Connecticut College
Children’s Program

FAMILY
HANDBOOK
2016 - 2017
CONNECTICUT COLLEGE CHILDREN'S PROGRAM
FAMILY HANDBOOK TABLE OF CONTENTS

WELCOME
STAFF
MISSION STATEMENT/DIVERSITY 1
LICENSING AND ACCREDITATION 2
PROGRAM DESCRIPTION 3
ENROLLMENT 4 - 5
PROGRAM PHILOSOPHY 6
CURRICULUM AND ASSESSMENT 7 - 9
CHILD MANAGEMENT POLICIES 10 - 13
GETTING AQUAINTED 14 - 19
FAMILY ENGAGEMENT 20 - 22
HEALTH GUIDE 23 - 29
ADMINISTRATION OF MEDICATION 30 - 31
UNIVERSAL PRECAUTIONS 32 - 33
EMERGENCY PLANS 34 - 35
SECURITY AND SAFETY 36 - 37
HISTORY
CALENDAR  (Please Post) Calendar
Welcome to the Connecticut College Children’s Program!

Dear Parents,

Thank you for your interest in the Connecticut College Children’s Program. Enclosed is information for you to consider as you choose a school experience for your child. Please note that we offer wrap around services for families who may need care for their child before school begins at 9:00 a.m. and after school ends at 3:00 p.m. We have a highly qualified teaching and clinical staff and believe this is a wonderful place for children and families. Our program has been described as a place where children and families meet friends and form relationships that last a lifetime.

I encourage you to visit the program so you can get a “feel” for the opportunities your child may experience as well as our spirit. Only you can determine if we are a good “fit” for your child.

Please call Beatrice DeMitte, M.S., our Associate Director or me if you have any questions. The school telephone number is (860) 439-2920. I look forward to meeting you and your child.

Sincerely,

Kathryn O’Connor, Ph.D.
Director, Connecticut College Children’s Program
Human Development Department
Connecticut College
The program staffing includes a team of professional early childhood and special education teachers, speech, occupational and physical therapists, social worker, consulting child psychologist, administrative assistant and administrators working together to design and implement the most optimal experience for young children. We check references and perform thorough background checks for all staff. A physical and TB screen is required prior to employment.

All of our staff is carefully chosen based on the special qualities, experience and talents that they have to offer to the children in our program. We believe that it is important for our clinical, teaching and administrative staff to be dedicated learners themselves, and we provide numerous opportunities for continuing education and professional development throughout the year.

STAFF TRAINING

All staff at CCCP receive extensive training in areas related to caring for your child. It is our belief that professional development is necessary to ensure a quality early childhood program. Some of this training includes information on cultural discipline of children, developmentally appropriate practice and curriculum, recognizing and reporting child abuse, assessment of children, aiding families through social service referral process, food preparation training, first aid/CPR, universal health and safety precautions, medication administration, epi-pen procedures and serving children with special needs. These are only some examples of training opportunities that staff receive on an ongoing basis. Staff training occurs the second Friday of the month when school is dismissed at 1:00 p.m.

All preschool teachers at CCCP hold teaching certification from State Department of Education relating to Early Childhood. All have met the DPH licensing requirements and most exceed the necessary qualifications. All Staff are CPR and First Aid Certified.

STAFF MEMBERS

Director: Kathryn O’Connor, Ph.D.
860-439-2922
kconnor@conncoll.edu

Associate Director: Beatrice DeMitte, M.S.
860-439-2632
bldem@conncoll.edu

Administrative Assistant: Cynthia Hendry
860-439-2920
chendry@conncoll.edu

Human Development Faculty Liaison: Michelle Dunlap, Ph.D.
860-439-2634
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Teachers:
Sarah Bevington, M.S.
Deborah Bates, M.S.
Sheila Bairstow, M.S.
Ellen Jones, M.S.
Carol Stockford, B.S.

Teacher Aides:
Ada Turley
Kim Brissette
Debbie Golub
Kate Stafford
Carmen De La Cruz
Sheryl Grills
Pauline Gaucher
Lisa Aldrich

Therapists:
Debra Dickson, RPT
Melissa Knowlton, MSPT
Jessica Robison, CCC-SLP
Connie Hunter, OTR/L, MA
Susan Baker, BSN

Physical Therapist
Physical Therapist
Speech and Language Pathologist
Occupational Therapist
Consulting Nurse
MISSION STATEMENT

Our goal is to offer high quality, comprehensive, play based early childhood education and other services for young children and their families. The mission of the Connecticut College Children’s Program is to generate new knowledge about human development in settings designed to train future scholars.

COMMITMENT TO DIVERSITY

“Connecticut College is committed to the goal of achieving equal opportunity for all and, accordingly, does not discriminate on the basis of race, color, sex, sexual orientation, gender identity, expression and characteristic, age, religion, national or ethnic origin, visible or invisible disability, or status as a disabled veteran.”

The Connecticut College Children’s program upholds all state and federal anti-discrimination laws that promote equal opportunity and prohibit discrimination. We believe that children, families and staff benefit from the diverse experiences, perspectives and cultures of those who attend or visit our program.
Licensing and Accreditation

State Department of Education

Connecticut College Children’s Program is a privately operated special education program that is approved by the Connecticut State Department of Education. Approval by the CSDE ensures that the program is operated in accordance with the Principles, Procedures and Standards for the Approval of Private Special Education Programs, adopted by the State Board of Education. Specific information can be found about this protocol at Connecticut State Department of Education Bureau of Special Education website: www.sde.ct.gov.

Connecticut Office of Early Childhood


National Association for the Education of Young Children (NAEYC) Accreditation

Early childhood programs accredited by NAEYC have voluntarily undergone a comprehensive process of internal self-study and improvement. NAEYC-Accredited programs must meet all ten of the NAEYC Early Childhood Program Standards, which are based on the latest research on the education, and development of young children. The NAEYC Accreditation is awarded for five years. Our Accreditation Certificate is displayed in our entrance.

For more information about NAEYC Accreditation please visit their website: www.naeyc.org.
PROGRAM DESCRIPTION

The Connecticut College Children’s Program is a model child and family-focused early childhood preschool program for young children of diverse backgrounds and abilities. It provides a laboratory setting for college student placements and student and faculty research opportunities. Each year the program serves approximately 75 children and their families. The children and families in the program are reflective of the general population of New London County who are seeking a high quality early childhood program.

The program staffing includes a team of professionals (i.e. early childhood and special education teachers, speech, occupational and physical therapists, social worker, consulting psychologist, administrative assistant and administrators) working together to design and implement the most optimal program for young children. There are program options available for children ages 18 months to six years. Programs for children under three years range from playgroups for 5 – 8 children to 1:1 sessions with a teacher or therapist. Programs for children three to six years old range from preschool classrooms with 12 –16 children, to smaller clusters of children, to 1:1 sessions with a teacher or therapist. All the grouping plans for the children are based on a carefully designed inclusion model. This means that children with a range of developmental strengths will be placed in developmentally appropriate, heterogeneous groupings (i.e. gender, age, cultural background, ability, etc.).

The curriculum is based on the premise that play is the way children interact with and learn from their environment. Play is the child’s genetically determined and inherent means of learning. It provides the opportunity for the child to organize thoughts, feelings, and skills within the context of exploring the new, and making sense of the familiar. Developmentally appropriate play is encouraged in the program by supporting children in meaningful relationships with one another, with adults, and in their use of materials and ideas. Play is a way for children to have power and control over their world as they practice emerging skills. The areas of fine and gross motor skills, language and cognitive skills, social/ emotional skills and creative expression are promoted through developmentally appropriate play options such as art, block building, dramatic play, music, movement, story time, and outdoor play, and are included in a typical day’s activities. Each day is carefully planned to suit the individual child’s developmental needs as well as the group’s goals and developmental needs. Staff members and college students observe and record children’s progress. These daily records are used in planning and the setting of new goals, as well as to assist in writing the children’s progress reports.

Family engagement is an integral part of the program. There are various options for families of children in the program to participate, including individual meetings with program staff, family groups, observation from booths through one- way mirrors, and open houses.

The program is funded through private and public sources that include Connecticut College, the State Department of Education, and family paid tuition. There is also collaborative planning with programming with New London School Readiness Council, Children First New London, LEARN, and Local Educational Agencies (LEA). The program has also received funds through private foundations and private donors including the Chamber of Commerce, Community Foundations, the Bodenwein Foundation, the Weyenberg Foundation, and the Frank Loomis Palmer Foundation, and Pfizer.

The preschool program functions on a forty-two week school year. School is open late August until mid-June, and then reopens for an optional five to six week summer session. The Birth to Three program serves children and their families throughout the year. The Birth to Three toddler group experiences physical therapy, occupational therapy, speech therapy and social work services are available according to the schedule determined by the Individual Family Service Plan. This school is approved by the Connecticut State Department of Education as a Private Special Education program and is accredited nationally by NAEYC (National Association for the Education of Young Children).

The office is open Monday - Friday 8:30 AM to 4:00 PM. If you would like to discuss the program in greater detail please call the office at (860) 439-2920 and arrange to speak with the Director, Dr. Kathryn O’Connor or the Associate Director, Beatrice DeMitte, M.S.

Revised 7/2013
ENROLLMENT

Upon inquiry we ask that an application form be completed and submitted to place your child on waitlist. Upon acceptance a placement form will need to be completed and returned to school with a non-refundable $60 fee.

All currently enrolled children are guaranteed enrollment for the following school year, provided parents return the placement form and non-refundable $60 fee by the specified deadline. Payment of tuition must be current in order to re-enroll a child. We ask that your tuition obligation be current as a condition of re-enrollment.

