



Statewide Voluntary Preschool Program Guidelines



GUARDIAN ANGEL PRESCHOOL
JOHN F. KENNEDY CATHOLIC SCHOOL

1627 W. 42nd Street

Davenport IA 52806

563-391-3030

2023-2024

A Program of Davenport Community Schools

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General Information

ENROLLMENT

The statewide voluntary preschool programs are affiliated with the Davenport Community School District. We will only admit children upon written consent or application of a parent, guardian, or other person having legal custody. Families will be expected to complete all enrollment forms provided by the school prior to entry.

MISSION, VISION & CORE VALUES

Mission

Our mission is to provide young children and their families with a high quality educational experience that ensures all children are ready for kindergarten.

Vision

Staff will provide students with a broad range of educational opportunities that will help each student develop academic skills through experiences that enrich each child's social- emotional, physical, cognitive and creative abilities; by fostering partnerships between our schools, families and community members.

Our Core Values

1. We believe home, school, and community relationships are central to our students' learning.
2. We believe that we must discover a student's strengths as a starting point and work towards each student's potential.
3. We believe our environments reflect the cultures and experiences of the children within them.
4. We believe that children's decision-making and self-regulation are essential components of engaged learning.
5. We believe that, as educators, we need to share and learn from one another in order to grow professionally and provide quality instruction.

Guardian Angel/JFK Philosophy

The purpose of our preschool is to provide children with an opportunity for early childhood education in a Christian setting. We always have the child's best interest as our top priority. Children arrive with different backgrounds, experiences, strengths and weaknesses, which we will use to encourage them to reach their full potential as students.

IMPORTANT CONTACT INFORMATION

Community Agencies

Child Care Assistance:

Department of Human Services
(563) 326-8680

Early Childhood Iowa Scholarships

Friendly House
(563) 323-1821 Ext. 15

Developmental Assessments:

Mississippi Bend AEA
(563) 359-1371

INSTRUCTIONAL TIME

Statewide Voluntary Preschool Programming is guaranteed for 10 hours per week. During this ten hour time, no fees may be charged for registration, materials, or snack. Religious instruction will not take place during the guaranteed 10 hours.

Guardian Angel/JFK offers an additional 4.5 hours of instruction for a total of 14.5 hours. There is a one-time additional time fee for these hours.

SNACKS OR MEALS

IQPPS Criteria 1.3, 5.9, 5.10, 5.11, 5.16

All programs take steps to ensure food safety in its provision of meals and snacks. All snacks and meals shall follow CACFP guidelines. Snacks/meals shall be provided no longer than 3 hours apart. When snacks/meals are prepared on site, menus will be posted on the family bulletin board of each building. Food that comes from home for sharing among the children are either whole fruits or commercially prepared packaged foods in factory-sealed containers.

The program protects children with food allergies from contact with the problem food.

Staff shall never threaten to or withhold food from children as a form of discipline or punishment.

Procedures

ADMISSION PROCEDURES

IQPPS Criteria 1.7, 9.10

Guardian Angel Preschool at John F. Kennedy Catholic School is affiliated with the Davenport Community School District. We will only admit children upon written consent or application of a parent, guardian, or other person having legal custody. Families will be expected to complete all enrollment forms provided by the school prior to entry in addition to immunization and physical requirements.

It is the policy of the Davenport Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact the district's Equity Coordinator: Mr. Jabari Woods, Associate Director of Human Resources & Equity woods@j@davenportschools.org (563-336-7496), 1702 N. Main Street, Davenport, Iowa 52803.

Teaching staff counter potential bias and discrimination by... a. treating all children with equal respect and consideration. b. initiating activities and discussions that build positive self-identity and teach the valuing of differences. c. intervening when children tease or reject others. d. providing models and visual images of adult roles, differing abilities, and ethnic or cultural backgrounds that counter stereotypical limitations. e. avoiding stereotypes in language references.

Facilities meet Americans with Disabilities Act (ADA) accessibility requirements. Accessibility includes access to buildings, toilets, sinks, drinking fountains, outdoor play space, and all classroom and therapy areas.

ACCESSIBILITY INFORMATION FOR PARENTS

If you need assistance with alternative formats to print for written materials such as text to voice, peer reader, translations, braille or other preferred methods of delivery or to assist with verbal communication via interpretation to native language, ASL or other modes of communication, please contact Stacey Struck, Early Childhood Specialist, for assistance at 563/336-7800.

PARENT ORIENTATION

Enrollment packets will be reviewed upon return by staff to determine all necessary items are completed. Calendar dates will be reserved for teacher/parent orientation home visits. During orientation this Parent Handbook will be reviewed and parents will be offered a print or electronic copy. The following items will be discussed during orientation in addition to the contents of this handbook: Calendar, Weather Related Closings, Contact Information, Absences, Tardies, Pick Up/Drop Off, Late Pick Up, Snacks and Treats, Liaisons, Communication, and Illness.

Children who are enrolled after the start of the school year will also be offered an orientation meeting with the classroom teacher.

Program tours are available at any time upon parent request.

