC 1B-26-27).
18. Teaching staff support children as they practice social skills and build friendships by helping them enter into play, sustain play, and enhance play by providing opportunities for children to play with and learn from each other (NAEYC 1C-54); additionally they facilitate positive peer interaction for children who are socially reserved or withdrawn and for those who are bullied or excluded.



29.0 FIELD TRIPS / TRANSPORTATION

1. Field trips related to monthly themes may be planned periodically for our 4-5 year old PreK/TK children, and summer trips for school-agers.
2. "Virtual" field trips are implemented through use of technology. We may "visit" a fire station, grocery store, and other locations. Many of the discussions and enrichment activities will remain similar, such as dramatic play, and adding support items throughout the centers. Our goal is to expand children's interests and knowledge within the safe boundaries of school (while saving gas and insurance liability for parents.)
3. Additionally, throughout the year special activities may be brought to the school site, such as a pumpkin patch, dentist, or fire truck.
4. Parents are encouraged to share information about their occupations, skills, and/or family celebrations or interests. A family's opinions or views may not be forced on children, or pushed as "right."
5. If a child's behavior poses a safety concern or threat to his/herself, or to others, alternate arrangements may be required from the parent at the discretion of administration.

6. Parents may choose not to send their child on the field trip for whatever reason with notice to child's teacher. Alternate care will be provided at the center. If accommodation is needed for a child with disability, please discuss and make arrangements with your child's teacher in advance.
7. Parents will be notified prior to each outing off-site. A permission slip for each trip will be required for each off-campus trip. If choosing not to send a child on any trip, please notify the teachers so that arrangements can be made in advance for your child to be placed with another class for the day (or may be kept home.)
8. For most off-site field trips, parents will transport the children. Parents shall read, sign, and return a "Volunteer Guidelines" form prior to participating in field trips or classroom assistance.
9. The vehicle will be licensed according to the state law. Proof of current insurance and driver information must be in the office for each trip, and is required even if you are only transporting your own child.
10. The vehicle must be able to accommodate car seats for children not yet 8 years of age or not yet 4'9" tall.
11. Sorry, **no siblings** are allowed on field trips. (Please refer to our "volunteer guidelines.") Please **do not meet the class** or "just show up" at the field trip site with other children. Parents need to allow this to be a focused learning experience with the child and his/her classmates by securing a babysitter for other child(ren).
12. Each child will be fastened in his/her own individual, correctly installed safety seat, and children will be accounted for at all times.
13. Parents who have gone through a background check (fingerprinting) and have training in CPR and First Aid are highly desired.
14. While driving or supervising during a field trip, parents are to stay with and maintain careful awareness of their assigned group of children, and are not to take side trips such as getting gas, or stopping for coffee or snacks.
15. Teachers will direct appropriate discipline if needed related to children's or adult behavior while on field trips. First aid kits are readily available to staff and maintained for each group of children of children and one kit shall be taken on field trips and on the playground (NAEYC 9.C.10).
16. Teachers make transportation assignments based on those who have volunteered to drive. Please give at least 24-hour notice if unable to drive for whatever reason, and please arrive promptly. If you are feeling ill the day before the scheduled field trip, please call (682-7282) so alternate arrangements can be made. As every day, there will be a health inspection upon arrival at school. Any child or driver appearing ill on the field trip day will be asked to return home.

Alcott School-Age Walk-Over and Transportation

17. TBECDC's before and after school program includes walkover to/from Alcott Elementary School. Children are counted and roll call is done each day prior to leaving a site, and also upon arriving.

18. If a child's behavior poses a safety concern or threat to his/herself, or to others, during the walk, alternate arrangements may be required from the parent at the discretion of administration.
19. A permission slip for walking and/or transporting school-age children in a private vehicle, written is required from the parent each school year. Reminder – children must weigh at least 80 pounds or taller than 4'9" to ride without a car seat.
20. The teachers will give additional attention on occasions that weather is inclement. On hot days, water bottles, misters, and umbrellas will be provided. For light rain or sprinkles, umbrellas and hoods will be utilized for the walk. Parents may choose to drop-off or pick-up on those days if desired (please let office know.)
21. On moderate to heavy rain days, private vehicle transportation will be utilized as available. Children will be dropped-off near the bus area for supervision and/or assistance by Alcott personnel if needed. A teacher will wait with the children until all have departed, though this results in a longer wait time for children. If you as a parent are available to transport children on these days, and can provide proof of current insurance, please notify the office (951) 682-7282.
22. Parents of Alcott after-school children shall **notify the OFFICE at least one hour in advance** if pick-up is not needed on a scheduled day (951) 682-7282. Otherwise, time is spent looking for the child while the group (and parents) wait, group safety is affected as one teacher is pulled away to search for the child, and then results in a telephone call to you as a parent to verify child's whereabouts. A "no call" fee is incurred as well. (Do not call a staff person's cell phone.)

30.0 BIRTHDAYS, Materials Fees/FUNDRAISERS & OTHER SPECIAL DAYS

Throughout the school year, children and families are encouraged to participate in special events. Some of these special days may include: Back-to-school events, dress-up parade and class parties, Thanksgiving celebration, book fair, photo days, petting zoo, birthday recognition, and family events. The food program will provide yummys for many of these activities (rather than potlucks.) Please check the parent boards and lesson plans for more details on these special events!

1. Some type of back-to-school open house event is generally held the last Friday in July. This is a casual time to mingle, enjoy good fellowship, find your child's cubby, try-out the playground, and let your child design a name tag or something similar.
2. The last few days of October, the children are invited to dress-up for one of our parades. The month's theme typically integrates community helpers and our world in fall. No costume masks that cover the eyes, please. / #3 is missing
4. During the Thanksgiving season, the cooking days in class will prepare healthy foods for the children to celebrate together.
5. Each classroom recognizes children's birthdays. The class will sing "Happy Birthday" to the child, and make a special birthday crown or poster. Please, do not send clowns, piñatas, ponies, etc. at school.)
6. For parents choosing to send a birthday treat, the treat should be nutritious and will be sent home to enjoy.



7. Parents often donate a book to the classroom. This gives the birthday child the honor of giving, not just receiving, on their special day. If you wish to donate a book in honor of your child, the teacher can give you an idea of what the class would enjoy.
8. If a birthday is to be celebrated away from school and the entire class is not invited, please mail the invitations to children's homes. If the entire class is invited, please feel free to bring the invitations to school.
9. Staff may receive unsolicited expressions of appreciation or gifts from children or parents at school (value not to exceed \$25). Parents should not feel required or compelled to contribute supplies, gifts, or other items to the normal operations of the classroom environment. Yet, teachers are discouraged from giving presents in a personal setting to avoid appearances of favoritism and to avoid strain on teacher finances.
10. Fundraisers: The monthly materials fee allows for special activities, and projects around the center, such as rubber matting for the toddler playground. This has replaced other fundraising events, other than our book fair, typically each Spring. Special event may vary each year – since we have many wonderfully talented parents to sponsor these events.
11. Periodically through the year, parent workshops will be offered, info fliers such "Re-Think Your Child's Drink", or classes sponsored by a community organization.



31.0 SEPARATION

1. One way we help connect home and school is asking you to complete the "Tell Us About Your Child" and the "Family Traditions" forms. In this way, you share valuable information with us about your child and things that are important to you – and then we are able to integrate these into your child's day here at TBE CDC. Thank you for taking the time and energy to thoughtfully complete these papers.
2. An important step in adjusting to saying goodbye to your child each day is that you are sure you are comfortable with your decision. We recognize you and your child may have more questions or feel uneasy during times of transition or illness. We will provide comfort, support, and even hugs as appropriate while your child is in attendance.
3. For full day children, a daily "Child's Day" page will be completed and provided by teaching staff and sent home. While parents are encouraged to chat with teaching staff about their children every day or as desired, teaching staff shall ensure continued communication on a weekly basis regarding activities, well-being and development, and similar issues (NAEYC 7B-1118).

4. In our program, you can count on staff members to help your family during this important time. We know that every parent and every child adjust differently and needs time to feel comfortable in a new situation. A preschooler may cry, scream, or cling when you say goodbye. This behavior, called separation anxiety, can cause anxiousness for you, too – especially if you've been home for an extended period of time during the height of the virus. However, this is a big step in your child's development, as they need more experience to be sure they can trust you to come back. How you handle the situation can set the stage for how your child adjusts to other challenges in life. For more information, a brochure is provided in the office.
5. Children, just like adults, feel more comfortable if they know what to expect. We welcome you to visit our program prior to actual attendance, typically up to one hour per visit, and for your family to attend "back-to-school night," and throughout the year. Your child and family will have the opportunity to participate in activities and have questions answered. Show your child where his/her cubby will be. As you get home, casually and **positively** discuss the fun things you saw.
6. On the first day, allow plenty of time for getting ready, out the door, and to the program. If you are feeling stressed or rushed, it will be contagious. A teacher to greet you upon arrival at the door.
7. Start some arrival routines together: sign-in, transfer belongings to the teacher, place lunch box in on shelf or hook, or wave goodbye from a special window.
8. When it is time for you to go—no matter how tempting it might be to leave unnoticed -- do not leave without saying a goodbye. Be sure to tell your child when you will be back, "I'll pick you up after lunch." Then be sure to do just that – leave and return on time. Always say goodbye with a kiss, a hug, and a wave. Be firm but friendly about leaving.
9. Teachers often will get children involved in an engaging activity after saying goodbye to ease the transition. Any dismay a child may have most often ends fairly soon after you leave. However, when children can see their parents lingering on repeated occasions, the transition for children is more difficult, and they tend to participate in fewer activities as they sense your hesitation.
10. Teachers will seek to create many links between your family and school. Each classroom has a telephone, and you may call during the day for reassurance that your child is doing fine. During the day, staff members are always available to talk with or comfort your child.
11. Please note that teaching staff generally will NOT return text messages or e-mails while with children during the teaching day, except during designated preparation or daily computer time. Please do NOT expect staff to respond to messages outside of their scheduled work hours or while with children.
12. On the first few days it is especially important that you maintain a predictable pick-up schedule. What can you expect when you pick up your child? Some children rush into your open arms, bursting with stories about the day. Some may ignore your presence, refuse to leave, or return to what they are doing. Some may want to talk about their day, while other times they won't.
13. Once again, develop pick-up rituals: gather child's belongings from the teacher, sign-out with time and signature, and say goodbye to children and teachers.

Check out our website at "www.TempleBethElCDC.com"

14. Encourage conversation on your trip home by asking open-response questions such as, “**Tell me about** what you did in blocks today,” or “**How did you** get all those colors on your painting?” Avoid closed-response questions that give little opportunity for discussion. A typical response to “What did you do today?” is “I don’t know” or “nothing.”
15. Soon the separations, and the joy of being together, will become part of the day for all of you. You will have met yet another challenge of parenting, and your child will have learned that the world includes hellos and good-byes.
16. Remember, be consistent, always say goodbye, prepare children for any changes in your routine, and set the example with your actions and words. A full brochure entitled “*So Many Good-byes*” is available to any interested parent.
17. Alternate arrangements may be implemented by administration for any school-age child that is unable or unwilling to separate and/or participate safely in the walkover to and from Alcott Elementary, including calling the parent to pick-up the child.