Community Toddler Group and Pre-School Children
Applications are sent to you upon request or can be downloaded from our website. All applications are accepted and reviewed by the Associate Director. After placement of returning children, priority is given to siblings of currently and previously enrolled children, followed by children of Connecticut College faculty, staff, and alums. Other applicants are then considered in the order of the dated applications and availability of requested days.

Children are enrolled for a late August-June school year. A child may enter the program during the year should an opening become available. Some families choose to extend their session to include the summer program.

Children DO NOT have to be toilet trained to enroll, nor do they need to meet a developmental standard.

School Readiness
Children served by the Connecticut Office of Early Childhood School Readiness Program are enrolled in the program by application and/or referral from New London Public Schools or other agencies. A child must be income eligible with priority given to New London residents. Eligible three and four year old children are placed in appropriate classrooms. Children supported through the School Readiness Grant program attend five days a week and are enrolled in the 180-day school year program. The goal of the School Readiness Program is to provide a high quality educational experience for child who otherwise would not be able to afford a preschool. Connecticut Office invests in supporting this experience so children enter Kindergarten ready to learn.

Children Identified under IDEA

Out of District Local Educational Agency (LEA) Placement
Enrollment of children with identified disabilities can occur throughout the school year. Typically a school district refers a child for consideration for CCCP enrollment if the school district is unable to provide the services identified in an IEP within the local district. The family visits the program and explores the appropriateness of the educational program with their school district liaison. A PPT meeting determines the educational related services required in order for a child to benefit from an educational program. Program placement is the prevue of the PPT.

Birth to Three
Birth to Three services are provided for children identified as eligible for services by interdisciplinary teams established under the jurisdiction of the State of Connecticut Department of Developmental Services. At CCCP’s center based program children are enrolled throughout the year and services are based on child specific needs. The interdisciplinary team includes an early interventionist (teacher), case manager, physical, occupational and speech therapist, social worker and the Director. Other consultants such as a child psychologist are available when a child requires that service. Referrals typically come from families, our Birth to Three Partner LEARN, pediatricians, as well as other Birth to Three program providers. Families and their children visit the program. An Individualized Family Service Plan (IFSP) meeting occurs to outline an early intervention plan. Prior to age three there is a transition process that CCCP coordinates with the family and various local school districts. Children transition to their local public school on their third birthday.

4
RESEARCH AND OBSERVATION

This is a college lab school, so there are opportunities for children to be part of research conducted by students and faculty.

Proposals for research are screened by the supervising faculty member, the Director and if appropriate the Institutional Review Board (IRB) at the College. Descriptions of research proposals are sent to you for your review and consent.

As a requirement of their studies at the college, undergraduate students and their faculty may observe children at the school. Data collected is typically descriptive, reported in the aggregate, and never identifies a child by name. This is an ongoing practice at CCCP. For more involved studies where children will be individually assessed and/or videotaped, children’s participation is voluntary. You have the opportunity to not give your consent for your child to participate in such a study.

GUIDELINES FOR USE OF THE OBSERVATION BOOTH/AREAS

We are fortunate to have observation booths/areas connected to every classroom, the motor room and clinical areas, that allow you to observe your child. Families are invited to come to the Children’s Program to observe their child(ren) from the observation booths or windows as often as you choose. There are headphones that will enable you to hear what is said in the classroom. We ask that you sign in at the front desk when you come in to observe so that we can keep a record of individuals in the building in the event of an emergency.

The privilege to be able to observe children at any time, brings with it special responsibilities that require your consideration.

- The observation of your child is a special look into his/her play world in a school setting. Respect your child’s school experience.
- Respect the confidentiality of all the children in the group. We ask that you only observe the group your child is in. You may discuss your observations with your child’s teacher, teacher assistant or administrator.
- If you are observing and see something that disturbs you, please do not go into the classroom. Find an administrator and express your concerns.
- Please keep your voice volume down and lights off when in the observation booth.
- Understand we cannot share with you any information about other children in your child’s class.
- Understand we will not share any information about your child with others.

CONFIDENTIALITY OF RECORDS

All information in a child’s file is confidential. The program will not share or release any information without consent of a parent or guardian.

As part of our school evaluation process that is conducted regularly by accrediting bodies such as, the State of Connecticut Departments of Education, CT Office of Early Childhood and the National Association for the Education of Young Children (NAEYC), a child’s record may be reviewed to assess if we are in compliance in regard to specific established standards. Any review will be documented on the access form in the child’s file.

According to the Family Educational Rights to Privacy Act (FERPA), it is the parent’s right to request a review of your child’s educational record. Parents can make an appointment to review their child’s file with the Associate Director at any time.

Each family that is enrolled at the Connecticut College Children’s Program has the right to expect confidentiality from our staff. The goal of all discussions about your child is to serve your child and you. Information you share with us is held in the strictest confidence.
PROGRAM PHILOSOPHY AND GOALS

EVALUATION AND EFFECTIVENESS OF PROGRAM

CCCP collects information on program quality from various sources. Examples include the NAEYC teacher survey and the NAEYC family survey. We also have a time during Parent Advisory Groups for discussion around program effectiveness. Reporting occurs annually to all funding sources and accreditation/approval bodies. Engaging in a reflective process to assess the effectiveness of the program is dependent upon family input and feedback from the appropriate staff and the larger early childhood community receiving schools.

PROGRAM PHILOSOPHY AND GOALS

The Connecticut College Children’s Program is a model child and family-focused early childhood program for young children of diverse backgrounds and abilities. We provide a laboratory setting for college student placement and student and faculty research opportunities. Each year the program serves approximately 75 children and their families. The children and families in the program are reflective of the general population of New London County who are seeking a high quality early childhood program. Our families represent the brilliant diversity of this New England community.

We recognize the unique qualities of individual children and feel that children learn best by being active, experiential learners. We provide a rich environment where children have the opportunity for discovery and growth. We encourage the love of learning and the development of an inquisitive mind.

We believe that children deserve to grow at their own rate in a warm, nurturing and supportive PLAY based environment.

MULTI-AGE GROUPING

Our program encourages multi-age grouping of preschool children - three, four and five year olds - to provide a rich learning environment that recognizes that all children are unique and develop at their own pace and according to their individual interests and abilities. Toddlers are an exception to this practice. Toddlers learn with other toddlers in an intentional effort to support their unique developmental tasks. Multi-age grouping helps ensure each program is implemented with the utmost focus on each child’s developmental status. Multi-age grouping is an effective tool in child development, providing many benefits including:

- Older children learn to be helpful, patient and tolerant, while developing increased confidence in their skills and abilities.
- Younger children have the opportunity to learn more advanced cognitive and social skills from the older children.
- Individual differences in development are more readily accommodated with typical peers.
- Children are challenged to think through problems in a more creative and flexible way as they observe children of other ages approaching problems differently than they do.
CURRICULUM AND ASSESSMENT

Our educational vision is rooted in the value of PLAY based instruction. Our milieu is based on the premise that play is the way children interact with and learn from their environment.

- Play is the child's genetically determined and inherent means of learning. It provides the opportunity for the child to organize thoughts, feelings, and skills within the context of exploring the new, and making sense of the familiar.
- Developmentally appropriate play is encouraged in the program by supporting children in meaningful relationships with one another, with adults, and in their use of materials and ideas.
- Play is a way for children to have power and control over their world as they practice emerging skills. The areas of fine and gross motor skills, language and cognitive skills, social/emotional skills and creative expression are promoted through developmentally appropriate play options such as art, block building, dramatic play, music, movement, story time, and outdoor play, and are included in a typical day's activities.

TOOLS FOR OUR CURRICULUM AND ASSESSMENT IMPLEMENTATION

BRIGANCE® Early Childhood: Screen
This tool is used to identify developmental status quickly and accurately. The BRIGANCE: Screen easily identifies potential learning delays and giftedness in language, motor, self-help, social-emotional, and cognitive skills. Teachers use screening results to help plan appropriate next steps for instruction.

The Screens help educators:
- Identify potential developmental delays and giftedness
- Reduce over-referrals with at-risk cutoffs
- Determine each child's specific strengths and needs
- Assess school readiness

Connecticut Early Learning and Development Standards (CT ELDS)
This document serves as the foundation for supporting learning and the joy of discovery in ALL young children in Connecticut. The CT ELDS are statements of what children from birth to age five should know and be able to do. CT ELDS links to Connecticut Core and the kindergarten – grade 12 standards. The learning progressions within the CT ELDS are consistent with and cross referenced to several developmental instruments.

Guiding Principles of CT ELDS are important points of reference for understanding the document. In Connecticut we believe:

Young Children:
- Are capable and competent.
- Learn best when their basic needs are met.
- Are unique in their growth and development.
- Develop and learn within the context of their family and culture.

Families:
- Are the primary caregivers and educators of young children.
- Are CRITICAL partners in all early learning environments.
Early Learning Environments:
♦ Support young children to learn in the context of relationships.
♦ Reinforce the importance of the cultural context of young children, families and communities.
♦ Provide opportunities for active exploration.
♦ Provide meaningful inclusion of children with special needs.
♦ Provide experiences that are relevant and integrated across domains of development.
♦ Intentionally promote the development of skills and knowledge.
♦ Provide opportunities for children to benefit from diversity.
♦ Support children’s language development in their primary language.

Connecticut Early Learning and Development Standards address the following domains:
♦ Cognition
♦ Social & Emotional Development
♦ Physical Development and Health
♦ Language and Literacy
♦ Creative Arts
♦ Mathematics
♦ Science
♦ Social Studies
This document is accessible for you to read.
DAILY ACTIVITIES

Although your child’s schedule varies somewhat everyday, a general description of the flow of a typical day is presented below:

**Indoor Time:** Center activities may include opportunities for exploration, dramatic play, project development, construction, art expression, language & literacy experiences, quiet and active choice.

