

# **Parent Handbook Countryside Child Care Center of Rochester**

**565 Rounseville Road  
Rochester, MA. 02770**

**Director/Owner:  
Bonnie Morrison**

**[bonnie@countrysidechildcare.net](mailto:bonnie@countrysidechildcare.net)**

**Director:  
Amanda Brown**

**[amanda@countrysidechildcare.net](mailto:amanda@countrysidechildcare.net)**

**508-763-8007**



# Philosophy

Countryside Child Care Center is a program that accepts infants (1 month-15 months), toddlers (15 months-2.9 years), preschoolers (2.9 years-5 years) and school age children (5 years-14 years). Countryside Child Care is a wonderful place for children to grow and learn. Children are provided with a quality setting in a warm and nurturing environment. Staff members plan and implement age appropriate activities that encourage children to learn, play and explore. Strong relationships are built with children and families to form a bridge for children between home and child care.

A variety of methods and tools are used in monitoring and assessing each individual child's development. These tools include, but not limited to: Teaching Strategies Gold; Ages and Stages; observations; and portfolio work. We are continuously monitoring and supporting your child's growth and development through observations and documentation.

The staff at Countryside Child Care Center shall not discriminate against in providing services to all children and their families on the basis of race, religion, cultural heritage, political beliefs, national origin, marital status, sexual orientation or disability. Countryside Child Care does not discriminate against any child who is not potty trained. They will be accepted into the program and not be held back from transitioning from the toddler classroom to the preschool classroom.

## Payments

The half day program runs from 6:30-12:00. You can utilize any of those hours. The full day program runs from 6:30-5:30. You can utilize any of those hours.

To sign up in advance, the first week's payment must be made. It goes towards the first week your child attends the center. Payments are always made on Fridays for the week ahead. If you decide not to follow through with putting your child in the center after you have already signed up and paid for the first week, that payment is non-refundable.

If you are continuously late picking up your child (after 6:00) you will be charged an additional fee of \$15.00.

Payments are due every Friday. If the full amount is not paid by the following Friday (that is two weeks tuition) then your child may not return to the center until the full amount is paid.

If I receive a bounced check, you are responsible for paying the bank fee, whatever it may be. If I receive more than two bounced checks from one family, that family must start paying in cash, bank check or money order.

If your child is absent because of an illness or on vacation, payment is still expected if it is a day your child is scheduled to attend the center. If you decide to take your children out of the care of Countryside Child Care Center, you must give a two weeks' notice.

If your child will be absent on a particular day, please notify the center by 9a.m.

## **Holiday Closings**

There are certain holidays that the center will be closed on. If your child is scheduled to come that day, payment is still to be expected. These are the paid holiday closings:

- New Years Day
- Presidents Day
- Memorial Day
- Independence Day
- Labor Day
- Columbus Day
- Thanksgiving and the day after
- Christmas Eve: close at 3:00
- Christmas Day

If a holiday listed above falls on a Saturday, we are closed on the Friday before and payment is expected. If a holiday listed above falls on a Sunday, we are closed the following Monday and payment is expected.

## **Closures due to severe weather conditions**

If the center has to be closed because of uncontrollable circumstances, such as loss of power, heat, etc... and it is not safe for the center to remain open, the staff will immediately call the parent first and then the contacts on the child's enrollment packet. There is no tuition reduction for holidays or for center closures.

## **Infant Safe Sleep**

### **Sleep Positions:**

-infants must be placed on their backs to sleep. The only exception is when there is a written note from the child's physician that specifically indicates an alternate sleep position and a time frame for how long the instructions are to be followed. A posting will be on the child's crib regarding the alternate sleep position without identifying specific medical information. The child's file will contain the written order from the physician.

-If an infant, before enrollment has had an alternate sleep position, the director will obtain written parental permission to seek advice from the child's pediatrician about the best and safest way to transition the child to the back to sleep position. The parent can also obtain the information from the child's pediatrician in writing and give it to the director.

-if a physician requests that the infant's head be elevated, the parent is to submit to Countryside the note in writing that include how the crib should be raised, such as raising the mattress at one end or raising the crib at one end and for how long.

-infants will not be placed on their side for sleep. Devices such as wedges or infant positioners will not be used.