37. Children’s Unsafe BEHAVIORS / Discipline

Content summarizes the operational plan and guidelines for TBECDC. These are guides, and do not represent a contract, but are designed to enhance and facilitate Center operations, revised October 2024, and subject to periodic revision.

General Perspective on Discipline

Most days, children display a wide range of normal behaviors according to their development level at any given time. Young children will sometimes display their emotions or try to achieve their goals in unproductive, unsafe, or immature ways, which is simply part of being young. Challenging forms may include resistance, defiance, pouting, whining, and/or temper tantrums. Typically, the younger the child, the more common it is for these behaviors as they mature and can impulse control.

At TBECDC we strive to accept each child as the individual he or she is on that day, doing our best to meet each child’s needs every day no matter how they are feeling or behaving. It is expected that TBECDC staff accept their responsibility to provide and maintain a safe environment (Title XXII Regulations), while there are no quick and easy solutions when patterns of challenging behavior(s) arise.

Working with children’s challenging behavior is considered an integral aspect of the curriculum and teacher responsibilities. The word “discipline” has as its root meaning “instruction” or “training.” Our intent is to **teach new or replacement skills**, not punish or “fix” (Bailey 2017). Much of children’s most valuable learning can occur in the process of behavioral problem-solving through the learning of and implementing new or replacement skills.

“Misbehavior” is a Middle Ages term involving punishment which may result in:

- Child feeling stress from the punishment
- Child feeling negatively about self

- Child doesn’t learn discipline and self-control, therefore ...
- Importantly -- Child **does not learn what to do next time** the behavior impulse arises
- May make children angry, upset, defiant, and embarrassed ... and may actually escalate behavior!

With the foundation of “teaching,” discipline / guidance we provide is intended to be positive, productive and immediate when behavior needs replacement strategies of new skills. Every member of TBECDC’s staff is provided opportunity for ongoing training for treating children with dignity and respect, along with behavior strategies, supervision, guidance and management based on “teaching.” The GOAL of all disciplinary procedures is to limit the use of suspension, expulsion, or other exclusionary measures (new 2022 NAEYC 1E.1).

As teaching staff, you are expected to equitably use positive guidance, redirection, planning ahead to prevent problems, encouragement of appropriate behavior, consistent clear rules/guidelines, and involve children in problem solving to foster each child’s own ability to become self-disciplined as appropriate for their development.

Teaching staff are to assist children in resolving conflicts by helping them identify feelings, describe problems, and try alternative solutions. This includes a variety of behaviors, to guide any child who bullies, isolates, or hurts other children to learn and follow the rules of the classroom, as staff anticipate and take steps to prevent potential behavior problems (NAEYC 1C—55-58, 1D-77-78).

Teaching staff shall actively and intentionally teach children social, communication, and emotional regulation skills (NAEYC 1F-102). Also, staff shall help children manage their behavior by guiding and supporting them to persist when frustrated, play cooperatively with other children, use language to communicate needs, learn turn taking, gain control of physical impulses, express negative emotions in ways that do not harm others or themselves, and learn about self and others (NAEYC 1F-102, 108, 110).

No staff member may engage in any conversations or interactions with parents, co-workers, or children that could be considered inappropriate or confidential.

Physical punishment and psychological abuse or coercion are never allowed, and staff may never use threats or derogatory remarks nor withhold nor threaten to withhold food as a form of discipline. (NAEYC 1B-31R).

No child shall ever be humiliated, shamed, frightened, or subjected to physical, verbal or emotional abuse by any staff member (Title XXII). These are subject to immediate termination without any additional warning.

These guidelines and policies shall apply to all attending children. The ultimate goal is to help children:

- a) become aware of their own actions
- b) become aware of the effect of actions on people and things in their environment,
- c) learn new or replacement skills and ways to handle and interact in situations,
- d) develop increasing self-control as age appropriate, and
- e) become aware of the ways in which their choices can help resolve difficulties and conflicts.
- f) replace one or two challenging behaviors at a time

Over time, children learn that control comes from within. While courtesy is encouraged, children will not and cannot be reprimanded for not saying please, thank you, sorry, or excuse me.

PREVENTION of Unsafe Behavioral incidents

1. Behavior guidance may take many forms. Some of the preventative strategies we may choose to use include:

- A. Evaluation – staff members shall evaluate the room environment, the curriculum, temperaments, and the situations (such as transitions) surrounding a discipline problem for patterns. Use ABC method of: Antecedent what happened before / What was Behavior / Consequence – action taken by teacher
 - i. Assess for patterns, such as crankiness prior to lunch, needing a quiet space, too long of group time for the age, temperature is too hot or cold, and so on.
 - ii. Always consider the individual child for age, developmental levels, unusual situations, communication ability.
 - iii. Transitions are common triggers. Avoid waiting, use small groups.
- B. Environment – a safe, inviting place designed for young children, where the furniture and equipment is child-sized and provides numerous opportunities for hands-on, active learning experiences. Provide duplicates of favorite toys.
 - i. Infants/toddlers require activities and settings based on their Needs & Services Plans.
 - iv. Evaluate, then adapt the room, schedule, and situations to better fit the individual child's needs
- C. Logical Rules – shall be appropriate for each age group, such as respecting body space (keeping hands to one's self) and taking care of the learning environment.
 - i. Preschoolers may help develop rules for their room, while discussing why these rules are needed.
 - ii. Gentle hands, teeth are not for biting are typical for younger groups
- D. Curriculum – that is age- and individual-developmentally appropriate, based on children's needs, interests, levels of readiness. Teaching staff shall seek out current activities for lesson plans.
- E. Awareness – through observation and experience, teaching staff shall check for patterns of certain situations that may "trigger" mistaken behavior (i.e., being tired or cranky, family situation), and be alert throughout the day. Often it is helpful to modify activities or situations which may include moving children to different areas, involve a child as a teacher's helper, give prompters at transitions, and similar.
- F. Positive Behavior – shall be reinforced and encouraged, recognizing and praising improvement, as watching for appropriate interactions – especially for improvements when teaching new and replacement skills!
- G. Redirection – teaching staff shall engage young children in another activity, often avoiding a potential difficulty. A child may be asked to help the teacher or sent to a different area or activity.
- H. Duplicates – a strategy previously mentioned, which is especially needful with infants and toddlers and two year-olds, provide duplicates of favorite toys to reduce potential conflict.
- I. Positive reminders – telling children what we want them TO DO, limiting "no" or "don't" statements. Offer replacements for undesirable behaviors.

i. Avoid "no thank you", instead there will be times to say "No, you may not bite. Biting hurts. You may use your teether / pacifier". "You may kick the ball outside, you may not kick the teacher."

v. Limit offering food as a replacement behavior.

- J. Choices – offer many, acceptable choices and flexibility whenever possible, being willing to accept child's choice. Provide LOTS of outdoor opportunities for free play.

Other strategies may be implemented (some may be duplicated):

- ✓ Start each new day fresh, with new opportunities
- ✓ Closely monitor children who indicate immature impulse control, paying attention to signals / staying close to step in if child seems ready to get angry
- ✓ Teach new / replacement skills of non-biting responses to situations
- ✓ Give the words or signs, describe appropriate behavior / talk about and identify feelings using books, mirror, puppets
- ✓ "Catch" and reinforce appropriate and positive behavior and use of new / replacement skills (such as, "You didn't like being tickled, so you used your words to ask me to stop.") / Start with every hour if needed.
- ✓ At the same time, consider introducing a "freeze" game to help child respond to teacher prompt to freeze before a behavior. (Praise child if s/he freezes before biting.) Many children enjoy the "Frozen" movie, so make it fun.
- ✓ Minimize waiting times during transitions, engage child or involve as helper
- ✓ Consider additional outdoor learning time, engaging in meaningful activities such as filling bird feeders, weeding in the garden, or kicking a ball
- ✓ Be sure behavior expectations are age-appropriate and individually appropriate
- ✓ Offer toys with a variety of textures to meet sensory needs
- ✓ Teach responses to potential situations or setting limits such as "Stop" with hand up, or "I don't like that" or "that's mine."
- ✓ Engage child who has shown tendency to bite in a personal activity during transitions
- ✓ Utilize smaller group sizes throughout the day
- ✓ Help child to relax, breathe, or yoga / Limit or eliminate overly stimulating activities / Reduce frustration, changes and stress
- ✓ Remember for everyone to get plenty of sleep, eat healthy/ consider an extra break or help if needed
- ✓ Recognize it may take some time for the plan to work, to change behaviors
- ✓ Continue implementing agreed-upon plans as updated
- ✓ Document notes and plans from parent meetings, keep behavior charts current, follow guidelines for incident reports and notifications to office and parents
- ✓ Check with office for extra person if sensing a challenging time
- ✓ When a shadow is provided in a classroom, s/he shall cover the Teacher in order for the Teacher to work directly with the shadowed child.

General Unsafe Behavior Approach for GUIDANCE

1. Occasional, periodic or random acts of general “normal-for-the-age” behavior incidents should be anticipated (such as biting, hitting, spitting, or kicking). One size doesn’t fit all especially within varied age groupings, including individual children. The following are typical actions to be implemented by teaching staff:

- A. Approach the situation calmly, observe what is happening and prepare for a positive outcome. Gently but firmly stop any action that might harm or hurt another child. You may say “No” (all the time indicates other preventive measures are needed.)
- B. Reasonable attempt shall be made to prevent injury. As defined by the Environmental Protection Agency (EPA) an injury is any effect on a human that requires medical treatment or hospitalization May 29, 2024
 - i. Causing an “injury” that requires medical care or potential is different from simpler unsafe or behavior that may hurt a child, which may be intentional or unintentional.
- C. If a child has been hurt, the other may be asked to help in the care and comfort of the receiving person, with priority attention to any simple boo-boo.
- D. After attending to the situation, children will be reminded to use their words to tell the other how they are feeling.
- E. Pull-aside children if possible.
- F. Use open-ended statements by directing questions to one child, then another, while listening for details (especially if incident was not seen by teacher). Ex: tell me what happened...
- G. Facilitate conversation by offering words or language a child may need to express his/her feelings. Discuss and recognize each child’s feelings.
- H. Staff may restate the problem according to what the children say, and may ask questions that may further clarify the problem.
- I. With children that are older or have adequate verbal skills, the staff may ask for ideas for solutions, being prepared to give suggestions. Ex: What do you think we could do? How were you feeling? The suggested solution(s) will be restated and the staff member will ask for a decision or agreement. Ex: so we will use our feet for kicking a ball, not another person.
- J. Children may be encouraged to complete the process, with staff prepared to give support. A forced, insincere “sorry” will not be mandatory, but generally ask what could be done or said to resolve the situation. Ex: what do you think would make him/her feel better?
- K. Staff will chart harmful, problematic, annoying types of behavior to evaluate for patterns and action plans. In compliance with NAEYC confidentiality guidelines,
- L. The attending staff member will write up a “Please Note” for any injury that might require medical care, with courtesy call to parent, and copy of note sent home to parent. Consult with office if needed for clarity.

M. At all times, TBECDC staff shall maintain complete confidentiality of all children involved when notifying parents, and not disclosed to others not directly involved.