**Circle Time:** Group times are child centered, participative and interactive. The planned group activities vary in content and may include opportunities for sharing, music and movement, concept learning and literacy experiences.

**Outdoor Time:** We understand gross motor play to be critical to your child’s development. All children experience gross motor activity daily. Physical activity is never removed from a child’s daily experience or used as a “thinking time.”

The playground is an extension of the classroom. Children can participate in an activity of their own choosing. A variety of experiences are available and may include: climbing equipment, swings, bicycles, balls, hoops, sand box, or toys. Indoor materials may be brought outdoors: easels, books, chalk, crayons, dolls, dress up clothes, etc. Inclement weather, special events, or celebrations will occasionally affect the scheduling of outdoor time.

**Snack and Lunch Times:** Staff sit and eat at snack and lunchtime with children. They encourage and participate in quiet conversation and provide good role models.

**Rest Time:** Children who are here for the school day are given the opportunity to nap or rest each day.

Activities are based on the individual needs of your child. Sensory experiences are highly valued in this environment and are embedded into classroom activities. Lesson plans are posted in each classroom.
CHILD MANAGEMENT POLICIES

The Connecticut College Children’s Program strives to support the child in learning to control his or her behavior. The primary goal of child management is helping children learn the lifelong skill of self-regulation, including both cognitive self-regulation and emotional self-regulation.

We think of discipline in terms of learning, not in terms of punishment. We are teaching children how to regulate themselves; in the behavior we model as adults, in how we arrange our classrooms, in how we talk to one another, and in the limits we set.

Within the context of helping particular children gain and maintain socially appropriate behavior, the staff at the Children’s Program may use behavior management techniques with children. These techniques will be used to reduce undesirable behavior and/or to increase and maintain desirable behavior.

Corporal punishment, sarcasm, or verbal abuse is not used at anytime, for any reason at the Children’s Program. We attempt to speak to children in terms of what they can do. We may say “Walk” rather than “Don’t run”.

We ask that adults not talk about children in the child’s presence unless the child is included in the conversation. For example, if a child had a difficult morning the teacher will call the designated family member at home that afternoon, or if the discussion is in the presence of the child she might say, “I’m going to talk to your mom/dad about the difficult time you had in the block area this morning. Do you want to help me explain or just listen?”

PRACTICAL APPLICATIONS OF DISCIPLINE/BEHAVIOR

♦ Encourage children to accept and express feelings. Acknowledge their feelings before attempting to resolve conflict.

♦ Create a classroom atmosphere through example and a milieu where it is natural and acceptable to all to express feelings. Help children to “script” their problem solving efforts by words and phrases for children to say when handling conflict.

♦ Maintain a positive approach to classroom climate and control through modeling and telling the children what to do, rather than what not to do.

♦ Establish rules for a smooth and safe functioning classroom in cooperation with the children at the beginning of the year. Where appropriate and feasible, children shall participate in the establishment of rules and routines.

♦ Talk about rules consistently to children and help children to apply the rules throughout their day.

♦ Use redirection techniques in providing another opportunity if child’s original choice is not available. Redirection of behaviors may include speaking individually to a child, assisting a child in selecting another activity, and implementing conflict resolution techniques.
• Offer children choices where real choices exist.

• Speak distinctly and in short meaningful sentences when children are involved in conflict that is potentially harmful.

• Minimize instances where children have to wait without anything to do for any length of time by providing well-planned experiences with materials readily available.

• Support and recognize children in their efforts to self regulate.

• Praise, Praise, Praise.

• Encourage children to recognize and acknowledge each other's individual differences.

• Continually supervise and provide positive emotional support to children who may need to be separated from the group in order to maintain control.

**Children with Special Needs**

The Connecticut College Children's Program will provide programs appropriate for children with special needs within the program in this inclusive environment. Connecticut College Children's Program is an Approved Private Special Education Program by Connecticut State Department of Education. An (LEA) Local Educational Agency may contract with CCCP for a student to attend this school if full implementation of the Individual Education Plan (IEP) is not possible within the district. Parents consent to placement here. This action may occur if determined appropriate by the Planning and Placement Team.
REFERRAL POLICY

There are times when teachers or parents/guardians have concerns about a child’s behavior or development. We take these concerns seriously and encourage communication between staff and families, pediatricians and community agencies.

Concerns are addressed in the following manner:

♦ A classroom concern about a child is brought to the attention of the Director/Associate Director.
♦ The child is observed and behaviors are documented daily for a minimum of two weeks by the teachers and/or a clinical member of the interdisciplinary team (physical, occupation, speech therapist).
♦ School concerns and observations are discussed with parents.
♦ The clinical staff work with children and teachers in the classroom, when appropriate, to create a classroom environment that facilitates learning, supports development, and accommodates individual differences.

If evaluation of the child is reasonable, options will be shared with the parent or guardian. Options may include:

♦ Evaluation for children under Birth to Three, a State of Connecticut Program.
♦ Evaluation for children through Child Find offered by every local public school in Connecticut.
♦ Families may be encouraged to share school concerns with their pediatrician or health care provider. Private options for evaluation will be discussed such as a referral to the Yale Child Study Center, Boston Children’s Multidisciplinary Evaluation Team, or a private clinician.
♦ Families will determine “next steps”.
♦ Classroom team will implement strategies and supports to create a responsive classroom environment that promotes learning, self regulation and joy in school. Data will be collected so that intervention may be evaluated.
♦ If a child is determined to be eligible for educational services under Individual Disabilities Educational Act (IDEA), either Part C – Birth to Three – or Part B – School age 3 – 21 the CCCP Team will work with families and the appropriate systems to determine a transition plan.
♦ Parental consent is required if a referral to a school or agency is the plan of action.

Referral System to DCF

♦ All injuries, child’s verbal statements of injury, abuse or neglect, or unusual behavior must be reported by the Director, Associate Director, Social Worker or classroom teacher to DCF, as soon as the observation is made.

♦ It is not our policy that any staff person interview or question a child about an incident. In the case of suspected sexual abuse no staff person speaks with the child. Referral is made to DCF. DCF trained investigators will assume all responsibility from that time on. CCCP does not want to obstruct the DCF investigation process by interviewing or questioning a child by an untrained person. This may unintentionally create episodic memory in a child and make the investigation process more difficult for all involved. By statute, DCF is the only agency that has the authority to investigate suspected issues of abuse or neglect.
Policy on Protective Service Referrals

The Connecticut State Public Acts 02-106 and 02-138 requires that "...any person entrusted with the care of a child or youth" who obtains information about a potential or suspected incident of the physical abuse, sexual abuse, neglect or maltreatment of a child "during the ordinary course of such persons employment or profession" must report the incident to the DCF Hotline "as soon as practical but not later than twelve hours after the mandated reporter has reasonable cause to suspect or believe that the child has been abused or neglected or placed in imminent risk of serious harm."

The purpose of reporting child abuse or neglect is to protect children, initiate a prompt DCF investigation so that services might support the child and family and aid in keeping the family unit intact.

Terms generally associated with child maltreatment are described below. (Please Note: Connecticut General Statutes may otherwise define a term. The description below is not intended to replace the language in the C.G.S.

Generally:

1. **Physical Abuse** refers to the act or failure to act, by a parent or caretaker, that causes some physical injury or some impairment of future growth and development of the child.

2. **Sexual Abuse** is exposure of a child to sexual stimulation that is inappropriate for his/her level of psychosexual development and role in the family.

3. **Emotional Abuse**, a form of maltreatment, includes "the parents' lack of love and proper direction, inability to accept a child with his potentialities, as well as his limitations..."and failure to encourage the child's normal development by assurance of love and acceptance."

4. **Physical Neglect** refers to the failure to provide adequate food, clothing, medical attention, shelter, care and supervision and protection.

5. **Emotional Neglect** refers to extreme lack of attention, affection and emotional support; or permitting serious misconduct; or refusal of recommended treatment of services (recommended by school officials, medical personnel, etc.).
GETTING AQUAINTED: THE BASICS

CONTACT INFORMATION

Connecticut College Children’s Program
Box 5215, CT College
75 Nameauq Avenue
New London, Connecticut 06320
Telephone (860) 439-2920
Fax Number (860) 439-5317
www.conncoll.edu/childrens-program
Twitter @ConnCollegeCP
Facebook ConnCollegeCP

Tax ID Number: 06-0646587

TELEPHONE: The telephone number at the Children’s Program is (860) 439-2920. The school administrative assistant answers telephone calls between 8:30 a.m. to 3:30 p.m. If you call the school after hours, a message may be left on the answering machine that will be delivered between 8:30 a.m. and 8:45 a.m. or 4:00 p.m. and 4:15 p.m. Should you call the school during office hours and connect with the answering machine, know that the message will be replayed within 15 minutes.

Please notify the school with any new telephone numbers so that we might contact you in case of an emergency.

HOURS OF OPERATION

The program is open Monday – Friday 7:30 a.m. to 5:00 p.m. For information please call the office (860-439-2920).

Toddler Play Group /Preschool:

Part Day: 9:00 a.m. to 1:00 p.m. (Monday - Friday, late August -June)
School Day: 9:00 a.m. to 3:00 p.m. (Monday - Friday, late August -June)
CAMEL CARE Morning: 7:30 a.m. to 9:00 a.m. (Monday - Friday, late August -June)
CAMEL CARE Afternoon: 3:00 p.m. to 4:30 p.m. or 5:00 p.m. (Monday – Friday, late August -June)

CCCP dismisses all children the second Friday of every month at 1:00 p.m.