-Swaddling is not allowed at Countryside Child Care Center.

-infants who use pacifiers will be offered it when they are placed to sleep. The pacifiers will not be put back in their mouth if it falls out once they are asleep. The staff will check pacifiers periodically for tears and clean and maintain them.

-after being placed on their back to sleep, an infant who can easily turn over from back to front and front to back may remain in whatever position they prefer to sleep.

### **Sleep Environment:**

-Countryside Child Care Center will only use U.S. Consumer Product Safety Commission guidelines for safety-approved cribs and firm mattresses.

-each infant under 12 months of age will have their own individual crib.

-crib slats will be less than 2 3/8 inches apart.

-corner posts on cribs are not higher than 1/16 of an inch.

-cribs will not have drop sides.

-playpens/port-a-crib weave will be less than ¼ inch.

-the staff at Countryside will pay close attention and follow the manufacturers' weight and height requirements when assigning an infant to a crib/port-a-crib.

-mattresses must be firm and fit the crib without allowing space between the crib and the mattress and they must be covered with snug fitted sheets.

-cribs must be free from loose bedding, toys and other soft objects. Some examples are: pillows, comforters, sheep skins, bumper pads and stuffed toys.

-infants who fall asleep in highchairs, bouncers, swings, car seats or other equipment will be removed from such equipment and placed in a safe sleep environment.

-to prevent infants from overheating, the temperature in the room will be monitored and any outdoor or excessive clothing will be removed. Sleep clothing, such as sleepers, sleep sacks and wearable blankets may be used as an alternative.

-bibs and pacifiers will not be tied around the infant's neck or clipped to their clothing during sleep.

-smoking is not allowed in or near the program.

**Supervision:**

-all children including infants enrolled in Countryside Child Care Center will be provided adequate supervision that ensures their health and safety. The staff is able to visually supervise infants without obstructions such as blankets draped over the sides of cribs, shelving units or other classroom furnishings.

-all rooms will have sufficient lighting to allow staff to monitor infants at all times, including during sleep.

**All staff at Countryside Child Care Center are trained in the program's safe sleep policy and the director reviews the information with all staff periodically. Each parent has a copy of the policy. It is given to them at the time of enrollment.**

## **Child Guidance**

Educators will provide guidance to all children in a positive and consistent way based on the understanding of the individual needs and development of children by encouraging self-control and using positive child guidance techniques such as recognizing and reinforcing children's appropriate behaviors, having reasonable and positive expectations, setting clear and consistent limits, and redirecting.

Staff will help children learn and use social, communication, and emotional regulation skills in place of challenging behaviors.

Staff will use environmental modifications, activity modifications, adult or peer support, and other teaching strategies to encourage appropriate behavior and prevent challenging behaviors from happening.

Staff will intervene quickly when children are physically aggressive with one another to help them develop more positive strategies for resolving conflict.

Staff will explain the rules and procedures and the reasons for them to children, and where appropriate and feasible, allowing children to participate in the establishment of program rules, policies and procedures.

Staff will discuss behavior management techniques among staff to promote consistency.



## **What Countryside Child Care Center Provides**

- toothbrushes and toothpaste...changed out every three months
- wipes
- juice/water and snack for morning and afternoon
- sheets for the infant cribs, bibs and burp cloths
- sunscreen for children over six months

**If there are special wipes or sunscreen that your child needs, parents are responsible for supplying it. Also, if your child has any food allergies, parents must supply the snacks for morning and afternoon.**

## **Rules and regulations at Countryside Child Care Center**

**Diapers/pull-ups**-must be supplied by parents. Notes are written home when your diaper supply is low. It is the parent's responsibility to keep your child stocked up.

**Rest sheet and blanket**-for the toddlers and preschoolers, the rest sheet consists of a regular sized crib sheet and a small blanket. These materials must be brought to the center weekly. At the end of every week, parents must take them home to wash them and bring them back the following week.

**Extra clothes/supplies**-every child in the center needs to have an extra change of clothes left at the center (pants/shorts, shirt, socks, underwear). For the infants, bottles are to be brought in daily, taken home, washed and brought back the following day.