N. Corporal punishment, humiliation, intimidation, or withholding of food is NEVER allowed, as required by Licensing.

- 2. “Time out” generally is not used; however, there may be selective situations in which moving the child to another area of the environment may be prudent for the safety of him/herself or others. This period may be used to redirect the child to another activity, or may be some time just long enough for the child to regain self-control, generally not to exceed one minute per year of age while teachers monitor the activity and effectiveness.
- 3. Physical restraint may not be used *except* as necessary to ensure a child’s safety or that of others, and then in the form of holding by another person as gently as possible only for as long as is necessary for control of the situation.
- 4. Medicines or drugs that will affect behavior will not be used except as prescribed by a child’s health care provider, and with specific written instructions from that provider and with written permission of the parent for the use of that medicine.
- 5. Teach New and Replacement Skills

We shall guide young children what to do or say, starting by giving all the words, in addition to what is not acceptable, such as:

For the child who bit, a generic formula with toddlers/twos may be:

You wanted _____ (that toy), so you _____ (bit her arm.) You didn’t know the words to use. No, You may not _____ (bite), _____ (biting) is not safe. When you want _____ (the toy), do (or say) _____. Let’s try saying that. //

Or: No, it is not okay to (bite, hit). Use gentle hands / you may bite on this teether

Or: you may kick a ball outside, it’s not okay to kick a teacher.

Or in combination with the child who was bitten, the teacher may say: See his face? His face is saying “stop, I don’t like that” (hand up to show stop). Joey, tell him you don’t like that.

Consider this teacher guidance: When you want that toy, tap his shoulder like this, say his name, and wait for him to look at you. Let’s try it. See his face? He likes that. Now, when he looks at you, then hold out your hand (toddlers) or say (twos+ with verbal skills) “I want that toy please.”

Unsafe CHALLENGING Behaviors for preschoolers (ages 30+ months)

- 1. While some behaviors are generally inherent or anticipated with toddlers and two-year-olds, preschoolers have developed a few coping skills, though still in development.
- 2. Challenging behavior for preschoolers is defined as “Any behavior that (1) interferes with children’s learning, development and success at play, (2) is harmful to the child, other children, or adults, or (3) puts a child at high risk for later social problems of school failure.”
- 3. Challenging behavior has different forms at different stages of development or age, and may include: physical aggression (hitting, biting, shoving, whacking with toys), relational aggression (“you can’t play

with us”), verbal bullying, tantrums, testing limits, or refusal to follow directions or observe classroom rules.

4. Some challenging behaviors have potential to injure (possible medical care), with additional considerations:

a) Was the behavior Unintentional – accidental (such as bumped into each other while dancing) OR Intentional (such as hitting or kicking when mad)

b) Did behavior cause injury or harm, or was it annoying or disgusting? Did it occur within similar group play? Did “play” get carried away? Was furniture thrown? Child running out of the classroom?

c) What was level of incident?

ice pack and TLC basic first aid doctor care required life threatening

5. Extreme physical behavior for potential to injure, such as choking, toward staff or children, will typically result in an immediate call to parent to pick up the child. Staff shall intervene immediately if the child exhibits uncontrollable, aggressive, or disruptive behavior that cannot be successfully modified by other methods.

ACTION PLAN for Repeated Unsafe BEHAVIORAL Incidents

Informal discussion for all age groups will be initiated with parents for teamwork with infrequent or random incidents. If the challenging behavior is repeated over several days without reduction or extinction following general guidelines, any or all of the following steps may be implemented, with flexibility for each individual situation.

Step 1: Teachers shall start formally tracking behaviors (chart) to evaluate patterns, starting documented discussion with parents. It will be assessed if behaviors are annoying, harmful or hurtful, or if causing medical care as an injury (injuries with courtesy call home & note form).

Teachers shall consult with office for strategies to implement, along with support for the teachers.

Teachers will confirm the validity and situation of each incident, as an injury may have been accidental or unintentional, or one action was a result of another action, or children were all playing the same but one got hurt, as it becomes easy to blame the child with known areas for growth.

Considerations: Perhaps there has been a change at home, child is feeling ill, new baby or job loss, or there are inconsistent behavior expectations. Parents and teaching staff need to work together to understand what and why is the behavior happening. Sometimes the child thinks it is funny, trying to enter play, or get attention – not being angry or intent to harm.

Use the A-B-C approach mentioned previously and consider: Is the behavior typical for that age child? Are there patterns of times, others, situations? How was it handled? Have the strategies been implemented by all teaching staff? What is nature of behavior, frequency, and severity?

Step 2: A variety of strategies will be implemented once tracking has been initiated for intervention of behaviors with potential to injure. Typically, the teachers shall discuss ongoing behaviors with the office, and set an action plan meeting with the parents to discuss strategies.

Step 3: At the meeting, discuss and develop a behavior action plan between the child’s teacher, parents, and office staff.

a) Strategies, recommendations and timeline will be developed for all to implement (best at home and all interacting staff at center).

b) Active participation by parents is desired for problem solving, and supportive to implement strategies with TBECDC staff and at home, otherwise these steps may not be effective.

i. If both parents have custody, both are requested to be present at the meeting(s) for coordination of support intervention.

c) A variety of strategies will be considered for implementation as replacement skills, praising improvement, helping child with interactions, minimizing transitions, watching for triggers, shortening attendance day, evaluating the environment and schedule, and providing quiet space.

c) Parent(s) may be provided information for resources, often including PCIT or Wylie Center or school district.

e) Staff shall utilize provided checklist for following procedures and track behavior, document plans from the meeting (provide copy to office), along with a “check-in” feedback for monitoring progress and for their own support.

➤ Once a child a behavior plan has been developed, or revised plan, follow-up will proceed accordingly.

Note: It takes time for replacement behaviors and other strategies to be successful, and there may be more than one problematic behavior. One (maximum two) behavior will be targeted at a time. Generally, there will be a behavior plan for each behavior, with priority on any that is harmful to others (spitting is gross and gummy, though not the same as hitting.)

Step 4: Monitoring and adjustment - Each new action plan shall be regularly reviewed by attending (Lead) teacher and attending office staff for one month (4 weeks). At the discretion of TBECDC, the plan may be continued, revised and updated for additional timeline depending on behavior progress or improvement.

ADDITIONAL steps as warranted:

Suspension of attendance:

Despite implementation of these strategies and other reasonable interventions, wherein previous attempts have been followed and no apparent progress has been made or aggressive behavior escalates, the child may be excluded from attendance for a determined period of time or indefinitely, with agreement that exclusion is in the best mutual interest of the child and program (new 2022 *NAEYC 1E.1*). This complies with federal and state civil rights laws, while subject to California State Licensing requirements based on citation of personal rights or children.

Notwithstanding, the Administrative Director or Associate Director/School-Age Coordinator may immediately exclude or suspend a child if s/he exhibits a behavior that is extreme, seriously injures or endangers him/herself or others (such as choking a child, or other action with apparent intent to injure). Exclusion may vary from a few hours to an indefinite period.

FREQUENCY & SEVERITY of behavioral incidents

While TBE CDC is committed to providing a safe environment for all children, we realize learning and using new and replacement skills takes time and consistency. Some behaviors may be frequent yet are age appropriate or do not require medical care. However, repeated incidents that have potential to injure require additional consideration and actions. The following are general guidelines, as TBE CDC reserves the right to determine actions based on individual situations.

A) During the course of one attendance day, a **parent will be called to pick up** if a preschool child (older than 30 months):

- ✓ Completes one intentional actions of aggression with injury (potential medical care) to another person or self, or damage to property
- ✓ Completes two physical acts of aggression with potential for injury, hurt but no actual injury to person, self, or property, or
- ✓ Attempts to inflict injury four times with teacher intervention that prevents incident

B) Repeated calls to pick up:

- ✓ Two calls to pick up during one week will generally require a child's parent to make alternate arrangements for the next full attendance day
- ✓ Another week of two calls (B) within 15 days of the first alternate care, will generally result in two days away from the center

C) If there is no improvement, or targeted behavior escalates upon return from two days away, withdrawal from the program is generally triggered

D) If there IS improvement, and a child completes multiple days of attendance without a targeted behavior, we would return to step one if the child bites (kicks, spits, pushes) again.

9. A child's family is responsible for repair or replacement of school property deliberately damaged by a student. This includes any intentional damage caused by a school-age child to private property of residents along the walk to and from Alcott Elementary School.

"IMPROVEMENT":

Targeted behavior is generally considered to be improving if it reduces in frequency or intensity, or redirecting, with implementation of strategies. During the typical timeline, strategies such as shadowing will continue as staffing is available. Upon agreement, this will shift to near-by monitoring, then awareness of child's interactions and triggers. This may allow for addition or transition to another problematic behavior as outlined on the other behavior plans.

When there is improvement, and as targeted behavior incident is determined as consistently reduced, we start again with step one if the child exhibits the same behavior again.

It is frustrating, but challenging behavior can manifest in another way as the targeted behavior resolves. As each challenging behavior will be targeted and addressed separately, the replacement / extinguish process begins again with each new behavior.

Step 5: If there has not been improvement in the targeted behavior intervention by the end of the month, or if behavior escalates at any time, a second strategy meeting is generally scheduled, which may include the parent(s) being notified to secure behavior intervention from one of the provided or similar sources within one week. Detailed plans and strategies will be developed.

Step 6: The "non-improvement" process with behavioral plan may take time, with no deduction in tuition for non-attendance days. If there is no improvement or behavior escalates in frequency or severity, then withdrawal from the program is generally triggered. This may be with two weeks' notice or immediately, as deemed needful by TBE CDC administration, applying tuition deposit.

Additionally, if the child's family does not secure additional support and behaviors continue or increase, notice will be given for exiting the program.

Typical RESOURCES: Inland Regional Center, your school of attendance, PCIT – we'll be happy to share!

Perspective on BITING and similar behaviors (generally -30 months)

Young walkers, toddlers and two year olds biting others is one of the most common, and can be the most challenging, behaviors to deal with in group child care settings. Periodic outbreaks of biting occur among youngest children, though only occasionally among preschoolers (30+ months). When it happens, it can be scary, frustrating, and stressful for all involved. Biting incidents often provoke strong emotional responses in the biter, the recipient, all families, and the caregivers. All involved want the behavior to end as quickly as possible.

There's no simple explanation why some young children bite while others don't, and it can arise at any time with any child. Here are common triggers for biting: discomfort of teething or ear infection, frustration, boredom, inadequate language skills, stress or change in their environment(s), feeling threatened, excitement and over-stimulation, immature impulse control or self-control, learning to play, and even becoming independent. Biting is the child's unspoken message of: "I don't know any other way to get what I want or how to express my frustration, help!"

Therefore, TBE CDC shall staff implement a variety of methods to determine what the child is trying to express, and then individualize strategies to teach new or replacement skills for the young child who is biting to motivate him/her to do things differently that are safe for everyone. Fortunately, as children learn new and replacement skills, mature, gain self-control, and develop language, they usually outgrow this behavior (though other behaviors may replace the first behavior.)

Understanding the developmental stages of the children and their individual needs is crucial to preventing and changing a variety of behavioral incidents:

Infants ~5-14 months

Infants learn about the world around them by exploring with their hands, eyes, and mouths. But infants often need help to learn what they should and shouldn't bite. Similarly, they can't yet distinguish play (blowing raspberries or kisses) from biting.