CCCP will be CLOSED:

Labor Day
Fall Break
Thanksgiving Break
Winter Break (1-2 weeks in December)

Martin Luther King Day
Spring Break (2 weeks in March)
Memorial Day
Independence Day

*Families are not charged for the above holidays and vacation days.

CAMEL CARE: Camel Care is a before and after school program with monthly sign up. Camel Care fees and registration forms are available upon request at the front desk. If you have an emergency and need to use Camel Care, we must first determine if we have available space and adequate adult supervision. The fee will be $9.00 an hour.
ARRIVAL: School begins at 9:00 a.m. Classroom doors will open at 8:55 a.m. Before that time teachers are preparing the classrooms and participating in meetings. Each classroom has a schedule of planned routines and activities and children need transition time to acclimate to their schedule. For this reason families are requested to have their child in the classroom by 9:15 a.m. Please be sure that the teacher knows your child has arrived and the teacher and your child know you are leaving. It is helpful if the teacher is informed of any significant evening or morning events in the child's life (i.e. "Susan did not sleep well last night." "Mom left this morning for a two day trip," etc.). Please sign your child in and out of the classroom each day.

LATE PICK-UP POLICY: Please call if you are going to be late, so that we know when to expect you and can prepare and support your child. Late charges are $10.00 per 15 minutes or portion thereof. If a child is not picked up at dismissal time, the parents are called. If parents cannot be reached, it is imperative that there is an emergency designated person on file. Staff will continue to attempt to reach the parents and/or designated emergency contact person until 5:15 pm when the building closes. If a parent or designated emergency person is contacted two staff members stay with the child until the parent or designated emergency person arrives. If no contact is made with the parent or designated contact person, the staff member shall notify the local police department to help locate the parents and to advise on further action.

PAYMENT GUIDELINES AND DISMISSAL OPTIONS: During enrollment, you will receive a tuition statement with the amount of your monthly tuition, a payment schedule and tuition fee information. If payment is not received within the grace period, you will be assessed a late fee of $20. If payment is not made by the end of the month, your child's placement in the Preschool may be rescinded. A parent may withdraw their child at any time during the school. A two-week written notice is required for financial obligations for future payments to be voided. Parents/guardians are responsible for the entire month regardless of when a child's last day of attendance. No credits will be given if a student withdraws midmonth. All deposits, fees and tuition are non-refundable.

*If you are experiencing temporary financial difficulties, please see Beatrice DeMitte, Associate Director before tuition is due, and we will attempt to work out a payment schedule. All financial matters are and all pertinent financial documentation is kept confidential.

SLIDING SCALE (School Readiness Program ONLY): We use the current DSS School Readiness sliding fee scale. Fee determination formula is completed upon enrollment and re-determined every six months or in case of a change in family status. Fee calculation is reviewed with a parent. We ask for your signature and provide a copy of the fee calculation form. Fees that are determined to apply to your child and family are due at the beginning of each month with a grace period of 10 days.

PICK-UP: In the case of a temporary change in your child's end of the day transportation, a note to the teacher with your signature is required, stating the name, relationship and telephone number of the person you have authorized to pick up your child. We will require ID. If the person you ask to pick up your child is not listed on the child's completed emergency form or if a person is listed, but cannot be identified by a staff member we will not release your child. We need either written permission or, in cases of emergency, a telephone call from a legal guardian who can be identified by a staff member. Please do not leave a message on the answering machine. You must speak directly to a staff member. Any person who picks up your child must be 18 years of age or older and able to show proper identification.

TRANSPORTATION: The intersection of Deshon and NMeans Avenue is often busy. Always hold your child's hand when you are walking in or out of the building. Please be aware and cautious of moving traffic when you drop off and pick up your child from the Children's Program. Please do not park directly in front of the Children's Program between 8:45 a.m. and 9:00 a.m. or 12:30 p.m. and 1:15 p.m because school district vans require that space.

Child Passenger Safety Laws in Connecticut

LAW: Infants must remain rear-facing until they are a minimum of both 20 pounds and one year old. Further recommended: Babies should be kept rear-facing until they are 2 years old or meet the maximum height or weight limit for their car seat when it is rear-facing.

LAW: Toddlers must be in a car seat.

Further recommended: Children should remain in a car seat until they reach the weight or height limit of their car seat (usually 40 pounds or more). Additionally, don't use a car seat that has been in a crash or has expired.

LAW: Children must ride in a car seat or booster seat until they reach 6 years old AND 60 pounds (they must meet
both requirements). Children who ride in a booster seat must use a lap and shoulder belt. Further recommended: Children should continue to ride in a booster seat until the seat belt fits properly (fitting on their collar bone and hip bones, not on their neck and stomach). **LAW:** Children, tweens and teens must be in a seat belt wherever they ride in the vehicle. Further recommended: Children should ride in the back seat until they are 13 years old. All people and objects should be properly restrained wherever they are in the vehicle.

**ABSENTEE POLICY:** If your child is going to be absent from school, please call the office at 860-439-2920 by 9:00 a.m. Regular attendance is important in order for children to receive the maximum benefit from school, to reduce separation anxiety, and to ensure program continuity for all. If a child is absent 4 consecutive sessions for health reasons parents will be requested to provide a statement of good health to the school from a physician or nurse practitioner upon their return.

**EMERGENCY INFORMATION:** Emergency contact information for each child must be current. We ask that any change in address and/or telephone number, be shared with us within 24 hours.

**NAP POLICY:** Nap is a part of program routine and all children are required to nap or rest if they are in school after 1:00 p.m. Children are welcome to bring a blanket, pillow and soft toy from home. Books or other quiet materials/activities are provided for children who rest. Naptime for the Toddlers and Preschoolers is between 45 minutes and 1.5 hours depending on the needs of your child. Families have input into how long their child should sleep. Books and quiet activities are available at this time.

**SMOKING:** NO Smoking is allowed in the building or on any premises of the Children’s Program or it’s playgrounds. Smoking is not allowed at any Children’s Program sponsored events held throughout the school year.

**FIREARMS AND WEAPONS POLICY:** Firearms or weapons are never permitted on or near school grounds. Firearms and weapons are not allowed at any Children’s Program sponsored events held throughout the school year.

**BIRTHDAYS:** Birthdays are a NON-FOOD celebration at the Children’s Program. We try to keep all celebrations simple so we ask that you do not bring party hats, bags, favors, etc. If you wish to acknowledge your child’s birthday at school please inform your child’s teacher. They will discuss with you what might be an appropriate activity.

If you plan a celebration at home and will be inviting some, but not all, children from class, please mail invitations to the children’s homes to avoid hurt feelings at school. If you choose to invite your child’s entire class, invitations may be passed out at school. This policy is not intended to convey our thoughts or judgment about how many children, or who you should invite to your child’s birthday party.

**HOLIDAYS:** Holidays are acknowledged but not celebrated at the Connecticut College Children’s Program. Sometimes families have particular traditions they would like to share with their child’s class and this is always a welcomed treat for all.

Experience has shown us that holiday parties, costumes, etc., can be overwhelming for some children, and so teachers tend to focus on seasonal changes. For example, at Thanksgiving time we may celebrate the gifts of autumn and the fall harvest. At Halloween time we may work with children on issues around fantasy and reality (e.g. “Is she really a monster or is she just dressed up and pretending to be monster?”) In December, we may focus on the changing weather, feeding the birds, and learning to dress for the weather. February may find the focus on friendship, caring and sharing.

**CLOTHING:** Children paint, use markers and crayons, play in sand, water and other sensory materials while at school. Although all the art materials are non-toxic and washable, clothing can get stained. For this reason children should come to school dressed in play clothes. Please dress children appropriately for active play. Closed-toe sturdy shoes that entirely cover the feet are preferred for school use.
DRESSING FOR OUTDOOR PLAY: Outdoor play is an integral part of the classroom activities. All children benefit from being outside and laying with friends. Please dress children in closed toe sturdy shoes for safety. Flip flops are not allowed.

Children should be appropriately dressed for outdoor play during all seasons of the year (hats, boots, gloves, snow pants, etc.). Dry, layered clothing provides the most warmth during cold weather. All clothing, including boots, should be marked with your child’s name. We ask that you provide at least one change of clothing to be kept at the center. Toddlers may need several changes.

VIDEO AND PHOTOGRAPhS: As part of the Connecticut College’s Program teaching approach, activities are sometimes video recorded by staff for the purpose of observing child behavior, teacher development and to mark change over time. Occasionally, segments of these recorded videos will be presented to professionals for teaching and program evaluation purposes.Parents/guardians are notified of any special projects and provide consent for videos or photographs to be shared.

Children may be photographed to document classroom projects. Consent is required if we want to use a picture of your child on our brochure or for our benefit. Children are not identified by name.

FIELD TRIPS: Fieldtrips are community experiences and are a small part of our curriculum. Field trips are planned with the ages and interests of the children in mind.

Neighborhood Fieldtrips
The Children go on walks in the neighborhood as part of their ongoing preschool curriculum. They may walk to the Coast Guard Academy, Carolina Gardens, CC Campus, Shain Library, and Arboretum or just simply around the block. The program administrators know the ETD (estimated time of departure) and ETA (estimated time of arrival) at the program of these groups. Each of our staff carry cell phones for the purpose of emergencies and communication as needed.

Local Area Fieldtrips
Area fieldtrips may be planned in the fall and spring that require the children to go on a rented school bus to a location in the area (Apple Orchards, Pequot Nature Center, Harkness Park, Washington Park, Mystic Aquarium, Public Library etc.) Parents are invited to accompany the children on the trip. The program administrators know the ETD and ETA of these groups. Each of our staff carry cell phones for the purpose of emergencies and communication as needed.