**Lunch boxes**-each child needs to bring in an insulated lunch box that will fit in the top portion of our cubbies. In the lunch box, there should be a drink, your child's lunch with a snack or two and an ice pack. We recommend the ice pack be inside a Ziploc bag because some ice packs leak and may cause a mess all over your child's lunch.

**Back packs**-are not allowed at school. Cubbies are shared with other children and there is not enough space. There are places to store all of your child's belongings.

**Sandals and open toed shoes**-are not permitted for safety issues out in the playground.

**Toys**-no toys are allowed to be brought in school. There are plenty of toys here for your child to use and we are not responsible for any lost or broken toys.

**Snow suits**-on special snowy days, a written notice will be given to all parents letting you know we will be playing outdoors in the snow. At that time, you will be asked to pack boots, hat, mittens and snow pants.

**Sun block**-needs to be applied in the morning before arriving at the center. We only apply sun block in the afternoon.

## **Parking Lot Safety**

Parking lots can be a source of danger to young children. Please take these precautions when in the parking area:

- enter and leave the parking lot with extreme caution.
- always be on the lookout for wandering children.
- always hold your child's hand when going and coming from an automobile.
- do not let your child run ahead of you.
- do not stand in the parking lot conversing with other adults unless your child is seated safely in the vehicle with the doors closed.
- do not leave your vehicles motor running in the parking lot.
- do not leave any children in the car while you are inside the facility.

## **Babysitting**

If a staff member provides babysitting services to any family, Countryside Child Care is not responsible for the performance of the staff member, including transportation of your child(ren). A specific release form has to be signed prior to services rendered by the staff member, family needing services and the director.

## **Transportation Plan**

To and from the center: Countryside Child Care Center does not provide transportation to and from the center.

In case of an emergency: a staff member at the center will always call 911.

Field trips: Countryside Child Care Center does not go on field trips.

## **Behavior Management Policy**

The techniques for behavior management in this program are designed to set reasonable goals and positive expectations that offer choices that provide children an opportunity to verbalize their feelings, which encourage children to develop self-control through understanding. The teaching staff will aid in any situation that they foresee may lead to problems. Teachers will redirect any uncooperative children to another activity in a more positive direction. If a child is still having a hard time, a “take a break” method will come into play. The child will have to sit out away from the group for two minutes (toddlers) and four minutes (preschoolers). After their time is up, the teacher in the classroom will go over and talk to the child about why he was asked to “take a break”. There will be a small discussion and the teacher will then choose an activity or area in the room that would be a good choice for that child.

Children will be encouraged to work out their own solutions to problems that arise, if applicable. This encourages shy children to speak for themselves and aggressive children to verbalize. Children are always encouraged to use their words.

Where appropriate and feasible, children shall participate in the establishment of rules, policies, and procedures in their classrooms. By doing this, they are more apt to follow rules that they have put into prospective, allowing for more tolerable behavior.

## **Program Responsibilities**

**Providing Information to the Parents:** parents must be notified immediately of any injury which requires any medical care beyond minor first aid or of any emergency administration of non-prescription medication; immediately of any allegation of abused or neglect involving their children while in the care and custody of the director; prior to or as soon as possible following any change in educators; at the end of the day regarding any minor first aid administered; in writing within 48 hours of an incident; whenever special problems and significant developments arise; whenever a communicable disease or condition has been identified in the program; in writing seven days prior to the implementation of any change in program policy or procedures; prior to the introduction of any pets into the program; of the use of any herbicides or pesticides, prior to their use whenever possible; and whenever the program deviates from the planned menu.

**Availability of DEEC Regulations-**The program maintains a copy of the regulations, 102 CMR 7.00: *Standards for Licensure or Approval of Large Group Day Care and School Age Child Care Programs*, on the premises of the center and must make them available to any person upon request. If you have a question about any of the regulations, ask the center to show them to you.

## **Family Involvement Information**

The General Laws of the Commonwealth of Massachusetts mandates to the Department of Early Education and Care the legal responsibility of promulgating and enforcing rules and regulations governing the operation of family child care, small group and school age and large group and school age child care.