Toddlers and Twos ~15-30 months

Developmentally, young children 15-30 months are not ready to share, and just starting to take turns (in the “mine” stage.) They communicate physically before they use expressive language.

Because their social conscience and expressive communication skills are limited, toddlers/twos may tend to shove, push, pull hair, and bite, often during transitions. *These young children are just beginning to learn higher-level skills like expressing and managing strong emotions in non-hurting ways.* (Even as adults, we still may get angry when a driver cuts in front of us or someone else grabs the last muffin we wanted.)

While common and developmentally “normal,” our goal is to prevent, respond, and implement strategies to minimize and extinguish those behaviors demonstrated by toddlers.

Initially, biting may start as part of the experiment of life. They feel the impulse, their brains have little impulse control yet, and they just do it.

Over time, toddlers learn that biting or similar behavior is powerful, and it becomes a learned behavior they are likely to use again, wherein this behavior unintentionally has been reinforced as a go-to expression of that impulse. Toddlers may try it out as a way to get what they want from another child, or to express their frustration.

The child’s unspoken message may be: “I don’t know any other way to get what I want or how to express my frustration, help!”

Preschoolers ~ 4-5 years

Biting is much less common in preschoolers. Other behaviors, such as hitting, kicking, spitting, or swearing may replace biting, and are more common in preschoolers in expressing their different emotional feelings at this age. When a preschooler bites another or self-bites, it may be due to something causing the child to be upset, frustrated, confused, or afraid. Sometimes it is to get attention or to act in self-defense if child feels threatened.

1. Summarized, common root causes of biting in young children:

- teething or experimenting with muscles in new way
- “play” biting in other situations
- learning to play with others, or rough houses with older children
- impulsiveness or lack of self-control
- desire for attention (even if negative)
- excitement or over stimulation ... or the opposite of boredom
- frustration or developing verbal skills
- competition over toys or attention
- feels stressed by new or changing situations (new baby at home, removing pacifier, etc.)

2. In addition to steps previously outlined for preventing other types of repeated behavior incidents, teaching staff will implement any or all of these strategies to prevent biting incidents:

- Teach general skills for all children in how to enter play situations, ask for help, define personal space, expressing feelings and behaviors in safe ways
- Reinforce desired behavior, and recognize and praise improvement
- Discourage play which involves “pretend” biting
- Help children learn to communicate by using words, modeling words as needed
- Evaluate and/or change the environment
- Spread children and activities throughout the classroom / stay close and aware, provide duplicates of favorite toys

- Increase children's sense of security and stability
- Prepare children in advance for transitions
- Rearrange play partners and play choices
- Connect and develop trusting relationships
- Engage children in activities while assessing appropriateness
- Avoid staffing changes

3. What we do when a first time or RANDOM incident occurs (similar to previous content):

Immediately:

- ✓ Intervene at situation, firmly say “No!” ...Examples: “teeth are not for biting, you may bite your teether toy. Or gentle hands as guiding. Or You may not kick people, but you can kick a ball when we go outside.”
- ✓ Attend to and comfort the child who was bitten, clean the bite area, provide first aid if needed, ask what happened (if didn’t see and child old enough to explain, or another teacher)
- ✓ Talk with child who bit, as opportunity to teach a skill. Ask what happened if didn’t see it.

(Try to get the whole picture ... the bitten child may have pushed, poked, or a toy had been taken from the child who responded by biting.)

- ✓ Write incident note to parent of child who bit, write boo-boo note to parent of child who was bitten (call both families if skin is broken, and write an ouch report)
- ✓ Talk with child who was bitten, and child who bit using the general formula previously mentioned

Same day review:

- ✓ Document ABC – Access what happened prior (Antecedent), what the behavior was (Behavior), and what was the consequence or how handled (Consequence) – discuss what to do or adjust
- ✓ Check staffing to child ratios
- ✓ Check the schedule and environment
- ✓ Make any needed adjustments to next day’s schedule, classroom, or activities

That week:

- ✓ Insure adequate supply and duplicates of favorite toys and materials
- ✓ Recognize positive and replacement behavior skills
- ✓ Offer reasonable choices
- ✓ Give time for transitions, involve child
- ✓ Staffing proximity to be watchful of children in similar situations of the previous biting incidents
- ✓ Guide children to play in different areas or other redirection

4. ADDED considerations if biting or similar behavior is frequent or repeats:

As previously discussed, biting and related behaviors is common in toddlers and anticipated, so teamwork to minimize or extinguish those behaviors is beneficial for the child’s success. Recurrent incidents require teamwork and consistency to resolve, wherein teaching staff shall:

- Call home if there was broken skin or injury (possible medical care needed) for the child biting to be picked-up for the day. Use “please note” page if completed bite without broken skin.
- On a behavior chart, record every occurrence of biting attempt, completed bite, severity, location, time, participants, behaviors, circumstances and staff present
 - Keep contact with family, using chart but not ouch reports unless broken skin
- (Lead)Teachers shall conduct a comprehensive review (Teacher), including:



Thanks for RCC, Bermuda Dunes Learning Center, Training & Research Foundation, and others for sample wording of policies!

- ✓ Patterns of biting situations (such as: is child tired or hungry? Same child or area?) – perhaps schedule needs adjustment
- ✓ Quality of relationship between the child and staff, and their knowledge of child's needs, routines, interest
- ✓ Environmental influences such as room arrangement, availability of play materials and equipment, noise level
- ✓ Social / emotional supports such as daily routines, transitions, positive reinforcement, stress reduction such as breathing or yoga
- ✓ Outside of center influences such as new baby at home, parents in divorce, late night at grandpa's house
- ✓ Training and skills of teaching staff, consider needs & supports

5. Meet with Administrative staff, then meet with the parents of the child to develop and coordinate strategies / work together to keep informed, schedule follow-up conversations as needed / provide support resources and contact information

ADDITIONAL steps if toddler biting becomes *DAILY (throughout day)* or causing injury:

- Meet with the parents of the child (and all caregivers) who is biting to refine the action / strategy plan, which may include shorter attendance hours or fewer attendance days for a designated period of time (such as 2-4 weeks)
- Consider transition to another class environment if developmentally appropriate and space and ratios are appropriate
- When able, assign one teacher to cover the Teacher to provide "shadowing" for given time, which may require an additional staff person based on the budget availability of the Center
- Keep in regular communication and teamwork between teaching staff and parent(s) ... daily, then weekly
- Office may prepare parents of the possibility that the child may need to be removed from the Center
- Work with parents to find solutions for support and/or possibility of alternate programming to meet the needs of their child

There is no magic or one fix-all to "solve" a biting crisis. Toddlers are only young children in months of development, "works in progress", growing at their own pace, in their own way, facing their own challenges.

Working together, our goal is for TBE CDC to be one of the best places to grow through those stages and challenges, as young children learn how to safely and magnificently be who they can be!

TIPS provided for home support:

Have you gotten that dreaded message from your toddler/twos' teacher that s/he has been biting other kids? Continued research confirms that biting is completely normal for young children, because their mouths are the first part of the body to get tense. When other children encroach on your child's play space, knock over toys, or pushes ahead of your child, your child's body "explodes" with tension, and may come out through the mouth. Of course it is painful to the other child, frustrating for staff, and embarrassing for parents. Remember, it's a way to communicate.

- Have age-appropriate expectations for your child's behavior based on his or her current skills and abilities. Adopt the mindset of teaching skills for mistaken behavior.
- Make sure your child's schedules, routines, and transitions are predictable and consistent. At meal and bedtimes, try to do things in the same way and the same times. Young children thrive when they know what will happen next. Coordinate these activities with other family members who may care for your child at various times (such as grandparents, babysitter, and with shared custody.)
- At home, make sure your child gets a good night's sleep. Children who are overly tired or stressed are more likely to bite in group settings.
- Offer activities and materials that allow your child to relax and release tension. Some children like yoga or deep breathing. Offer playdough, foam balls, bubbles, soft music, and other stress-reducing items.
- Your child may need a personal bubble of space to play by him/herself. Or if noise may be overwhelming, offer earmuffs.
- An infant who may be teething can be given a small teething toy (may like it when chilled.)
- Use positive guidance strategies to help your child develop self-control. For example, you can offer reminders phrased in a way that tells them what behaviors are expected and appropriate. "Hang up your coat on the hook please." "You can each have a bucket to use in the sandbox." "Put a dot of toothpaste on your brush. You won't need much to get your teeth clean." Keep the words simpler and fewer for younger children.
- In general, avoid "don't" and "no" demands. Young children are concrete thinkers, so when you do need to tell them don't or no for their immediate safety, then give them a positive, acceptable "replacement" behavior or skill.
- Be careful not to overreact when you child bites, which can reinforce the biting because your child gets excited about the reaction it brings. Whatever we focus on, we get more of that – so focus on teaching new skills.
- You might say, "no biting. You may use your teeth to eat your food." Or "stop, don't hit the dog, it hurts her and she didn't like it. Did you hear her yelp? When you want to play, throw the stick for her to fetch, or run with her. Let's try it. Yes, see she like that."
- Don't bite your child back, yell or explode, shame or embarrass, physically punish your children, or put anything in his/her mouth when s/he bites (Claffey, Kucharski & Gratz, 1994; Garcia, 1999; NAEYC, 1996). – "Download your own calm" first which regulates your own behavior, and remember this is an opportunity to teach new or replacement skills ☺

- You can teach words and actions through role play games at home, which help your child to gain new skills so that this scenario or “tool” becomes available to him on autopilot as a replacement behavior. Once a child has used words instead of teeth to “defend” his/her space successfully a few times (with teacher help), it will become automatic.

How should I respond if my child bites? While every situation is different, here are some general guidelines:

- When an infant takes an experimental bite on a mother’s breast or caregiver’s shoulder or hand, “download your own calm” first by taking a deep breath. Then in a firm and exaggerated tone of voice and face, say “Ouch! No biting.” (Like the yelp of a dog that gets hurt.)
- Visually supervise at all times when children are playing together. If you see an incident about to occur, move quickly to the scene and get down on the child’s level.
- Respond to the child who did the biting. In a calm but firm tone (not yelling), tell the child: “No biting. Biting hurts. It is not okay to hurt xxx or anyone else. Then offer a choice “You can help xxx feel better, or you can sit quietly until I can talk with you.”
- Respond to the child who was hurt by offering comfort through words and actions. “I’m sorry you are hurting. Let’s wash the area and get some ice.” Perform first aid if necessary. The child who did the biting can help comfort the bitten children – if both agree. Help the hurt child find something to do.
- Talk to the child who did the biting.
Maintain eye contact and speak in simple words using a calm, firm tone of voice.
If you did not see the incident, ask “tell me what happened.”
Model the use of words that describe feelings: “She took your ball. You felt angry. It’s not okay to bite or hurt her.”
- Teach a new skill or give replacement behavior options: “Next time someone takes your ball, say “no,” or “that’s mine,” or “stop,” or “help.” (or stomp your own foot, roar like a dinosaur, or similar.)”