SNACKS: Nutritious snacks will be provided in the morning and afternoon. They include food such as cheese and crackers, fresh fruit, vegetables and dip, cereal and yogurt. Please remember to alert us to any food allergies. If your child has special dietary needs, or your religion forbids certain foods, please inform us.

LUNCH: Children should bring a lunch to school in a name labeled lunchbox. Snack and lunch are opportunities for us to emphasize nutrition, good eating routines and family style meal behavior with the children. Lunches should be foods that the child can eat without direct adult help. (Food items that need adult preparation are discouraged.) Lunches should be child friendly and ready to eat. To aid your child’s feeling of independence and to help alleviate confusion during lunchtime, please peel eggs and fruit with rinds (e.g. oranges), cut grapes, etc. Please pack a spoon or fork when necessary.

Water is served during snack and lunch for a beverage. Families may provide a milk or milk substitute for their child.

*Please NO SODAS or CANDY because of the high sugar content.

We recommend freezing your child’s drink(s) the night before to use as an ice pack in their lunch. It will keep cold food cold and will thaw before lunch time (usually around noon). You may prefer to use an actual ice pack. Glass bottles are not permitted.

We will try to return leftover food to your child’s lunch box because this gives you an indication of what your child has eaten. Staff members interact with children while they are eating and work with children who need to be
encouraged to eat. Children and teachers use this time to work on socialization and table manners.

Thermoses (labeled) may be brought, but our staff cannot heat foods

**THERAPY/WITHOLDING:** Our program policy is that food giving or withholding is never used as a reward or punishment. On some occasions food may be used in clinical (PT, OT or speech) sessions as a sensory means to awaken the mouth area or introduce new foods as part of a planned learning experience. Children receiving clinical services have an Individual Education Plan (IEP) or Individual Family Service Plan (IFSP) in place with parent/guardian consent.

**CHOKE FOODS:** The following is a list of foods that could pose potential choking hazards to children under the age of three years. These foods will not be served in our toddler program(s) either at snack time (provided by the Program), or at lunchtime (provided by parent).

- Raisins
- Chunks of raw carrots, celery, peas
- Nuts
- Hot Dogs (may be served if cut in half lengthwise, and then into small pieces.
- Grapes (may be served if cut in half)
- Popcorn, hard pretzels
- Fruitsnacks

**BABYSITTING POLICY:** Staff members are encouraged not to babysit for families with children enrolled in our program. Our world is driven by litigious forces and this informs our policy around babysitting. Connecticut College students may be an option for you if you need a babysitter. Parents may also place a request on the Parent 2 Parent Board for their babysitting needs.
WHAT CHILDREN NEED AT SCHOOL

To Be Left At School

♦ Disposable diapers and wipes. Each child will need his or her own supply of diapers to be kept at the changing table or by the bathroom. The staff will notify you when your child’s supplies are low.

♦ A complete change of (season-appropriate) clothes: shirt, bottoms (pants, shorts or skirt), underpants and socks. Please label all items with your child’s name. Children who are in the process of toilet training should bring several changes of clothes and an extra pair of shoes to school.

♦ For children enrolled in the school day or full day option, a blanket and a cot sheet for naptime. At the end of each week, the sheet and blanket will be returned home. Please wash the items and return them to school on your child’s next day here.

To Be Brought In Daily

♦ A healthy lunch. We provide a morning and an afternoon snack.

♦ A bag or backpack for carrying home important papers, artwork and assorted treasures.

♦ NOTE: Everything should be labeled with your child’s name or initials.

Special Blankets, “Comfy” Items and Transitional Objects: Many children have “special” blankets or stuffed animals that are proxies for stability. These items carry the safe memories of home in them and support children through transitions. We welcome these items and will take great care that they travel home with your child. Transitional objects confer a benefit for children and do not fit in the “toy” category.

Toys from Home: Please have your child leave his/her toys at home. There is so much for your child to do at school! If your child has a particular transitional object she/he needs to bring to school, please let the teacher know. Toys that do come from home will stay in the child’s cubby. If your child has a special item they would like to share with their friends, please schedule a day with the teacher (e.g., photographs from a trip, shells from a recent walk to beach etc.) We welcome this opportunity for your child to share their experiences with their classmates. NO TOY WEAPONS ARE PERMITTED IN SCHOOL!
Family Engagement Policies

We welcome and encourage family engagement in a variety of ways. We believe that children benefit from a strong relationship between family and school. Our program is based on the spirit of “community” where children, parents and staff feel a strong sense of partnership and belonging.

Families are always welcome. We invite families to share their talents, occupations or hobbies with us. We encourage special activities such as being guest readers/and sharing a favorite book to read to the class.

We want to be good partners. We listen and know it is important to be in close contact with you in regard to your child’s day. We can talk with you during morning or afternoon pick-up, or you can call or email during the day. Since drop-off and pick-up can be rushed and busy times for children, families and staff, if you would like to have more than a few moments to chat, we encourage you to set up a phone conference or a personal conference time with the classroom teachers.

We also ask that you share with us information that may be affecting your child in school so that we can understand how to support your child. Examples include health issues or a change at home, such as the death of a family member or pet, a family visit or a new sibling.

Communication is very important to us! No question is ever too small or too “silly” to ask. Please feel free to call with any of your questions or concerns.

Communication
Conferences: Parent/guardians are provided information about their child’s development four times a year. Information is shared with you in writing two of the four times each year. We intend our communication to be respectful of your family values and the choices you have made regarding your child. Your home language and your culture are areas we want to support in school and celebrate. In addition to scheduled conferences, parents or guardians may request a conference at any time. This is your school and we want it to be the best place it can be for you.

Our Twitter and Facebook Accounts are a new addition to our communication tools. Notifications will be sent out with reminders of calendar events and school closings and delays.

Parent’s Bulletin Board: Notices are posted on a designated board in the lobby and outside your child’s classroom which changes frequently and contains valuable notes, curriculum information, helpful hints, center information, child development articles and other miscellaneous information. Please keep an eye on it!

Notices and letters: These are sent home frequently, to let you know about opportunities at school and in our community. If you have the need to have notices in a language other than English, we will try our best to assist you.

Please remember to check your child’s mailbox and BOOKBAG daily!

OPPORTUNITIES FOR PARENT PARTICIPATION

We have family activities throughout the year. These events are a great opportunity to get to know other families at CCCP and to see your child in action with friends.


**OPEN DOOR POLICY:** We have an open door policy for families. You may drop in any day, at any time, to observe (see observation booth policy and) your child or join in our activities. Please remember that during the school day, the teachers must focus on their children, so please do not use this as a time for a conference.

**BUILDING FAMILY AND SCHOOL PARTNERSHIPS:** The opportunities for families to come together and build relationships is facilitated through opportunities which may include but are not limited to: back to school orientation, family walk in the Arboretum, class family dinners at Children’s Program, family movie night, children’s art show displayed on campus, eat lunch with your child for family members, quarterly Directors Tea which is an opportunity for families to direct the conversation and set the agenda.

**PARENT ADVISORY COMMITTEE (PAC):** Early childhood education is delivered through Connecticut College Children’s Program as a function of its role as a setting for teaching, training and research in early childhood education and development. This unique collaboration among families, teachers, researchers, administrators and students allows us to benefit from shared ideas. The Parent Advisory Committee (PAC) provides a forum for this sharing and you are invited to join. The PAC meets at least once a semester to help our program grow in the areas of accreditation process, advise and support program development, generate new ideas and practice. The PAC also helps plan and implement center wide activities and offers a vision for the future.

**FAMILY LITERACY:** We provide literacy activities through the year. We have a parent lending library, family literacy program, book swap, and a storyteller. Donated books are distributed. Parents are always welcome to read in their native language or English.

**FAMILY SUPPORT**

**REFERRAL:** Staff at CCCP is trained to help families gain access to a variety of services within the program as well as in the surrounding communities. Our program has established local health care resources and linkages with appropriate community agencies for health services, dental services, mental health services, HUSKY, identification of special needs and services, nutritional services, continuing education services, job training programs, adult education, English as a Second Language and economic assistance services. All information is kept strictly confidential. Assistance is available to help our families’ complete paperwork, and access appropriate agency services and programs.

**PLANNED WORKSHOPS AND TRAINING:** Connecticut College offers parent training workshops as well as opportunities for families to join together in an effort to establish a thriving and supportive early childhood climate. Families are asked to complete questionnaires suggesting topics of interest. Many programs offer lunch and evening workshops usually include childcare. Topics may include but are not limited: Positive Parent Discipline Practices with Young Children, Toilet Training Your Toddler, Parent-Child Boundaries – Are They Necessary?, Establishing Friendships – What Does This Mean for My Preschooler?, Your Child’s Nutrition: How Your Child’s Diet May Affect Behavior, Separation and Individualization in the Early Childhood Setting, Keeping the Child in Childhood: What Parents Can Do to Promote PLAY at Home, Directed Art Expressions – Helping Young Artists Reach Their Creative Potential.

**KINDERGARTEN TRANSITION PLAN:** Our Family Coordinator gathers information from Southeastern Connecticut public and private schools about registration and disseminates this information to all families whose children are eligible for kindergarten in the next school year. CCCP is host to three
workshops yearly to assist parents/guardians in the registration process. If a family member is unable to attend the transition meetings, the school enrollment packet is available. On site assistance with process and application is available for families. Copies of registration packets from the public school are available in some alternate languages. Parents/guardians may sign a permission form to have information from their child’s records sent to their child’s kindergarten teacher. This information includes developmental profiles, a copy of their physical, and any other pertinent information requested by the parent. General classroom activities to aide transition include Socks, the puppet and books about a child’s first day in Kindergarten. In class, discussion occurs around “new school and of course, “THE BUS!”