These regulations, 606 CMR 7.00, establish standards for operation of family child care, small group and school age and large group and school age child care programs in the Commonwealth. The regulations require certain things of licensees (program owner) in regard to their work with families. A summary of the required parent information, rights, and responsibilities are identified below.

**Parent Communication**-on-going communication is very important. Teachers speak to the parents at drop off in the morning to find out about the night before and at pick up, the teachers give information to the parents about their child's day at the center. Daily sheets are sent home in each classroom for each individual child. Newsletters are sent home monthly as well as curriculum calendars for the classrooms. For families that speak another language, the director has installed a translation app on her mobile phone as a way to communicate with all families whose primary language is not English.

**Enrollment Meeting**-parents must meet with the program director before admitting their child to the center. The parents and their children will have an orientation to the program. This includes meeting the teachers and having a tour of the program. The parents and the director will discuss the families interest and needs, the child's developmental history which will be updated annually and maintained in the child's file, and information is shared about any therapeutic, educational, social and support services received by the child in the past.

**Parent Input**-there is a suggestion/request box on the director's desk for any individual that has a comment about the program. It is up to the program to decide whether or not the suggestion/request will be implemented. It will be discussed with the individual who wrote the comment regardless of what decision is made.

**Parent Visits**-You have the right to visit the center and your child's room at any time while your child is present.

**Parent Conferences**-conferences are available at any time throughout the year from the request of a parent or a classroom teacher regarding his/her progress report or development.

**Progress Reports**-School age children will have a written progress report mid-way through the school year. Toddlers and preschoolers receive a written progress report every six months. It is filled out by his/her classroom teachers. There may be a request to have a meeting to discuss your child's activities and participation in the program. Teachers will provide a copy to you, and will maintain a copy of the report in your child's file. If your child is an infant or a child with disabilities, you should receive a written progress report at least every three months. Program staff will bring special problems or significant developments, particularly if they regard infants, to your attention as soon as they arise.

**Children's Records**-Information contained in a child's record is confidential. Program staff may not distribute or release information in a child's record to anyone not directly related to implementing the program plan for the child without your written consent. You must be notified if your child's record is subpoenaed.

**Transfer of Records**-When your child is no longer in care, the licensee can give your child's record to you, or any other person you identify, upon your written request.

**Amending Your Child's Records**-You have the right to add information, comments, data, or any other relevant materials to the child's record. You also have the right request deletion or amendment of any information contained in your child's record. If you believe that adding information is not sufficient to explain, clarify or correct objectionable material in your child's record, you have the right to a conference with the director to make your objections known. If you have a conference with the director, she must inform you in writing within one week of his decision regarding your objections. If the director decides in your favor, she must immediately take the steps necessary to put the decision into effect.

**Access to Your Child's Record**-You are entitled to have access to your child's record at reasonable times on request. You have access to your child's record within two business days of your request unless you consent to a longer time period. You are allowed to view your child's entire record, even if it is maintained in more than one location. The center has procedures governing access to, duplication of, and dissemination of children's record, and maintains a permanent, written log in each child's record which identifies anyone who has had access to the record or who has received any information from the record. This log is available only to you and the people responsible for maintaining the center's records.

## **Evacuation/Emergency Contingency Plan for Rochester**

Planning for emergencies and disasters is essential. The director informs the staff, children and parents how to go about dealing with any emergency situation so there is no panicking and everyone is safe. At the staff and parent orientations, a full explanation of the procedures for safe evacuation or an emergency or natural disaster is explained.

If an emergency occurs, such as a fire, or a warning is announced for a flood, tornado, earthquake, hurricane, or any other natural disaster the director/group leader will take charge. The director/group leader will be responsible for calling for emergency help, make sure the building is emptied properly, give guidance to staff and children, take the list of parents and their contact numbers which are located in the office, and turn off all the lights. The classroom assistant/teacher as well as the director/group leader will assist children with disabilities out to the play area. Also, at the center, there is a back pack that is located in the closet when you first walk in the classroom that will be taken. It includes first aid supplies, blankets, water, flashlights, activity books, crayons and paper. Since this center is part of a school, there is a maintenance person who is in charge of shutting off other power circuits, such as gas or electrical lines, if necessary.