38.0 Additional SCHOOL-AGE PROGRAM GUIDELINES

To further ensure a safe, appropriate, and engaging environment for our school-age children, the following disciplinary steps are included in TBECDC’s guidelines and procedures:

* Intentional aggressive acts toward other students or staff, including but not limited to hitting, kicking, uncontrollable anger, destruction of property, bullying, or verbal threats -- will result in:

1. The child being removed from the classroom, and a parent being called immediately to pick-up a child from TBECDC, with attendance being suspended from TBECDC for the remainder of that day upon first occurrence.
2. If a second similar incident occurs, an additional one-day suspension will be implemented.
3. This would be followed by a two-day suspension for a next incident.
4. A further incident would result in dismissal from this school.

5. The school reserves the right to take appropriate actions to stop any immediate behavior that is determined by the staff to be threatening or injurious to the physical or emotional well-being of another.

* Concurrently, teachers and parents along with the student(s) will actively develop and implement approaches toward handling and remedying the problem(s). These will be facilitated through TBECDC’s School Age Coordinator and/or administrative staff.

* Other aggressive or chronic disruptive behavior will be documented for parent review, with a behavior plan developed when deemed as needful to promote remedy of behavior problems. Appropriate steps will be taken to ensure safety of all children and staff.

* As a team, TBECDC staff believes most situations can develop skills in conflict resolution, whereby children are becoming creative, independent, responsible, and socially mature persons. Our goal for guidance is that all children will develop responsibility, tolerance, trust, and appropriate methods for working through aggressive feelings. It is expected that words and actions will reflect appropriate respect for teachers and staff.

* Professional lines and ethics prohibit initiation by an employee or persuasion of a child for engagement / interaction with TBECDC children on any social situation or format, including gaming (such as Pokémon) or social media (such as *FaceBook*). To do so, parents must provide written acknowledgement and consent in advance, may rescind at any time, and are encouraged to carefully consider any “friending” in personal connection with an employee of TBECDC.



39.0 INFANT CENTER SPECIFICS

1. General:

The infant center with capacity of 22 infants and/or walkers is governed by requirements of Title 22 Licensing regulations, subject to current policies and procedures in the TBECDC Family Handbook, and in accordance with NAEYC accreditation standards. Group sizes shall not exceed 12.

Babies are generally transitioned to the walkers’ room at approximately 11-13 months, with agreement among staff and parent(s). Similarly, walkers are transitioned to the next room (“toddler option”) when they reach 18 months as space is available.

The indoor and outdoor spaces are separate from the Day Care licensed areas, with age-appropriate materials and equipment.

2. Infant Center Director Qualifications:

The current Administrative Director exceeds the qualification requirements of Title XXII Regulations Section 101215.1, holding a Program Director Permit from the State of California. The Associate Director also exceeds those qualifications in the event of the Administrative Director’s absence.

3. Infant Center Assistant Director or Team Leader:

An Assistant Director is not required at this time based on licensed capacity of 19 infants / walkers at this time, though TBECDC has well-qualified teachers in each of these classes, and a Team Leader with preferred possession of a "Teacher" permit.

4. *Infant Center Teacher Qualifications (in addition to Section 101216.1):*

Each classroom has at least one fully qualified teacher with 12 completed units, 3 of which are related to the care of infants; and have more than 6 months of experience in a comparable program

As a standard practice, TBECDC hires only staff and substitutes with 12+ units. However, if Assistant teachers and aides are employed, they shall work under the supervision of the Administrative Director or fully qualified teacher, except when observing sleeping infants.

5. *Infant Center Ratios:*

A minimum ratio of a one teacher to four infants and walkers shall be maintained at all times as required by Licensing. Whenever possible, TBECDC will provide the NAEYC ratio of one to three in the infant class. If the divider is closed, the ratio will be maintained on each side; however if the room is open, then the overall ratio of 1 to 4 with a maximum group of 12 combined infants and walkers shall be followed.

When CCTR / State funding is added, the ratio will be 1:3.

The ratio is 1 to 6 in the "toddler option" classes. *When CCTR / State funding is added, the ratio will be 1:4.*

For continuity of care, infants generally will remain with the same Teacher and teaching staff for six or more months. Each year, one teacher generally will shift "up" with a group of infants into the toddler option room, and from the toddler room into the twos' class when able. Staff will facilitate and support these transitional times with children and parents.

Activities away from the TBECDC are not planned for normal operations, but if that were to occur such as for emergency evacuation, one to two ratio will be maintained if staffing is available.

The Administrative or Associate Director may be counted in the staff-infant ratio when actually working with infants

There shall be one staff visually observing no more than 12 sleeping infants or toddlers, with additional staff available at the center to meet the above ratios when necessary

Overlap of staff schedules allow for communication and coordination.

6. *Staffing for Infant Center water activities:*

A ratio of one adult to two infants / walkers shall be maintained during any activity which is near any body of water or pool though not anticipated without notice (not including water table)

7. *Needs and Services (N/S) Plan:*

A written N/S Plan shall be completed and on file for every infant or walker prior to attending the center. A Director or Infant Center teacher, and parent/guardian shall develop and sign the N/S plan, in coordination with the infant's Pediatrician. Toddlers also have a N/S plan until age two.

The N/S Plan includes: an individual feeding plan, diapering plan, toilet training plan when applicable, daily routines, sleep plan, and special needs.

8. *Modifications to the Needs and Services Plan:*

The N/S Plan shall be updated at least quarterly, or as needed.

9. *Infant / Toddler Discipline (in addition to 101223.3):*

No infant or toddler will be confined to a crib, high chair, play pen, or any other furniture or equipment as a form of discipline (though these equipment items may be used for activities.) Refer to section related to biting.

10. *Infant Care Transportation:*

Transporting of infants and walkers in a vehicle is not planned (except emergency evacuation). An approved stroller may be used as age appropriate with one infant / walker per seat for securing / buckling. Extra car safety seats are retained at the center in emergency. Car seats may be placed outside the classroom door inside a large plastic bag.

11. *Infant Care Isolation for Illness (in addition to 101226.2):*

An isolation area with a crib, cot, mat or play pen is provided for an infant or walker who becomes ill, and will be visually supervised at all times until the parent arrives.



12. *Infant Center Food Service / Feeding Plan (in addition to 101227):*

Each infant and toddler shall have an individual feeding plan completed prior to the child's first day at the center (see Needs and Services Plan "N&S").

The feeding plan (included on N/S Plan) includes: instructions for an infant's diet, feeding schedule, breast milk or formula, schedule for introduction to solid/new foods, food consistency, likes and dislikes, allergies, and schedule for introduction of cups and utensils.

A chart is used by teaching staff to record each infant's formula/food intake daily.

The feeding plan shall be updated as often as needed, at least every 3 months.

Bottle-fed infants are fed at least every four hours, or as directed on N&S Plan.

New: the food program will provide designated formulas and age-appropriate foods.

If breast feeding, the parent / representative shall insure and provide adequate quantities of breast for each day of attendance

Staff have received training in procedures for handling, storing, and feeding breast milk according to *National Health and Safety Performance Standards*.

A monthly menu of breakfast, lunch and afternoon snacks shall be provided and posted

Parents choosing to send food from home shall cut foods into small pieces. Foods for infants should be cut into pieces ¼ inch or smaller, and food for toddlers cut into pieces ½ inch or smaller to prevent choking.

Foods associated with young children's choking incidents will NOT be offered to toddlers by the center, and should be AVOIDED in items sent from home as recommended by *National Health & Safety Performance Standards*.) These include whole or round slices of hot dogs or meat sticks, raw carrot rounds, whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, rice cakes, marshmallows, spoonfuls of sun butter, and chunks too large to swallow. Staff shall assist in cutting into pieces if needed.

(Carrots, cheese, hot dogs, grapes, and such may be cut in lengthwise strips rather than rounds or circles. Vegetables may be cooked to reduce choking.)

Children shall be supervised while eating, and should be seated when eating.

If sending food from home, date labels shall be placed on outside of main lunch containers, and toddlers shall be assisted with feeding procedures. Walkers will be encouraged to transition from bottles, and sippy cup transition will be encouraged before entering the preschool / day care program.

Bottles, dishes, and food containers brought from home shall be labeled with the child's name and current date.

Breast milk must be labeled with the date and time expressed, and the child's name when brought to the Center. The Infant Center may safely heat formula or breast milk (not microwaved) but not meals.

Breast feeding mothers are welcome! Mothers may make arrangements with the Infant Center or office staff for privacy and space to nurse your infant or express/pump breast milk.

Infants (non-eating) must be receptive to drinking breast milk from a bottle before starting the program to ensure sufficient nutrition intake while at the Center. Please introduce a breast milk bottle at home no less than two weeks in advance, thank you.

Though the food program will provide formula, still send empty bottles from home. Extra supply of nipples, bottles, bowls, sippy cups, and spoons are kept by the Infant Center classrooms, which will be sterilized after each use.

Infants not able to hold a bottle are held by staff for bottle feeding. A bottle will not be propped, and ambulatory infants do not carry a bottle and are unbreakable. Based on dental and pediatric recommendations, walkers may be held for a naptime bottle then laid on his/her cot to sleep. Parents are discouraged from putting a toddler to bed with a milk or juice bottle at home.

Infants not yet able to sit unassisted are held by staff for feeding, and are assisted with feeding transitions. Appropriate seating shall be used for infants during feeding. Toddlers will sit at low tables and low chairs, low high chairs, or built-in chairs with a teacher sitting with them or within arms' reach.

Commercially prepared baby food in jars is transferred to a dish before being fed to an infant. Any food left over in the dish/bowl at the end of a meal/feeding is discarded.

Partially consumed formula in a bottle shall be discarded at the end of each day.

Any food left at the center shall be discarded if not consumed within 72 hours of date on the label of an "open" container. Staff shall check for expiration dates on jars.

A new refrigerator is available thanks to our RiversideFirst5 grant, to store open containers of items needing refrigeration which have a label with child's name and date

Infants shall not be bathed in, and diapers/clothing are not rinsed in, the food preparation area.



13. Infant / Walker / Toddler Personal Services:

Diapering:

The Needs and Services Plan includes diapering plans.

TBECDC accepts only commercially available disposable diapers unless the infant/toddler has a medically documented reason that does not permit their use

Each infant is kept clean and dry throughout the day, with notation at changings, and the Infant Center maintains a supply of clothing and diapers to ensure this.

Soiled or wet clothing (or cloth diapers) is placed in an airtight container and returned to the parent at the end of each day.

When changing an infant's / toddler's diaper, each infant is on a changing table or pad on the floor, and is attended at all times

Diapering space is covered with disposable paper that is discarded after each diaper change, and the area is disinfected after each use. Cleaning and disinfecting chart must be posted and followed, including new IPM requirements.

Staff shall maintain and review proper diapering procedures and universal procedures, which include the use of disposable gloves with any bodily fluid contact, and hand washing

Soiled disposable diapers shall be placed in an airtight container for daily disposal

Towels or washcloths used for cleaning infants are not shared with other infants or staff, and are washed after each use (washer and dryer on site)

Toileting:

A separate toilet training plan shall be completed for each toddler being trained which parent and teacher complete together

The toileting areas / restrooms are gated for teacher assistance and direct supervision.

Potty chairs are available, and if used, it will be placed on the floor and promptly emptied, cleaned, and disinfected after each use.

Each infant and toddler shall receive instruction and assistance in hand washing after use of the toilet and after diapering as age appropriate.

14. *Responsibility for Providing Care and Supervision* (in addition to 101229):

Each infant and toddler is constantly supervised and under direct visual observation by a staff person at all times. No infant is left unattended under any circumstance.