**NAEYC FOR FAMILIES:** An excellent resource for families. The site lets families search for NAEYC-accredited programs, offers tips on what to look for in a program, and regularly releases articles on young children’s learning and development. You can link to the content that meets your needs at families.naeyc.org.
A HEALTH GUIDE FOR PARENTS
PEANUT AND NUT PRODUCT FREE SCHOOL POLICY

ALLERGIES: Tree Nut/Peanut and Perfume-Free environment:
Connecticut College Children's Program is a Tree Nut/Peanut and Perfume-Free Environment. There are children and staff who are allergic or sensitive to peanuts, tree-nuts, perfumes, colognes, and other such products. Children attending the program, and adults who intend on visiting the program, should check ingredient labels on food brought into the building and should refrain from using these products.

We ask that your child not bring any peanut butter or nut products to school for lunch. We may have children in the program that have allergies to peanut products, and can have serious reaction if they are around these products. We ask that if your child has peanut butter or peanut products for breakfast before they came to school that you wash their hands to remove the any peanut residual. Sunflower seed spread (marketed as sun butter) is a good alternative to peanut butter.

NUTRITION: The Children's Program is committed to providing nutritious food for your child. Periodically literature is distributed to families providing guidelines and suggestions for sound nutrition. Connecticut College Children's Program has a registered dietician who consults with the program on nutritional health. Our nutritionist checks all snack menus and offers family and staff nutrition trainings throughout the year. These programs are free of charge to families enrolled in the program. The staff identifies and documents the nutritional needs of the children through family questionnaires and observation. We strive to provide children with nutritious snacks.
Snack and lunch are opportunities for us to emphasize nutrition and good eating routines with the children. Adults sit and eat with children, engage them in conversation and model social behavior in a family style meal setting.

Toddlers do not carry bottles, sippy cups or regular cups with them while crawling or walking in their classroom. Teaching staff offer children fluids from a cup as soon as the families and teachers decide mutually that the child is developmentally ready to use a cup. The speech and occupational therapist are available for consultation in the event that a medical condition complicates this regular developmental task.

TO PREVENT DISEASE / IMMUNIZATION EXEMPTIONS

Policy and Procedure for Health Records

A current physical and current immunization form is required by the Connecticut Office of Early Childhood for every child BEFORE entry to the program. The physical form must be updated annually. Before leaving the doctor's office please ensure that all items on the medical evaluation portion of the form that are marked with an "*" have been completed by the health care practitioner as they are required by the state.

PLEASE NOTE: A small number of children may not receive immunizations for religious or medical reasons and must have physician/Office of Early Childhood documentation on file with the school. School children exempted from immunizations will be excluded from school if there is an outbreak of one of the vaccine-preventable diseases. Children will not be able to return to school until either the danger of the outbreak has passed or the child becomes ill with the disease and completely recovers.
Be sure your child receives all immunizations on schedule. Several diseases that used to be a serious problem for children and adults can now be prevented by immunization. These include measles, mumps, German measles (rubella or 3-day measles), polio, diphtheria, tetanus, whooping cough (pertussis), bacterial pneumonia, Meningitis, Hepatitis A, Hepatitis B, Varicella (Chicken Pox) Haemophilus Influenzae Type B, (“H. Flu”) and Influenza (“The Flu”).

Some people think these diseases no longer exist or are no longer a problem. This is not true! Cases still occur. The reason these diseases are no longer a widespread problem in the U. S., is that people are immunized. If people stopped getting these protective shots for themselves and their children, these diseases would once again become common problems.

Young children in programs with other children are especially likely targets for disease. All children in such programs need to have all recommended immunizations to protect themselves, their families, other children, and staff. Arrange to take your child to the doctor to receive these immunizations on schedule, and provide documentation to the program staff when your child has received an immunization so that his/her record may be updated. Refer to the following chart to see which immunizations your child needs:

**HOW DISEASES SPREAD**

Many common childhood diseases are contagious - that is, they spread from one person to another. Everyone knows that some illnesses (like chicken pox) can spread, but many people don’t know that diseases like diarrhea, hepatitis, and impetigo can also spread.

Contagious diseases are spread by germs. Germs are so small that you cannot see them without a microscope, yet just a few germs on a hand or toy may be enough to spread a disease. Germs are spread through body secretions. Intestinal tract infections spread through stool. Respiratory tract infections spread through coughs, sneezes, and runny noses. Other diseases spread by direct contact.

People can spread germs without being sick themselves. A person with a disease is often contagious before he develops symptoms. Young children can spread disease germs to their families and caregivers without ever getting sick themselves. This means that steps to prevent the spread of contagious diseases must be followed always, not just when a person is obviously sick.
# CT Immunization Requirements Schedule For Day Care, Family Day Care, Group Day Care Homes

<table>
<thead>
<tr>
<th>Vaccines</th>
<th>Under 2 months of age</th>
<th>By 3 months of age</th>
<th>By 5 months of age</th>
<th>By 7 months of age</th>
<th>By 16 months of age</th>
<th>By 18 months of age</th>
<th>By 19 months of age</th>
<th>2 years of age (24–35 months)</th>
<th>3 to 5 years of age (36–59 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTP/DTaP/DT</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>4 doses</td>
<td>4 doses</td>
<td>4 doses</td>
</tr>
<tr>
<td>Polio</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>2 doses</td>
<td>2 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
<td>3 doses</td>
</tr>
<tr>
<td>MMR</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 dose after 1st birthday&lt;sup&gt;1&lt;/sup&gt;</td>
<td>1 dose after 1st birthday&lt;sup&gt;1&lt;/sup&gt;</td>
<td>1 dose after 1st birthday&lt;sup&gt;1&lt;/sup&gt;</td>
<td>1 dose after 1st birthday&lt;sup&gt;1&lt;/sup&gt;</td>
<td>1 dose after 1st birthday&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td>Hep B</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>2 doses</td>
<td>2 doses</td>
<td>3 doses</td>
<td>3 doses</td>
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<tr>
<td>HIB</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>2 or 3 doses depending on vaccine given&lt;sup&gt;2&lt;/sup&gt;</td>
<td>1 booster dose after 1st birthday&lt;sup&gt;3&lt;/sup&gt;</td>
<td>1 booster dose after 1st birthday&lt;sup&gt;3&lt;/sup&gt;</td>
<td>1 booster dose after 1st birthday&lt;sup&gt;3&lt;/sup&gt;</td>
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<td>1 booster dose after 1st birthday&lt;sup&gt;3&lt;/sup&gt;</td>
</tr>
<tr>
<td>Varicella</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 dose after 1st birthday or prior history of disease&lt;sup&gt;4&lt;/sup&gt;</td>
<td>1 dose after 1st birthday or prior history of disease&lt;sup&gt;4&lt;/sup&gt;</td>
<td>1 dose after 1st birthday or prior history of disease&lt;sup&gt;4&lt;/sup&gt;</td>
<td>1 dose after 1st birthday or prior history of disease&lt;sup&gt;4&lt;/sup&gt;</td>
<td>1 dose after 1st birthday or prior history of disease&lt;sup&gt;4&lt;/sup&gt;</td>
</tr>
<tr>
<td>Pneumococcal Conjugate Vaccine (PCV)</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
<td>1 dose after 1st birthday</td>
</tr>
<tr>
<td>Hepatitis A</td>
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<td>None</td>
<td>None</td>
<td>None</td>
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<tr>
<td>Influenza</td>
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<td>None</td>
<td>1 or 2 doses</td>
<td>1 or 2 doses&lt;sup&gt;5&lt;/sup&gt;</td>
<td>1 or 2 doses&lt;sup&gt;5&lt;/sup&gt;</td>
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<td>1 or 2 doses&lt;sup&gt;5&lt;/sup&gt;</td>
<td>1 or 2 doses&lt;sup&gt;5&lt;/sup&gt;</td>
</tr>
</tbody>
</table>

1 Laboratory confirmed immunity also acceptable
2 A Complete primary series is 2 doses of PRP-OMP (PedvaxHIB) or 3 doses of HbOC (ActHib or Pentacel)
3 As a final booster dose if the child completed the primary series before age 12 months. Children who receive the first dose of Hib on or after 12 months of age and before 15 months of age are required to have 2 doses. Children who received the first dose of Hib vaccine on or after 15 months of age are required to have only one dose
4 Hepatitis A is required for all children born after January 1, 2009
5 Two doses in the same flu season are required for children who have not previously received an influenza vaccination, with a single dose required during subsequent seasons

**Vaccines:**
- DTap-IPV-Hib
- Varicella
- DTap-Hib
- Hib
- HIB-Hep B
- DTap-IPV

**Brand Names:**
- Pentacel
- Varivax
- TriHibit
- ActHib or PedvaxHIB or Hiberix
- Convax
- Kintrix

**Vaccines:**
- Influenza
- DTap-IPV-Hep B
- Hepatitis A
- MMRV
- PCV 7
- PCV 13

**Brand Names:**
- Flumist or Fluarix or Fluzone or Fluvirin or Flulaval
- Pedvax
- Havrix or Vaqla
- ProQuad
- Prevenar
- Prevenar 13

Revised 10/30/2013
IF YOUR CHILD DEVELOPS:

Fever - if temperature is 100 F or above

Diarrhea and/or Vomiting -
diarrhea spreads easily among young children

Severe Cold - chest discomfort, hacking cough, secretions or sputum greenish in color

Severe Coughing - chest discomfort, hacking cough, secretions or sputum greenish in color, child gets red or blue in the face, child makes high-pitched croupy or whooping sound after he coughs.

Difficult or Rapid Breathing - especially if child is an infant under 6 months old.