There is emergency evacuation plans at all exits. To be sure all children are aware of the procedures; one fire drill a month is scheduled. Different exits will be used so children and staff members are comfortable with the evacuations. The director will maintain documentation of the date, time, evacuation route being used, number of children being evacuated and effectiveness of the drill and keep it in a log booklet.

In case of any type of natural disaster, the police and/or fire are notified immediately. An attendance sheet in each classroom must be kept accessible (clipboard) in case of an emergency. It is the teacher of the classrooms responsibility to take the clipboard as they exit the building so all children can be accounted for. The children are then transported to the playground. The director/group leader goes around and make sure that all children and staff have evacuated the building. No child will be left in the facility after evacuation. At

that point, teachers are responsible for checking the attendance sheets to make sure that all children are accounted for. The needs of any child with special needs is addressed. If any child is missing at any point during or after the evacuation, the local police will be called and then the parents.

If the children need to be transported to a shelter, then one staff member at a time will get their vehicle, drive it to the play area, and as safely as possible transport the children to the nearest shelter. In Rochester, there are two shelters used for emergency situations; one is the Rochester Senior Center and the other is Rochester Memorial School, so if it is safe enough to stay then that's what will happen. The police and fire authorities will be notified if their services are needed in transporting the children to the Senior Center, if need be. There is also a program called the Emergency Management Association that aids the police in case of any emergencies and they are willing to help in the transportation process.

Once all children and staff are safely at the designated shelter, the director/group leader and assistant teacher will be responsible for contacting all parents. The teachers will retain responsibility for all children until they are released to a parent, guardian or other designated person.

In the case of a power outage, loss of heat, or loss of water, the center will close depending on its severity. If it is in a warm month, and it is light outdoors, and we have the loss of power or heat, the center will remain open under the circumstance that the center can still operate safely. If the temperature drops under 65 degrees because of a power outage, parents will be notified immediately and their children will have to be picked up. If there is any danger towards the children and they cannot be properly cared for, the parent(s) or guardians will be called to pick up their children as soon as possible. Flashlights will be available, if needed, in case of any power outages. There are also emergency spot lights located in each classroom that come on when there is a power outage. With all this in place, the children and staff will be safe and the parents should feel comfortable with the safety of their child(ren) at Countryside Child Care Center in the event of an emergency should occur.

## **Plan for Administering Medication**

**Staff Administering Medication**-All staff members are trained in medication administration (an on-line training). The director and main teacher are the only one that administers medication if needed.

**Prescription Medication**-prescription medication must be brought to school in its original container and include the child's name, the name of the medication, the dosage, and the number of times per day the medication is to be administered. This prescription label will be accepted as the written authorization of the physician. The center will not administer any medication contrary to the directions on the label unless so authorized by written order of the child's physician. The parent must fill out the Authorization of Medication form before the medication can be administered.

**Non-prescription Medication**-non-prescription medication will be given only with written consent of the child's physician. The center will accept a signed statement from the physician listing the medication(s), the dosage and criteria for its administration. This statement will be valid for one year from the date that it was signed. Along with written consent of the physician, the center will also need written parental authorization. The parent must fill out the Authorization for Medication form, which allows the center to administer the non-prescription medication in accordance with the written order of the physician. The form will be updated weekly for the time it is needed. The center will make every attempt to contact the parent prior to the child receiving the non-prescription medication unless the child needs medication urgently or when contacting the parent will delay appropriate care unreasonably.

**Topical Ointments and Sprays**-topical ointments and sprays such as petroleum jelly, sunscreen, bug spray, etc... will be administered to the child with written parental permission. The signed statement from the parent will be valid for one year and include a list of topical non-prescription medications. When topical ointments and sprays are applied to wounds, rashes or broken skin, the center will follow its written procedure for non-prescription medications which includes the written order of the physician, which is valid for a year, and the Authorization for Medication form signed by the parent. A note will be sent home anytime topical ointments are given, with the time, amount and date.

**All Medications**-the first dosage must be administered by the parent at home in case of an allergic reaction. All medications must be given to the teacher directly by the parent. All medications will be stored in the kitchen, out of the reach of children (in the right upper cabinet or in the refrigerator door shelf if refrigeration is necessary). All medications that are considered controlled substances must be locked and kept out of reach of children. The director and the three chosen, competent teachers will be responsible for the administration of medication. The center will maintain a written record of the administration of a medication (excluding topical ointments and sprays applied to normal skin) which will include the child's name, the time and date of each administration, the dosage, and the name of the staff person administering the medication. This completed record will be part of the child's file. All unused medication will be returned to the parent and documented.