The rooms shall be arranged to provide supervision of play and feeding areas, and napping / crib areas. Activity space will be used for cots/napping in the walker and toddler rooms during nap time.



15. *Infant Care Activities* (notwithstanding section 101230) / see #70 for napping:

The infant center has developed, maintains and implements general and weekly written plans to ensure indoor and outdoor activities designed to meet the needs of enrolled infants and walkers, including but not limited to:

Daily quiet and active play, rest and relaxation, eating, toileting/diapering, individual attention, being held by a caregiver.

Center staff shall ensure the participation of infants and walkers in the aforementioned activities

Infants shall be given the opportunity to nap/sleep without distraction or disturbance whenever the infant desires. Nap times for toddlers over 12 months of age may be integrated into the daily schedule. Staff shall work with toddlers as they transition from one nap to two, and between classrooms.

No infant or walker shall be forced to sleep, stay awake, or stay in the napping area

Portable evacuation cribs and toddler cots are provided.

16. *Infant Care General Sanitation*

Universal precautions and NAEYC hand washing schedules, including new IPM requirements, shall be implemented which include:

- a. On arrival for the day
- b. After diapering or using the toilet
- c. After handling body fluids
- d. Before meals and snacks, before preparing or serving food
- e. After playing in water that is shared by two or more people
- f. After handling pets and other animals, or after any material such as sand, or dirt
- g. When moving from one group to another that involves contact with toddlers/twos

Adults also wash hands

- h. before and after feeding a child
- i. before and after administering medication (authorized office personnel only)
- j. after assisting a child with toileting
- k. after handling garbage or cleaning

TBECDC's cleaning service is responsible for nightly cleaning and sanitizing of toilet seats, handles, bowls, doorknobs and floors, though staff shall do this if visibly soiled during day, carpeted floors and rugs are vacuumed nightly and cleaned three or more times each year, and walls / partitions are washed with disinfecting solution at least weekly.

The immediate diaper changing area shall be disinfected after each diaper change.

Objects used by infants that are mouthed are washed and disinfected at least daily, or more often if necessary.

All disinfectants, cleaners, and other are to be stored and returned after use to cabinet inaccessible to infants

Bedding and other linens provided by the Infant Center shall be washed and sanitized daily (washer / dryer on site.) A new "kitchenette" was added thanks to grant from First5 Riverside.

Cleaners and disinfectants approved for hospital purposes will be utilized rather than bleach solutions due to allergies and compliance with Integrated Pest Management requirements (IPM) as of July 2016.

Dispenser hand washing soap and disposable paper towels shall be utilized for hand drying

Infant room staff shall wear provided smocks, which shall be washed daily and changed throughout day as needed. Shoe booties or indoor shoes shall be worn by center staff in the infant room, and by parents (and custodial staff) entering the "bootie zone." It is suggested that early walkers wear gripper socks indoors in room 6; if barefoot, feet will be cleaned with a wipe upon entering.

Walkers generally transition to wearing shoes on playground. During warm weather, children may go barefoot unless parent requests shoes at all time.

An upgraded "walk-off" mat is now provided at the entrance to each room to further reduce dirt and lead from entering the facility.

17. *Outdoor Activity Space for Infants and Walkers* (in addition to Section 101238.2):

Outdoor activity space for infants and walkers is physically separate from space used by children in the day / child care center and school-age program. *Two areas are now available.*

Outdoor space is equipped with shade, grass, and age-appropriate toys and equipment. A new infant / toddler yard was added directly off their rooms thanks to grant from First5 Riverside.

Outdoor space is checked daily before usage.

18. *Indoor Activity Space for Infants and Walkers* (in addition to Section 101238.3):

Indoor activity space for infants and walkers shall remain physically separate from space used by children in the day / child care center and school-age programs

An installed moveable wall may be used to divide the infants and toddler children or may be open as flexibly determined, within the total square footage based on licensed capacity, as long as 1 to 4 ratio is maintained at all times, with maximum group sizes of 12.

The outdoor play environment accommodates up to 18 infants/walkers at one time. A separate and additional play space for infants was implemented with our room shift/flip. A rotated schedule is provided for infants, walkers, and toddlers.

The sleeping / crib-cot area for the infants is divided from activity space, accomplished by use of moveable see-through partitions at least four feet high, constructed and placed to allow for visibility, and designed to minimize the risk of injury to infants. The walker-toddler rooms have waivers on file with Licensing to use activity space for cribs or cots during nap time.

The indoor activity spaces for infant, walker and toddler rooms shall be equipped with a variety of age-appropriate washable toys and equipment that are eco-healthy.



19. *Infant Center Fixtures, Equipment and Supplies* (in addition to section 101239 and notwithstanding Section 101239(h):

The Infant Center shall be equipped with appropriate furniture and equipment, which shall include: portable evacuation cribs, cots or mats, changing tables, infant swings, infant bouncer/rocker chairs, and feeding or high chairs (with broad-base legs and washable material)

No infant shall be permitted to pull on, climb up, or stand up in a high chair or rocker/glider, and an infant is attended while in a high chair or swing or rocking chair

All equipment and furniture shall be assembled and maintained in good repair and safe condition, and washed / disinfected after each use. No baby walker may be kept or utilized.

Changing tables shall have a padded surface of at least 1" thick, raised sides at least 3" high, within arm's reach of a sink, and not located in the kitchen / food preparation area

Toilets and sinks are in close proximity and are available to infants, walkers, and toddlers, in addition to a potty chair if parent desires, for any toddler being toilet trained. A gate is provided at the entrance to each restroom for safety, assistance, and participation.

Toy storage containers shall be safe and in good condition, no lids, and not lockable.

Toys and equipment shall be safe, without sharp edges or small parts. No item may be made of or contain toxic substances. Infant product recalls shall be monitored at least monthly.

A combination of toys and equipment will be provided to suit the skills, abilities and interest of children in each room, and to encourage: Auditory stimulation, visual stimulation, tactile stimulation, and manipulative skills.

20. *Infant Center Napping Equipment / Sleep Policies* (in addition to Section 101239.1)

Portable evacuation cribs are provided for infants unable to climb out of a crib, and cots/mats for walkers and toddlers. While an infant may fall asleep in a swing or activity chair, those are not to be used in lieu of a crib for longer napping periods.

An infant will be removed and placed in appropriate infant sleep equipment IF infants arrive to the program asleep, or fall asleep in equipment not specifically designed for infant sleep.

Infants younger than 12 months will be placed on their backs to sleep, and without the use of infant sleep positioners unless otherwise ordered by a physician. (5A-929). Sleeping plan required by Licensing for infants under age one, accompanied by charting every 15 minutes up to age two.

A cot or mat shall be provided for each walker and toddler, and for any infant who can climb out of a crib.

SAFE sleep regulations from the California State, Community Care Licensing, are listed herein, in addition to placing infants on their backs to sleep:

- cribs must be free from all loose articles and objects,
- each infant 12 months and younger must have an infant sleeping plan on file,
- mattresses must be firm and have a tight-fitted sheet,
- infants must not be forced to sleep, stage awake, or stay in the sleeping area;
- infant may not be swaddled while in care; *(use of a hands-free sleep sack requires approval from Licensing on an individual basis)*
- the infant's head must not be covered while sleeping;
- pacifiers **must not** have anything attached to them;
- while infants and walkers are sleeping, the teacher will check no less than every 15 minutes for labored breathing, signs of overheating, flushed skin, increase in body temperature, and restlessness. Documentation will be maintained with any unusual symptom and response.

Each portable crib or cot shall be occupied by only one child at a time.

Fresh bedding (sheet and/or receiving blanket) shall be provided by TBECDC for each infant, and replaced when wet or soiled, or to be occupied by another. Soiled bedding shall be inaccessible to infants and shall be washed by TBECDC on a daily basis.

Toddler bedding shall be sent home weekly for cleaning.

Porta-cribs shall meet current safety standards, do not limit the ability of staff to see the infant, and do not limit the infant's ability to stand upright.

Mattresses are covered with moisture resistant material, maintained in safe condition, and wiped and disinfected daily and when soiled or wet

Bumper pads may not be used, the mattresses are set at the lowest position, and crib slats not to exceed 2-3/8 "

Porta-cribs, mats and cots shall be arranged to provide a walkway and work space to allow staff to reach each infant or toddler without stepping or reaching over any other child, and shall not hinder entrance or exit to and from the napping space

21. Infant, walker and Toddler Room Safety

Licensing requires each room to have at least one staff member currently certified in pediatric first aid and CPR / NAEYC now requires each person with children to be certified (2018).

Fire drills shall be conducted at least every six months, usually each month, using evacuation crib for non-ambulatory infants. 24+ hour emergency infant/ toddler food, formula, diapers and clothing shall be provided by parents. (An BQ fee is not charged to parents of infants, but is for toddlers.)

Overhead cabinets shall be latched.

As recommended by the CPSC to reduce the risk of SIDS, infants under 12 months shall be placed on their back to sleep unless the child's Physician directs otherwise and is documented (signed and waived) on the Needs and Services Plan AND new sleeping plan directs otherwise (though children may flip to their stomachs on their own.) Parents shall be counseled in safe practices / recommendations.

A "special care plan" is completed for any infant, walker or toddler with an allergy confirmed by the pediatrician, health condition (such as asthma), or special care or developmental need. Food preferences may be designated, but are not the same as allergies.

22. Parent Communication

DRDP's will be utilized for child observations, assessments, and electronic communication, in addition to the *Remind* app system.

Each room contains a workable phone.

Daily sheets shall be provided for written notes (or electronic format) from the parent / representative dropping off, and to record the child's daily activities. In custody situations, each parent may request a separate file for papers. Infant diapering and feedings are recorded throughout the day. CDC forms are implemented at intake, with follow-up of Ages & Stages Questionnaires to be utilized as determined.

Before transitioning infants to the toddler room, and toddlers to the Two-Year old room, parents will be consulted, with opportunity to discuss questions, concerns, and changes along with brief visitations to the next room generally for a week of transition for the child to become acquainted with the new room and teaching staff.

In general, infants will be shifted to walkers as they begin walking and have some self-feeding skills; Toddlers will be shifted with transition to the "toddler option" class when space is available and child demonstrates sufficient skills at approximately 18 months of age.



Thank you for your continued input throughout each year.