Yellowish Skin or Eyes - could be signs of Hepatitis

Unusual spots or rashes
Gray or white stool
Sore throat or trouble swallowing
Unusually dark, tea-colored urine
Infected skin patches - crusty, bright yellow, dry or gummy areas of skin

KEEP CHILD HOME UNTIL

Child must remain home one entire day after symptoms are gone.

Keep home until symptoms disappear or a note from a physician that states child can attend program without danger to themself, another child or staff member.

WHAT YOU SHOULD DO IF YOUR CHILD...

... IS EXPOSED TO A CONTAGIOUS DISEASE

... DEVELOPS SYMPTOMS OF A CONTAGIOUS DISEASE

... IS DIAGNOSED BY A PHYSICIAN AS HAVING A CONTAGIOUS DISEASE

1. Inform staff if your child has been exposed to any contagious disease. This includes the following diseases:

   | Chicken Pox   | Head Lice | H. Flu   | Campylobacter |
   | Diarrhea      | Strep Throat | Ring Worm | Salmonella    |
   | Hepatitis A   | Scabies | Shigella | Impetigo      |
   | Fifth Disease | Giardia | Pinworm | Bacterial Meningitis |
   | Measles       | Mumps | Rubella | Diphtheria    |
   | Pertussis     | Bacterial Pneumonia | Pink Eye | RSV (Respiratory Syncitial Virus) |

If the staff knows that your child has been exposed to a contagious disease, they can be especially alert about his/her hand washing and other preventive measures. In certain cases, the program may want to take special measures to prevent your child and others from actually developing the disease.
2. **Keep your child home** if he/she develops any of the following symptoms of a contagious disease, and consult your health care provider:

**PLEASE KEEP YOUR CHILD HOME IF HE/SHE IS DIAGNOSED AS HAVING ANY OF THE FOLLOWING CONTAGIOUS DISEASES:**

<table>
<thead>
<tr>
<th>DISEASE</th>
<th>SYMPTOMS</th>
<th>CHILD MAY RETURN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Infections</strong></td>
<td>Fever, severe cramps, vomiting, headache, and loose stools.</td>
<td>Send in a note with your child from physician.</td>
</tr>
<tr>
<td><strong>Diarrhea</strong> (Giardia, Shigella, Salmonella, Campylobacter)</td>
<td>First stages are headache, bodyache, sore throat, low grade fever, chills, and bright red rashes on cheeks</td>
<td>Send in note with child from a physician, or return when symptoms are gone.</td>
</tr>
<tr>
<td><strong>Fifth Disease</strong></td>
<td>May start as oozing at injured spot on skin, often on the face. Rash looks oozy, red and round, may have flat honey-colored crust, and may be itchy</td>
<td>Child may return when lesions are crusted and healed or 48 hours after commencing antibiotic treatment and a note from physician.</td>
</tr>
<tr>
<td><strong>Impetigo</strong> (Common skin infection)</td>
<td>Itchy rash of red bumps and burrows (short, wavy, dirty-looking lines in the skin). Area most commonly involved are sides of fingers, wrist, elbows, underarms and belt lines</td>
<td>Child may return after 24 hours of treatment and a note from physician.</td>
</tr>
<tr>
<td><strong>Scabies</strong></td>
<td>Persistent scratching of head and back of neck, because of itching caused by bites of the louse, can usually see eggs(nits) attached to hair shaft near scalp</td>
<td>Child may return after treatment with medicated shampoo. Repeat treatment in 7 to 10 days.</td>
</tr>
<tr>
<td><strong>Pediculosis</strong> (Head Lice)</td>
<td>Sore throat, fever, tender swollen neck glands, headaches, and stomach ache. Sometimes cough, runny nose, and other symptoms</td>
<td>A child who tested positive for strep may return after taking medicine for at least 24 hours, and has been fever free for at least 24 hours.</td>
</tr>
<tr>
<td><strong>Pin worm</strong></td>
<td>Some people feel intense itching around rectum, others do not</td>
<td></td>
</tr>
<tr>
<td><strong>Ringworm</strong></td>
<td>Flat, growing ring-shaped rash. Edges of circle reddish and may be raised and itchy. Scalp infection starts as small bump and spreads</td>
<td>A child may return the day after treatment started, with note from physician.</td>
</tr>
</tbody>
</table>
outward. On feet: scales, cracks and blisters between the toes

<table>
<thead>
<tr>
<th>Chicken Pox</th>
<th>Usually begins with mild fever and itchy rash. Rash starts with crops of small red bumps on the stomach or back and spreads to the face and limbs. The red bumps rapidly become blistered, oozy, and then crust over</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child may return when all the blisters are dried up and crusted over.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pertussis (Whooping Cough)</th>
<th>Runny nose, low-grade fever, mild, occasional cough progressing to fits of many rapid coughs followed by high-pitched “whoop”, cough may last up to 10 weeks.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child may return with a note from physician.</td>
<td></td>
</tr>
</tbody>
</table>

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**IF ALL FAMILIES KEEP SICK CHILDREN HOME, EVERYONE’S CHILDREN WILL STAY HEALTHIER. IN THE END, THIS WILL MEAN HEALTHIER CHILDREN AND FEWER LOST SCHOOL AND WORK DAYS TOO!**

**IF YOUR CHILD BECOMES SICK WHILE AT THE CHILDREN’S PROGRAM**

You will be notified immediately if your child becomes ill or injured. If you cannot be reached, we will call an emergency contact listed on your Emergency Form. For the health and safety of all the children, it is important that you pick up your child at the time you are notified. A child who becomes ill while at the Program will be isolated from other children.

Please note that many children have frequent illnesses when they first enter a childcare or school environment. Once the child’s immune system becomes more resistant, those illnesses often decrease in frequency.

Please inform the school if there are any changes in address, phone numbers (work and home), emergency contacts or medical information.

**ACCIDENTS and INJURIES**

Throughout childhood we believe it is important to allow children to explore and discover our world both at home and at school. However, a scratch, bumps, pinches and bites occur and are all part of growing up in a world where discovery is valued. In the event of slight injuries or minor accidents, a staff member will administer first aid, and an accident report will be completed for review with you. If a more serious injury occurs, an attempt will be made to notify parents/guardians immediately, and necessary steps will be taken to obtain immediate medical attention. Your child’s EMERGENCY RECORD will serve as our guide in case of illness or emergency.

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

Biting is a natural developmental stage that many children go experience. It is usually a temporary condition that is most common between thirteen and twenty-four months of age. The safety of the children at the CCCP is our primary concern. Our biting policy addresses the actions the staff will take if a biting incident occurs.

Toddlers bite other toddlers for many different reasons. A child might be teething or overly tired and frustrated. He or she might be experimenting or trying to get the attention of the teacher or his peers. Toddlers are developing expressive language skills. Toddlers are impulsive and just beginning to learn self-regulation and self control. Sometimes biting occurs for no apparent reason. The school will encourage the children to "use their words" if they become angry or frustrated. The staff members will provide supervision of children at all times.

The following steps will be taken if a biting incident occurs:

♦ The biting will be interrupted with a firm "No...we don't bite our friends!" Biting hurts
♦ Staff will stay calm and will not overreact.
♦ The bitten child will be comforted.
♦ Staff will remove the biter from the situation and redirect his/her activity.
♦ The wound of the bitten child shall be assessed and cleansed with soap and water. If it is determined that there was a blood exposure further steps need to be taken under our UNIVERSAL PRECAUTIONS practice.

The families of both children will be notified of the biting incident. An accident form will be completed by a staff member. A copy of the accident report will then be given to notify the parent/guardian and for their review and signature. If a bite requires medical treatment, a copy of the accident form will be given to the parents.

Confidentiality of all children involved will be maintained at all times.
Administration of Medications at the Program

The Connecticut College Children’s Program will store and administer prescribed medications, inhaler, epi-pen, non-prescription topical medication and oral medications (i.e. Benadryl) with parent’s/guardian’s consent. The medical authorization form must be completed by the physician and signed by the parent/guardian and doctor and is available at the program. All prescription medications must be in their original containers and clearly labeled from the pharmacy.

The prescription label and form should include:

- The child’s name, address and birthdate
- The drug name
- The prescribed dosage
- The method of administration
- The time to be administered
- The side effects
- The prescribers, name, address and telephone number

With the exception of epi-pens and inhalers, all medication will be locked in the front office cabinet, locked in your child’s classroom or in a locked box in the refrigerator. Non-prescription medication will be allowed to be stored in the locked containers with signed permission by a parent/guardian. The topical medication will be stored in the original container with the child’s name and directions for administering. Emergency medications (auto injectors and inhalers) are kept with the teachers and go where the students go. Parent/guardians may authorize a limited selection of medication, for use at school, without the need for a doctor’s note. Ask the staff for the appropriate form. This authorization is limited to the following topical medications:

1. Non-prescription diaper changing ointments that are free of antibiotics, antifungal or steroidal components.
2. Non-Prescription medicated powders.
3. Non-prescription teething medications
4. Non-prescription insect repellents
5. Non-prescription sunscreen protectants that are free of amino benzoic acid (PABA)

Parents/guardians are asked to bring the medication to school in person. With the parent/guardian present the administrator will count and register the quantity and information on Individual Student Prescription Record. The parent’s/guardian’s signature will attest to the findings.

Connecticut College Children’s Program will keep accurate documentation of all medications administered. Included in the documentation are:

- The date the medicine was administered
- The time it was administered
- The dose that was administered
- The signature of the staff administering the medication
- Comments
A parent/guardian will be notified when a child has been administered any emergency medication at school. Staff are trained in the administration of medicine by the nurse consultant. This training is renewed every one to three years. Untrained staff will not be permitted to administer medications.