## **Plan for Mildly Ill Children**

Children who are mildly ill may remain in school if they are not contagious and they can participate in the daily program including outside time. If the child's condition worsens or, if it is determined that the child poses a threat to the health of other children, or if the child cannot be cared for by the classroom teacher, the director or lead teacher will contact the child's parent(s). The parent(s) will be asked to pick up the child. The child will be cared for in a quiet area, either in the classroom or in the director's office with a teacher qualified staff member or the director until the parent(s) arrive to take the child home. Any toys, blankets or mats used by an ill child will be cleaned and disinfected before being used by other children.

## **Plan for Managing Infectious Disease**

Staff will take extra special precautions when children who are ill are diagnosed at the center and when children who are mildly ill remain at the center. Children who exhibit symptoms of the following types of infectious diseases, such as gastro-intestinal, respiratory and skin or direct contact infections, may be excluded from the center if it is determined that any of the following exist:

1. The illness prevents the child from participating in the program activities or from resting comfortably.
2. The illness results in greater care need that the child care staff can provide without compromising the health and safety of the other children.
3. The child has any of the following conditions: fever, unusual lethargy, irritability, persistent crying, difficult breathing, or other signs of serious illness.
4. Whooping cough and may return after five days of being on antibiotics to prevent infections.
5. Diarrhea three or more times in one day and cannot return to the center until they are diarrhea/symptom free for 24 hours.
6. Vomiting two or more times in the previous 24 hours at home or once at the center.
7. Mouth sores, unless the physician states that the child is non-infectious.
8. Rash with a fever or behavior change until the physician has determined that the illness is not a communicable disease.
9. Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow discharge, often with matted eyelids) until examined by a physician and approved for readmission, with or without treatment.
10. Tuberculosis, until the child is non-infectious.
11. Impetigo, until 24 hours after treatment has started or all the sores are covered.
12. Head lice, free of all nits or scabies and free of all mites.
13. Strep infection, until 24 hours after treatment and the child has been without a fever for 24 hours.

14. Many types of hepatitis are caused by viruses. The symptoms are so alike that blood tests are needed to tell them apart. In the U.S. the most common types of hepatitis are A, B and C. Types B and C are spread through blood and other body fluids. Type A is spread through contaminated food and water or stool (feces). May return after one week after the onset of illness or as directed by a local health department; immune serum globulin should be administered to staff and children who have been exposed.
15. Chicken pox, until the last blister has healed over.
16. Mumps and may return nine days after the onset of gland swelling.
17. Measles and may return after six days from onset of rash.
18. Rubella and may return after six days after onset of rash.
19. Shingle and may return when determined by the physician.
20. Herpes simplex, which are clear, painful blisters, and may return when the lesions, involving face and lips that ooze have no secretions.

A child who has been excluded from child care may return after being evaluated by a physician, physician's assistant or nurse practitioner, and it has been determined that he/she is considered to pose no serious health risk to him/her as well as other children. Nevertheless, the child care center may make the final decision concerning the inclusion or exclusion of the child.

If a child has already been admitted to the center and shows signs of illness (for example: a fever equal to or greater than 100.5 degrees by the oral or auxiliary route, a rash, reduced activity level, diarrhea, etc...), he/she will be offered their mat to lie down. If the child manifests any of the symptoms requiring exclusion (as listed above) or it is determined that it is in the best interest of the children that he/she be taken home, his/her parent will be contacted immediately and asked to pick the child up as soon as possible. The child may not return to the center until they are fever free for 24 hours.

When a communicable disease has been introduced to the center, parents will be notified immediately, and in writing by the director. Whenever possible, information regarding the communicable disease shall be made available to parents. The director shall consult the Child Care Health Manual for such information. DPH must be contacted when there is a reportable communicable disease in your program.