40.0 SUMMARIZED Financials / see current "Financial Agreement" for details

1. During the pre-enrollment visit to and tour of the school, parents are made aware of the financial policies. Notwithstanding, parent(s) indicate acceptance of financial responsibility under the terms of the annual financial agreement in the enrollment packet, restated and included herein.
2. Weekly tuition has been implemented to ease the economic challenges many families are facing at this time. Parents may still pay per month if desired.
3. Enrollment is on a year-round basis. Any change in schedule must be in writing to the office, with two-week notice. Two ½ days of attendance or enrollment is required for a seamless transition and attendance into the new year, except school-age families can pay registration in May to retain spot for Fall. Dropping attendance during the summer places a child on the waiting list for the new school year.
4. With two weeks' written notice to the office, parents may modify their child's schedule anytime during the year, subject to availability. Schedule changes exceeding four per year incur an additional fee per change. Adjustments in tuition and deposit will be billed accordingly. Based on audit of daily sign-in sheets, parents will be responsible for actual, additional attendance hours over financial agreement.
5. There is no change in payment obligation amount, or discount against tuition, for the days the school is closed, nor exchanging days when a child is absent. Tuition is due for reserved attendance schedule. Payment for added days of attendance are responsibility of parent.
6. Any "delay of start" or "holding a spot" is on a case-by-case basis only. When offered a space, enrollment must begin within two weeks, with paid registration. No tuition will be due during those two weeks, but if needing to start attendance past that period, parent has the option of paying the half-day rate of the scheduled days to "hold" the space until regular attendance begins. If that option is declined, the child will be placed on the waiting list for the next available space.
7. Irregular or varied schedules may be arranged when available with an additional 10% above posted fees. However, there are no custom schedules available for infants or toddlers.
8. When available, additional contracted hours or drop-in hours may be arranged through the office. Extra days may be added when available and approved by office, with appropriate fee. 24-hour advance notice of adding and/or cancellation of added hours or days is required. Please refer to current fee schedule. Call us at (951) 682-7282.
9. As the center is closed 3 weeks during which tuition is not due, the vacation credit was phased out August 2024.

Contracted Fees & Charges

10. The financial agreement sets the contract for days and hours your child will attend this program, listing corresponding fees according to the current published fee schedule. Changes must be approved in advance by the office based upon availability, with adjustments in tuition accordingly. All changes, cancellations or withdrawals require a two-week written notice.
11. The annual Registration fee is non-refundable. There is a second child registration discount, and there is an annual emergency supplies fee, and a "Summer-only" enrollment fee is available.

See current Fee Schedule
and financial agreement

12. There is a materials fee per family each month of attendance.
13. A 3% fee will be charged by the *ProCare* processing company. It is highly encouraged to utilize your checking account to minimize fees. We are working with our bank for an alternate option.
14. Tuition has been calculated on a weekly basis so that no tuition is due the weeks when TBE CDC is closed. Breakfast, lunch and afternoon snack is included effective August, 2024.
15. In the before/after public school program, it is assumed that Alcott school pick-up is required on the scheduled days, including early release days, unless parent notifies the office at least one hour in advance that no pick-up is needed that day. A "no call" fee will be assessed if the child is not there for scheduled pick-up, even if the child was not at TBE CDC in the morning. On days alternative care is provided while Alcott is closed, an additional fee is incurred.
16. Minimum / early release days are included in the weekly tuition, though extra hours or days, and alternative care incur additional fees. When alternative care is provided for elementary school children when their school is closed, those already attending will pay an additional fee for the full day, and those not currently attending will pay for each special day.
17. Missed/forgotten diapers, and related are not included in tuition fees, and will be charged if necessary, as stated on currently published fee schedule.
18. A one-week notice is requested for copying of any child's records, including attendance sheets. A \$1.00 per page copying charge will be assessed for repeated or numerous pages requested, with a \$25 deposit.
19. Parents are responsible for any **difference** in payment of tuition fees charged by TBE CDC and the amount paid by a third party such as RCOE or GAIN. If a parent with subsidized child care does not complete required forms wherein the Center cannot be paid, that parent is responsible for full charges.
20. A "Third Party Payment" agreement must be completed with the school office. This includes joint custody or multiple party payments, and must be worked out between parents. If one party becomes past due in payment and the other party is current, the child(ren) may attend only on the days of that party's custody whose account is current.
21. A fee will be charged for any check returned by the bank as non-sufficient funds. Following a second NSF check, cash or money order will be required for subsequent payments for three months' subsequent payments, then six months if it occurs again, followed by cash-only basis if another situation occurs. NSF checks or failed payments must be replaced in cash, money order, or cleared electronically to the school within 24 hours of notification to parent/paying party.
22. A tardy fee of \$1.00 per minute after operating hours (6:00 M-Th and 5:15 Fridays) will be assessed up to the first 30 minutes; thereafter a flat \$10 fee per additional half hour, including Alternative Care days if/when offered.

23. During operating hours, the fee is charged before and after a 10-minute transition period before or after his/her contracted day.
24. Any requested adjustment due to a parent's off-track teaching must be discussed with the office.
25. No tuition credit will be given if attendance suspension is required.
26. Understanding that parent(s)' schedules may periodically change, schedule change requests that exceed four per year are considered excessive, and will incur an additional fee per change. This is to encourage consistency, and avoid frequent change requests.
27. A no-call fee will be assessed if the office is not notified at least one hour in advance of no pick-up from public school / Alcott for each occurrence. A contact with the office is required. Making a notation in the sign-in notebook or calling a teacher on his/her personal cell phone does not satisfy the notification requirement.
28. There is an additional fee per class for year-round extra-curricular gymnastics classes (Gym Kids), which will be billed on the monthly statement, **regardless of attendance**. Upon enrollment, the fee will be charged in advance for the weeks scheduled for the upcoming month. (No charge during "closed" weeks.) An annual insurance fee is also charged. A two-week written withdrawal notice to the office is required. Make-up class for absence (when available, not guaranteed) may be arranged with the instructor.

Due Dates

29. The annual registration fee and emergency supplies fee will be assessed to your child's account each August (after initial enrollment.)
30. One week's deposit is due at enrollment, and will be increased if and when schedule increases.
31. Tuition is due by the FIRST scheduled-attendance day of EACH WEEK, and is due whether a monthly statement has been received or not. Please stop by the office if you have a question. Electronic statements are sent to your provided email. A printed version will be provided upon request.
32. Tuition must be current/paid by FRIDAY NOON of each week for attendance the following week.
33. Attendance will be suspended until the account is current if the account becomes late by two weeks. It is the parent's responsibility to discuss with the office any potential, temporary delay in payment, and make arrangements or adjustments as applicable.
34. Any alternate payment plan must be approved in advance by Administration, and must be documented on the financial agreement, including multiple payer arrangements.



Withdrawal / Dropping Enrollment

35. To withdraw a child from enrollment, the parent is required to give two weeks' advance notice in writing to the office. As attendance is considered **year-round** until otherwise notified, remember to give drop-notice as your child prepares to enter kindergarten.
36. The parent is responsible for tuition charges during the two-week withdrawal period, with the one-week deposit made at enrollment may be applied toward that period if proper notice is given. Registration, material/security fees, and emergency supply fees are non-refundable except under extenuating circumstances, at the discretion of the Administrative Director.
37. Enrollment automatically continues from one year to another and through the summer unless we are notified otherwise in writing with 2-week notice (enrollment is dropped or withdrawn.) Parents may modify their child's schedule anytime during the year, subject to schedule and class availability, which may include reduced or increased days/hours.
38. If enrollment is dropped or withdrawn, re-enrollment will be subject to availability from waiting list and applicable fees, including re-enrollment fee. Returning families receive priority over open enrollment.

General Financial Information

39. Please write your **CHILD'S NAME** on your check's memo line, thank you!
40. A parent's canceled check will be the receipt unless other arrangements are made with the office, with payments reflected on monthly statements. Please sign-up in the office for electronic payments. All cash payments will be accepted by the office only (including field trips), so a written receipt may be provided.
41. TBECDC utilizes a new version of *ProCare* for maintaining account receivables / family accounts and corresponding electronic children's files. A year-end statement of tuition paid may be accessed directly through their app.
42. Payments may be set up for automatic withdrawal of monthly charges the first work Monday of each month, or paid online through link provided on emailed statements.
43. A monthly statement with weekly charges will be sent electronically to your provided email.
44. (duplicate notification) The convenience fee charged by credit card companies is 2.9% of the charged amount, which is automatically assessed by *ProCare* for credit and debit card payments.
45. This agreement is in conjunction with the full "Financial Agreement" and policies and procedures in this Family Handbook, and dates listed on the center's current calendar herein, or as may be adjusted/announced.
46. A **locked "payment" box** is provided in the office for dropping off check or money order payments, located on the wall upon entering the office. Do not leave cash, please.



41.0 Enrollment DISCHARGE POLICY by TBECDC

Immediate Discharge

1. TBECDC reserves the right and discretion to impose an immediate termination of a child's enrollment in the program for the following reasons, which also impact future enrollment:
 - a) Non-payment or delinquency of tuition and/or late payment of fees
 - b) willful non-compliance with terms and conditions of school policies and procedures as outlined in this Family Handbook,
 - c) child has special needs or behaviors that cannot adequately be met with reasonable accommodations or current staffing patterns
 - d) failure to provide required student forms and supplies
 - e) child whose behavior poses a threat to the physical or emotional well-being of other children or staff
 - f) physical and/or verbal abuse or intimidation of staff or children by parent or child, including inappropriate behavior of parents toward staff, other parents, or children
 - g) chronic late pick-up by parent or authorized persons, or repeated "no-call"
 - h) willful failure to follow established procedures, including the processing of concerns or complaints, or diminishing reputation of the school by the parent(s), or disregard of/ willful failure to follow field trip guidelines
 - i) when the program in its unfettered discretion determines the school is unable to meet the needs of the child and/or parent(s)
 - j) personal parental or family circumstances such as custody issues, intoxication, or violent behavior, cause disruptions or compromises in school operations, TBECDC reserves right to take appropriate action including termination of enrollment



Termination with Two Weeks' Notice by TBECDC

2. TBECDC reserves the right to terminate a child's enrollment in the program effective upon two (2) weeks' prior written notice to the parent/guardian if any of the following events occur:
 - a) any of the conditions listed above that the school has not exercised its right to terminate immediately
 - b) in the sole judgment of the Administrative Director that the program does not meet the developmental or special needs of the child or family

42.0 CHILD'S WITHDRAWAL FROM THE PROGRAM

1. Parents may modify their child's schedule anytime during the year, subject to availability, with two weeks' notice of implementation.
2. The financial agreement states that a child may be withdrawn from the program by the enrolling parent with two weeks' written notice to the office. These two weeks are when the center is in attendance, not when the center is closed.
3. Every family shall maintain a minimal schedule of two half (½) days during the summer weeks to retain seamless enrollment. TBECDC will continue to work with parents to meet various needs of each family, while pointing out the benefits of continuity of learning and interactions for children, and providing more level attendance patterns for the program.
4. The parent is responsible for tuition charges during the two-week withdrawal period, with the one week deposit made at enrollment may be applied toward that period if proper notice is given. Registration, material fees/security, and emergency supply fees are non-refundable except under extenuating circumstances, at the discretion of the Administrative Director.
5. If enrollment is dropped, re-enrollment will be subject to availability (no guarantee of availability or schedule) and applicable fees, including re-enrollment fee. Returning families do receive priority over open enrollment.
6. There is no tuition refund for dismissal from school or if appropriate withdrawal notice is not given, and does not include closed weeks.