At least one staff member who has a certificate showing satisfactory completion of pediatric first-aid training, including managing a blocked airway is always present with each group of children. At least one staff member who has a certificate showing satisfactory completion of CPR is always present on site.

When public health authorities recommend use of insect repellents due to high risk of insect-borne disease we notify parents/guardians and follow Connecticut Office of Early Childhood recommendations.
UNIVERSAL PRECAUTIONS

Staff members are trained annually regarding Connecticut College policies and procedures for exposure to blood borne pathogens (blood, urine, feces or vomit.) Each staff member is made aware of the Universal Precautions, which are methods used in infection control in which all blood and certain body fluids are treated as if they are known to be infectious. Gloves and other personal protective measures are available and must be used by staff to protect skin against direct contact with blood, urine, feces or vomit.

The safety policies and procedures of Universal Precautions are always used at the Children’s Program to provide the children with an environment free from hazard.

HANDWASHING AND DISINFECTING

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

♦ Wash hands with soap and warm running water for at least 20 seconds
♦ Avoid recontamination from faucets by turning off faucets with paper towels
♦ Dry hands with disposable paper towels

ALWAYS WASH HANDS:
♦ Upon arrival
♦ Before and after meals
♦ After using the toilet
♦ Upon return to classroom from outside play
♦ After nose wiping, sneezing, coughing
♦ Before and after handling animals
♦ After handling materials such as sand or dirt
♦ After contact with any potentially infectious materials including bodily fluids
♦ Before and after playing in any shared water by two or more children

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

PROTOCOL: TAKING CHILDREN TO THE BATHROOM

♦ When the bathroom is located outside of the classroom, a child is accompanied to the bathroom by a staff member.
♦ The bathroom door remains open while the child is in the bathroom with a staff member
♦ Staff members accompanying the child to the bathroom do not touch the child while he/she is undressing, toileting or redressing except to assist with snaps, buttons, zippers or belts.
♦ The staff member uses appropriate words with the child (taking the lead from any appropriate word that the child typically uses) while in the bathroom about the toileting process, and refrains from repeating inappropriate words the child may say. The staff member should model appropriate language.
♦ Staff are mindful of the safety of the child in their care, their developmental need and general well being.
PROTOCOL: DIAPER CHANGING

Staff use only disposable diapers or pull-ups unless the child has a medical reason that does not permit their use. A health provider’s authorization is required for the use of cloth diapers.

1. Children are checked by a staff member a minimum of every two hours for signs of a wet or feces contained diaper. Diapers are changed immediately when wet or soiled.
2. Children are changed in designated changing areas (NOT anywhere else)
3. Paper, disposable gloves, plastic bags, and disinfectant are available in each child's bathroom.
4. At all times, caregivers have a hand on the child when the child is being changed on an elevated surface.
5. Instructions are posted by the changing area:
   a. Put paper on mat
   b. Put on disposable gloves
   c. Change diaper using disposable diapers or pull-ups
   d. Put diaper and paper in plastic bag
   e. Remove gloves and put in plastic bag
   f. Tie plastic bag and
   g. Place in hands free diaper pail (keep lid closed when not discarding diapers)
   h. Spray mat with disinfectant
   I. Wash your hands and your child's hands.
6. Soiled Clothing
   a. Clothing is immediately placed in a plastic bag (without rinsing)
   b. Clothing is sent home same day for laundering
EMERGENCY PLANS

MEDICAL
The administrators must be notified immediately to assess severity of injury. If required, teacher stays with child and sends aide or college student to call 911 from classroom or front desk.

Administrator or Administrative Assistant calls parents. If a parent is not available, calls are placed to emergency contact person the parent has identified to be notified in case of an emergency. Teacher or most familiar adult accompanies child in ambulance.

WEATHER
On snow days or during other hazardous weather emergencies, the Director will determine closing, delay or early dismissal schedule. Parents will be notified via radio, television announcements, telephone or social media.

INCLEMENT WEATHER POLICY: In case of inclement weather, school cancellations will be announced over local AM and FM radio stations (New London, Groton, Norwich). A message about the status of school will be on the school’s answering machine (860)439-2920. We may make our announcement the night before or by 6:30 a.m. the day of cancellation. This program serves children from approximately 10 towns in Southeastern Connecticut. We do not follow any particular school district’s cancellation policy. Please listen for announcements specifically regarding our school’s delayed opening or closing. You may sign up to be directly notified by the TV alert system by going to their website.

Radio Stations:  
WTYD/WNLC  1510 AM  100.9 FM  
WLIS  1420 AM  
WICH/WCTY  1310 AM  97.7 FM

Television Stations:  
NBC  or  CBS

The SCHOOL DELAY POLICY for children who attend sessions at the Children’s Program is as follows:

_If there is a delayed opening, there will be no A.M. early morning care._

1. **60 minute delay** classes begin at 10:00 a.m. and end at the regular time.

2. **90 minute delay** classes begin at 10:30 a.m. and end at the regular time.

3. **Two hour delay** classes begin at 11:00 a.m. and end at the regular time.

You may also call the school at 860-439-2920 after 6:30 a.m. to listen to a recorded message as to the status of classes that day.

This information is also available on twitter and facebook.
FIRE OR OTHER EMERGENCIES

1. All occupants assemble in the designated area.

2. Attendance is taken. Administrator checks with each class to make sure all children are accounted for.

3. Parents will be notified via the cell phone where and when to pick up their children.

EMERGENCY EVACUATION

1. In the event that this school is ordered to evacuate, the children will be driven by staff to the nearest State of Connecticut designated evacuation site, Kelly Middle School in Norwich. Directions to Kelly Middle School from CCCP are: take 395 North, take exit 81E to Route 169 North and follow signs. This is a State of Connecticut determined procedure.

2. Signs will be posted at CCCP to alert parents in the event of an emergency evacuation as to the location of the evacuation site. Parents will also be notified by cell phone.

3. Ratios will be maintained at all times and a minimum of two staff will remain with children until all return home.
At the Children’s Program our security protocol is extensive and part of the large Connecticut College Security Protocols.

The 2012-2013 academic year brought great change to every school in Connecticut triggered by the December 14 events at Sandy Hook Elementary School in Newtown. Our school is no exception. We have added a silent panic button and independent intercom system that when activated signals campus safety. The protocol in place is that campus safety immediately notifies New London Police and then arrives on site. New London Police will respond immediately. In addition, we installed an outdoor loud alarm that can be activated at the front desk. Our doors are locked at all times. The front desk person must identify all entering the building. The lock is released upon identification to allow entry into the school.

All schools practice “Intruder In” and “Intruder Out” drills just as we practice “Fire Drills”. In our school because we work with young children and believe it serves no gain and may harm, we refer to our intruder drills as Hide & Seek In and Hide & Seek Out. Monthly tests are conducted on different days of the week. Our drills are monitored and recorded by a safety expert. Each drill is evaluated and a corrective plan is put in place prior to the next drill.

Security will be addressed during our orientation session prior to the start of each school year. It is not recommended that we publish the specifics of our security plan but we will be detailed and forthcoming with parents at any time.

SAFETY AND SECURITY MEASURES

- Access Controlled Security Doors
- Panic Alarm
- Identification Required for Pick-Ups
- Telephones in All Classrooms
- Fire Safety
  - Monitored Fire Alarm
  - Annual building inspection by the New London County Fire Marshall
  - Fire extinguishers get inspected every six months
  - The entire building has fire doors and smoke detectors
- Monthly Security, Fire, Intruder and Evacuation Drills
- Emergency Contact Information Located in All Classrooms
- Routine Background Check and Fingerprint Check on All Staff
- Intercom System Connecting Classrooms For Emergencies
ASBESTOS MANAGEMENT PLAN

It is required that we inform you about asbestos.

Notification of the Availability of the Asbestos Management Plan:

In 1986, Congress passed the Asbestos Hazard Emergency Response Act (AHERA) which requires schools to be inspected to identify any asbestos containing building materials. Suspected asbestos-containing building materials were located, sampled (or assumed) and rated according to condition and potential hazard. Every three years, Holmes Hall conducts a comprehensive re-inspection to determine whether the condition of the known or assumed asbestos containing building materials (ACBM) has changed. At the last re-inspection conducted on all materials listed in the Management Plan as asbestos containing (or assumed to be asbestos-containing) were inspected and found to be in good condition. In addition to this triennial inspection, asbestos materials are surveyed every six months to ensure that they remain in good condition.

The law further requires an "Asbestos Management Plan" to be in place, that addresses the status of asbestos activities, asbestos awareness training for affected employees, and procedures designed to minimize the disturbance of asbestos containing building materials. Copies of the Asbestos Management Plan are available for review at the Holmes Hall Reception Desk, or in the Office of Environmental Health and Safety.

Any questions or concerns regarding the Asbestos Management Plan should be directed to Steve Langlois, the Director of Environmental Health & Safety at 860-439-2252.

PESTICIDES AND HERBICIDES POLICY

The program maintains facilities so they are free from harmful animals, insects pests, and poisonous plants. Connecticut College is a "green" campus!

Although pesticide use is not eliminated, measures other than pesticides are implemented first. When Pesticides and herbicides, are used they applied according to the manufacture's instructions, when children are not at the facility and in a manner that prevents skin contact, inhalation, and other exposure to children.
In 1947, the field of psychology entered a new era with the publication of the first edition of "The New Psychology," which offered a fresh perspective on the study of human behavior. This groundbreaking work laid the groundwork for modern psychological research and theory. Since then, advances in technology and improved methodologies have allowed psychologists to explore the complexities of the human mind with greater precision. Today, psychology continues to evolve, integrating insights from neuroscience, technology, and cultural studies to provide a holistic understanding of human behavior.