**The program requires, on admission, a physician's certificate that each child has been successfully immunized in accordance with the Department of Public Health's recommended schedule. No child shall be required, under 102 CMR 7.00 to have any such immunization of his or her parent(s) object, in writing, on the grounds that it conflicts with their religious beliefs or if the child's physician submits documentation that such a procedure is contradicted. This must be maintained in the child's file. No child will be admitted into the program without the required documentations for immunizations. (Childhood Lead screening must be done on all children; it is not considered an immunization). The program will maintain a list of the children who have documented exemptions from immunizations and these children will be excluded from attending when a vaccine preventable disease is introduced into the program. The Massachusetts Immunization Program provides free childhood vaccines. The toll free telephone number is 1-800-658-2850.**

## **Procedure for Identifying and Reporting Suspected Child Abuse or Neglect to the Department of Social Services and to the Office**

All staff members are mandated reporters according to Massachusetts General Law C119, Section 51A. This means that if a staff member has a reasonable suspicion of abuse or neglect of a child, he/she must file a report with the Department of Children and Families.

**Department of Children and Families Telephone # is: 1-800-232-0991**

**Department of Early Education and Care Telephone # is: 1-508-828-5025**

### **The Following Procedures Must be Followed:**

1. A staff member who suspects abuse or neglect must document her observations including the child's name, date, time, child's injuries, child's behavior, and any other pertinent information. The staff member will discuss this information with the director.
2. The director or the staff member with the assistance of the director will make a verbal report to DCF, to be followed by a required written report 51A within 48 hours.
3. If a staff member feels that an incident should be reported to DCF, and the director disagrees, the staff member may report to DCF directly.
4. All concerns of suspected abuse and neglect that are reported to DCF will be communicated to the parents by the director unless such a report is contra-indicated.

**Procedures for Identifying and Reporting Child Abuse/Neglect While in the Care of the Center**-it is the center's commitment to protect all children in care from abuse and neglect. The following procedures for reporting suspected child abuse/neglect while the child is in the center's care.

The director will ensure that any educator accused of abuse or neglect of a child in a report to the Department of Children and Families does not work directly with the children until the Department of Children and Families investigation is completed and for such further time as the Department of Early Education and Care requires.

A meeting will be held with the staff member in question to inform him/her of the filed report. The staff member will be immediately suspended from the program without pay pending the outcome of the DCF and DEEC investigations. If the allegations of abuse and neglect are substantiated, it will be the decision of the director whether or not the staff member will be reinstated. The director and staff will cooperate fully with all investigations.

If a parent reports an incident to a staff member, the parent should be directed to the program administrator.

## **Referral Services and Termination**

The teachers at Countryside Child Care Center shall use the following procedures for referring parents to appropriate social, mental health, educational and medical services for their child should the center staff feel that an assessment for such additional services would benefit the child.

**Referral Process**-whenever any staff member is concerned about a child's development or behavior and feel that further evaluation should be done, they should report it to the child's classroom teacher, who will review concerns with the director.

If the administrator agrees, the teacher is requested to complete an observation report and review the child's record prior to making a referral.

The director will maintain a list of current referral resources in the community for children in need of social, mental health, educational or medical services. This list shall include the contact person for Chapter 766 and Early Intervention Program referrals.

**Referral Meeting With Parents**-The director schedules a meeting with parents to notify them of the centers concern and prepares a current list of possible referral resources.

At the meeting, the director will provide to the parent a written statement including the reason for recommending a referral for additional services, a brief summary of the centers observations related to the referral and any efforts the center may have made to accommodate the child's needs.

The director will offer assistance to the child's parents in making the referral. Parents will be encouraged to call or request in writing an evaluation. If parents need extra support, the center may, with written parental consent, contact the referral agency for them.

**Follow-up to the Referral**-the director will, with parental permission, contact the agency or service provider who evaluated the child for consultation and assistance in meeting the child's needs at the center. If it is determined that the child is not in need of services from this agency, or is ineligible to receive services, the center shall review the child's progress at the center every three months to determine if another referral is necessary.

**Record of Referrals**-The director will maintain a written record of any referrals, including the parent conference and the results. A referral checklist will be kept in the child's record.