43.0 ETHICAL CONDUCT / Confidentiality

1. Ethical conduct is expected by parents and staff upon agreement to attend TBECDC, as outlined in this handbook and similar pieces. Staff members will not discuss an individual child with parents other than the child's own, protecting confidentiality and respecting the families' right to privacy. Similarly, parents are requested to follow the same principle.
2. Children's files are centrally located and are confidential to authorized individuals only. Only authorized TBECDC personnel, licensing representatives, and accreditation assessors shall have access to children's records, including screenings and assessments, during office hours while in the presence of designated office representatives. At no time shall children's records be taken off-site. Each classroom shall maintain a confidential notebook of authorized pick-up papers.
3. At no time may information be used for one's personal gain. With proper authorization, family members may have access to children's files also. With written permission, parents may allow information to be shared with other agencies such as an elementary school or physician.
4. A parent/child directory is available upon request as required by Health and Safety code. **If you do NOT want your family's address and phone number provided to other families at TBECDC, indicate such on the handbook receipt page.**

5. In cases where family members are in conflict, staff will remain neutral and refrain from becoming an advocate for one party or showing favoritism, but will work openly, sharing observations of the child to help all parties involved make informed decisions. / In these situations, generally a file will be set up for each parent in the child's classroom, and provided copies of all general center information and any incident/boo-boo notes. Internal notes will not be provided without court subpoena to the TBECDC office.
6. Sharing basic information (such as there was a death in the family, job loss, or a parent has moved) is appropriate for teachers to know about the child's personal life experiences that will affect his/her day. However, please do not expect teachers to "take sides" or keep notes on what someone else may be doing – share only what is necessary, and refrain from derogatory remarks, especially in the presence of children.
7. **All printed materials provided by parents and staff members to be sent home must be approved by the office in advance**, and are not to be used as a personal forum for comments about issues.
8. A parent / community board is provided so families may advertise their business or services to other families at the Center. Fliers, brochures, and cards may be posted there for those who are interested, but may not be sent home to families. Community service fliers posted there also.
9. Staff members, committees, and Board may not enter into relationships with a family for private advantage or personal gain, nor engage in or support exploitation of families.
10. Building positive relationships between families and teachers is important in a professional context, and staff members are not to enter into relationships that might impair effectiveness in working with children.
11. Rude, hostile, or intimidating or other inappropriate nature of interactions of a parent or family member toward TBECDC staff is not acceptable, and subject to immediate withdrawal from the program, with notification to Community Care Licensing.
12. Staff are requested **NOT** to baby-sit Center children off-work hours due to implied liability. If a parent chooses otherwise, he/she is doing so with the understanding that the Center incurs no liability or responsibility of any action of an employee during off-hours.



44.0 PARENTAL COMMUNICATION of CONCERNS, GRIEVANCE

1. Parents and teachers working together for the welfare of the child is best facilitated through frequent communication. PLEASE communicate with us! Your questions and concerns are important to us for continual program improvement!

TBE/CDC's Board, administration, and staff members are committed to promoting and practicing conflict resolution techniques when questions or concerns arise.



Please follow the following procedure when you have a concern or complaint:

- **TALK FIRST with the teacher or person directly involved to discuss concerns and questions, and to determine action plan**

Some questions or concerns can be discussed with brief interaction. Please feel free to discuss brief items with your child's teacher as you drop-off or pick-up. As teachers must supervise children by sight and sound at all times, please set an appointment to discuss lengthy matters with your child's teacher.

This allows both parent and teacher to maintain privacy, to set aside time, to gather information as needed, and to give full response and attention to a more complex concern in an appropriate setting. Together, the parent and teacher will define the question or concern, discuss the issues, and may set some plans of action within a timeframe.

- **If issue is not resolved after first meeting and action plan(s), talk again with the teacher or the person involved**

Those initial ideas/actions will need follow-up conversation(s) to ensure the desired results have been achieved or adjusted. Or, if either party continues to be concerned regarding the matter discussed, s/he should request another meeting in a few days to further discuss resolving the issue with new approaches.

- **Meet together with the Administrative Director if further assistance is needed or desired**

If progress is not made or the issue is not resolved after a second conversation / meeting, the parent or teacher may request to meet together with the Administrative Director and teacher.

- **Administrative Director will discuss with TBE/CDC Board representative for clarification if needed**

While the Administrative Director oversees the interpretation and implementation of Liaison/RTBE-approved policies and procedures, she may request the Liaison to attend another meeting with the parties concerned. If needed following that meeting, the Liaison will present the concern or question to the TBE/CDC Board or RTBE General Board, which will make a final determination in writing to the matter.

- If a parent chooses to by-step this process, TBE/CDC reserves the right to immediately discontinue current and/or future enrollment without refund of any unused tuition. This includes intimidation, harassment, or embarrassment of any staff member or other person.

**To learn more about NAEYC or Code of Ethical Conduct
check out www.naeyc.org and www.rightchoiceforkids.org**

45.0 GENERAL INFORMATION

1. Please alert your child's teacher of any circumstance that might have an effect on the child's day at school (changes in the family, visiting grandparents, new pet, death, loss of job, nightmare, parent deployed, etc.)

2. Parents are encouraged to stop by the office to checkout a parenting book, or children's books from our lending library. Reading (literacy) is an ongoing emphasis, so frequent opportunities are provided for purchase of books at book fairs, as well as book orders through the classrooms.
3. Please do NOT send a cell phone to school with your child. If you do so for emergency purposes, the cell phone must remain "off" during the day, will remain in the child's cubby, and is here at the parent's liability (school has no responsibility for lost or stolen phone.) A release of liability form must be signed by the parent for a child to bring an electronic device (such as for homework) with to TBECDC/school.
4. Regularly throughout the year, photos or videos may be taken (usually by parents) of classes engaged in activities for positive public relations within the school or community, such as year-end DVD. **Being sensitive of custody and confidentiality issues, teachers and parents must notify administration PRIOR posting onto Facebook or similar social media.** Parents will be notified of yearbook photos, which are distributed in June.
5. Parents will be notified in advance, or permission received, for any photo to be published for the newspaper in conjunction with public relations, such as announcing or celebrating our re-accreditation with NAEYC. / Norco College may request permission to photograph or videotape student teachers for educational purposes only and with notification to classrooms.
12. Notwithstanding, an occasional request from the news media may occur on a spur-of-the-moment basis, which makes it difficult to obtain immediate parental permission. ****Please inform the office in writing if you do NOT give permission for your child to be photographed or videotaped during the current school-year. ****
13. TBECDC strives to insure an environment free of harassment or discrimination. Any incident of prejudice or intimidation, or implicit or explicit unwelcome sexual advances or similar should be reported to administration immediately.
14. All information distributed at school must have PRIOR approval from the office, and administration reserves the right to determine acceptability of such information for distribution. This includes things such as classroom party sign-up information.
15. A resource bulletin board / area is being provided for posting of business cards and services offered or needed by parents (such as Tupperware, garage sale, plumbing, landscaping, and so on), and community events. **There shall be no solicitations through children's file folders.**
16. Periodically, the Center receives product samples for distribution to parents. Please enjoy these items of your choosing.
17. Computers are available throughout the school. Various software programs will be added throughout the year for reinforcing various skills during center times. As additional computers are donated or purchased, they will be added to the younger classrooms, with age-appropriate software. Internet is accessible to teaching staff only at this time.
18. Smoking, vaping, intoxication, prohibited substances, and guns are illegal on TBECDC premises.
19. *Two* restroom areas are available in the office area for adult usage. Adults are not allowed to use children's classroom or playground restrooms simultaneously with children.

20. Throughout this handbook and during the year, reference to State Licensing regulations, Health and Safety codes, or Fire codes will be cited. You may contact the office for specific code or regulation numbers. Thank you for your cooperation in helping us to comply with these minimum standards.

Your suggestions and concerns are welcome anytime.
Please stop in the office or call whenever needed!

46.0 MODIFICATIONS

1. This Family Handbook summarizes the operational plan and guidelines for TBECDC. It is a guide, and does not represent a contract, but is designed to enhance and facilitate Center operations.
2. The right is retained to modify or alter these policies based on professional and business concerns considered in the best interests of all involved, including administration, RTBE, Liaison, employees, children, and parents.
3. Policies may change with or without notice, although every attempt will be made to keep parents informed in advance of any necessary changes.
4. However, changes in fees shall be in writing with at least thirty (30) days' notice prior to implementing any such fee rate modification.

47.0 ARBITRATION

1. The parties shall make a good faith effort to settle any dispute or claim arising out of this Agreement. Any controversy that is not resolved by the parties, shall be determined by binding arbitration pursuant to the procedures outlined in Code of Civil Procedure §1280, et seq. If a dispute arises under this agreement, either party may demand arbitration by filing a written demand with the other party within sixty (60) calendar days after occurrence of the dispute. The parties may agree on one arbitrator. If they cannot agree on one arbitrator, there shall be three (3): one named in writing by each of the parties within ten (10) calendar days after demand for arbitration is given, and a third chosen by the two (2) appointed. Should either party refuse or neglect to join in the appointment of the arbitrator(s) or to furnish the arbitrator(s) with any papers or information demanded, the arbitrator(s) may proceed ex parte.
2. A hearing on the matter to be arbitrated shall take place before the arbitrator(s) in the County of Riverside, State of California, at the time and place selected by the arbitrator(s). The arbitrator(s) shall select a time and place promptly and shall give each party written notice of the time and place at least twenty (20) calendar days before the date selected. At the hearing, any relevant evidence may be presented by either party, and the formal rules of evidence applicable to judicial proceedings shall not govern. Evidence may be admitted or excluded in the sole discretion of the arbitrator(s). The arbitrator(s) shall hear and determine the matter and shall execute and acknowledge the award in writing and cause a copy of the award to be delivered to each of the parties by first class mail.
3. If there is only one (1) arbitrator, his or her decision shall be binding and conclusive on the parties, and if there are three (3) arbitrators the decision of any two (2) shall be binding and conclusive. The submission of a dispute to the arbitrator(s) and the rendering of a decision by the arbitrator(s) shall be a condition precedent to any right of legal action on the dispute. A judgment confirming the award may be given by the Riverside County Superior Court, or that Court may vacate, modify or correct the award in accordance with the prevailing provisions of the California Arbitration Act.

4. The costs of arbitration shall be borne by each party or shall be borne in such portions as the arbitrator(s) determine(s). Except as otherwise specifically expressed herein, the provisions of code of civil procedure §1280, et seq. shall be applicable.

TBECDC FAMILY HANDBOOK RECEIPT & ACCEPTANCE FORM

I, _____,

parent or guardian of _____,

have chosen a _____ printed or _____ website/online Family Handbook, and have asked any questions to understand the items discussed. www.TempleBethElCDC.com).

I agree to abide by the guidelines set forth in the Family Handbook, and shall direct any questions or concerns about the TBECDC policies and procedures to Administration.

I understand there are health risks related to children in group settings. These include, but are not limited to exposure to infectious diseases. I am aware of these possibilities and have consulted with my child's pediatrician if I have any question or concern prior to enrollment. _____ initials

I will notify the office in advance if language interpretation is desired for any written document, or for any special event.

FURTHER,

I do _____ (initials) or I do not _____ give permission for my child to be photographed or videotaped by TBECDC during the current school-year for school purposes. *Note: Please do **not** post photos with children other than your own on social media sites without inquiring in the office.*

State Health & Safety code for Licensing requires a parent/child directory be available *upon request* to parents. I do _____ (initials) or do not _____ give permission for my family's address and phone number to be provided to other families at TBECDC (see Ethics).

Signed: _____

Date: _____, 202_____

New families -- Please **sign and return** this page to the TBECDC office within one month of receipt at enrollment (copy on website.) Notwithstanding, acceptance of the provisions of this handbook and financial agreement is implied if this page is not returned within that time frame.



ACCREDITED by the National Association for the Education of Young Children