## **Plan to Avoid Termination/Suspension of Families and Children**

The teachers at Countryside Child Care Center shall use the following procedures for terminating a child or family from the center:

1. The health and safety of the child at the center cannot be assured.
2. The child's developmental needs are not being met at the center.

Parents will be notified in writing and at a one on one meeting when possible, about the circumstances including the reasons for termination. A copy of this letter will be kept in the child's record.

3. Immediate termination may happen depending on the extremity of the situation and that is determined by the director.

The director will inform parents of the availability of information and referral for other services through a child care resource agency.

When any child or family is terminated from the center whether initiated by the center or the parent(s), the teacher will prepare the child for termination from the center in a manner consistent with the child's ability to understand. For preschoolers, the teacher should simply talk with the child and other children about the departing child and simple reasons for the departure, such as:

1. He will be going to a new school which can help him more.
2. She needs a different school to help her learn.
3. He is not leaving because he is bad; he needs a different kind of school and we will help his parent's find such a school.

Other suggested activities that might be appropriate include:

The children can give the departing child drawings and/or stories about the center. The class can make a book about the center with drawings and photos and stories of the center. The departing child can write (dictate) a story about the center. A photo of the child can be taken while involved in his or her favorite activity. The class may participate in a "good bye party".

Occasionally, a child's departure is sudden and the child and the center are not given an opportunity to say good-bye. The teacher will write a simple note of good-bye addressed to the child; photos and/or drawings may be included.

## **Suspension of Families and Children**

Families that have children enrolled may be suspended from Countryside Child Care Center if the following situations arise:

1. Your child's physical and immunizations are not updated yearly
2. As stated in the payments section, if you are two weeks behind in payments, then your child may not attend the center until the full amount is paid.
3. Not complying with all the rules and regulations written in the handbook.
4. Disciplining issues becoming a problem, such as your child is acting out repetitively; biting, scratching or physical fighting; having obsessive behavioral problems that are effecting other children or teachers at the center; or constantly acting up and antagonizing children at the center, then steps will be taken to begin the suspension/termination process.

The steps to be taken are as follows to avoid any type of suspension/termination:

1. Provide referrals for specific issues the child is having.
2. Set up trainings for the teachers and invite the parents.
3. Develop a behavioral intervention plan with the parents and implement it not only in the program, but at home as well.

If the issue is not with the child, but the parents, such as being late consistently on picking up your child, being late on payments, not updating your child's file when notices are given out, or not respecting/understanding what the staff/director at Countryside is explaining to you about your child about issues that have arisen and not agreeing with the policies Countryside has put forth in order to obtain a safe and healthy environment for all the families and children, then the termination process will begin. If these regulations are not being followed, then the director will give written notices to identify the problem(s), and if the parent(s) still do not respond, then a conference will be scheduled to try to resolve any issues that families are having as to why they are not complying with the rules. The action of suspension is the next step and the parents will be forewarned of this action before it takes place. There will be a letter sent out if the family does become suspended or terminated with conditions to return once the regulations are obeyed by the parents, depending on the final outcome and what the situation is at hand. Ultimately, the director has the final decision in what is best for the family, child, and center.

## **Resource and Referral List**

### **Department of Early Education and Care**

1 Washington Street  
Taunton, MA. 02780  
508-828-5025

### **Child Care Works**

105 Williams Street  
4<sup>th</sup> floor  
New Bedford, MA. 02740  
508-999-9930

### **Public School: Rochester Memorial**

16 Pine Street  
Rochester, MA. 02770  
508-763-2049

### **Kennedy-Donovan Center**

19 Hawthorn Street  
New Bedford, MA. 02740  
508-992-4756

### **Swartz Center for Children**

Rockdale Avenue  
New Bedford, MA. 02740  
508-996-3391

### **Early Intervention**

389 County Street  
New Bedford, MA. 02740  
508-997-1570

# **Countryside Child Care Center Contract**

**Director/Owner: Bonnie Morrison**

**Director: Amanda Brown**

I have received, read and understand the parent handbook for Countryside Child Care Center. I will abide by the rules, regulations, and policies provided by the facility as well as the Department of Early Education and Care.

Child enrolled at Countryside\_\_\_\_\_

Parent Signature\_\_\_\_\_

Date\_\_\_\_\_