DISCHARGE PROCEDURE

Discharge may be made for failure to meet health standards (current physical or immunization); failure of parent(s) or guardian(s) to meet financial obligations; or chronic absences, tardies, or late pick-ups.

Students who have Individualized Education Programs are required to be offered a free and appropriate education in the least restrictive environment.

Rate increases are determined by the administration and are effective July 1 of each year.

ATTENDANCE

When a child is enrolled in school, he/she is expected to be in regular attendance for the schedule agreed to by the parents and program administrator. In order for your child to get the full benefit of the programming we offer, your children should be in school at your program's designated start time. Regular attendance is important for the child's development. Enrolled children should attend unless they are ill or on vacation. If a child is to be absent, the parents **must** notify the school; otherwise, the absence will be considered unexcused. Please give at least one symptom of illness when reporting an absence.

A student's enrollment status will be reviewed after 10 unexcused absences, and may result in the student being dropped from services after 15 unexcused absences.

TARDY FOR INSTRUCTIONAL DAY

Your child will be considered tardy at 8:15 a.m., or 15 minutes after the scheduled start time for the program. Please remember, because we are part of the Davenport School system, your child's tardies become part of your child's permanent school record. If a child is to be late, the parents *must* notify the school; otherwise, the absence will be considered unexcused.

Please note that 2 unexcused tardies is equal to 1 unexcused absence.

CURRICULA

IQPPS Criteria 2.7, 2.13, 2.16, 3.3

Curricula supports our philosophy and belief that children learn by being actively engaged in play.

Our curriculum consists of many components including Everyday Mathematics, World of Wonders, Second Step, Phonemic Awareness: The Skills They Need to Help Them Succeed, and Creative Curriculum. Our goal is to engage children's minds by giving them plenty of opportunity to obtain a deeper understanding of the everyday world around them. World of Wonders and Creative Curriculum both include components to address social emotional, literacy, mathematics, science, social studies and address language enrichment strategies.

While in-depth exploration allows children the opportunity to explore what is of interest to them, learning centers provide plenty of opportunity to create, make decisions, work with others, think and reason, problem solve, develop coordination, increase attention span, investigate, explore and foster a love for discovery and learning. Each day the children have ample opportunity to work and play in a variety of interest and learning centers. Extended play allows children to truly become engaged in their work and investigations.

In addition to in-depth explorations and learning centers, we also use circle time to foster skills and build a classroom culture. During circle time children have the opportunity to share important classroom information and happenings, to build a repertoire of common experiences, to solve problems together, to verbalize to the group and to enjoy doing things with others. A daily schedule offers opportunities throughout the day for a varied large and small group activities, movement opportunities, outdoor time and a variety of child and teacher directed activities. Students will have many opportunities to interact with fiction and non-fiction literature throughout the daily schedule and will be read once to twice daily depending on the length of the day.

We'd like you to be involved in supporting your child's learning. You can do this by serving as a resource person, volunteering your time in the classroom, cultivating outside resources for us, or providing materials. Your involvement with your child's education fosters the partnership with the school that is so important to your child's growth and development.

OUTDOOR LEARNING ENVIRONMENTS

IQPPS Criterion 9.5

Outdoor play areas, designed with equipment that is age and developmentally appropriate and that is located in clearly defined spaces with semiprivate areas where children can play alone or with a friend, accommodate variety of motor experiences, activities such as dramatic play, block building, manipulative play, or art activities, and opportunities for exploration of the natural environment, including a variety of natural materials such as nonpoisonous plants, shrubs, and trees.

The outdoor play area should be maintained to prevent injury to children and should be protected with fencing or natural barriers.

HOME VISITS/CONFERENCES

IQPPS Criteria 7.3

Home visits are scheduled prior to the start of the calendar or upon enrollment of a new student. Parent-teacher conferences are scheduled at least two times during the year. Progress reports are shared with you outlining your child's social/emotional well-being and his/her developmental skills. Our teachers also document your child's progress & skills in Teaching Strategies GOLD and you will receive reports for each of the three checkpoint periods. We are currently using a universal screener for literacy Preschool Early Literacy Indicators (PELI) and for math, Individual Growth and Development Indicators (IGDIs) and your child will be screened three times per year. You will be informed of your child's progress toward benchmark goals. Parents are informed of IEP goal updates four times a year. Teachers are happy to meet with parents/guardians anytime the need arises.

GUIDANCE

IQPPS Criteria 1.2, 1.5, 1.6. 1.7, 1.8, 1.9

We positively guide children's behavior by creating a supportive environment that:

- Follows Positive Behavior Interventions and Supports program wide framework and strategies
- Focuses on children's strengths
- Utilizes culturally relevant strategies
- Encourages adults to form positive, authentic relationships with children
- Makes a commitment to supporting children's play
- Offers plenty of opportunity for children to make meaningful choices
- Uses redirection as a guidance technique
- Monitor inappropriate behavior ensuring safety for all is observed. Interventions will be individualized based on function, frequency, duration, and intensity.
- Has a consistent, yet flexible daily routine
- Provides for both active and quiet times
- Uses positive key phrases to guide children's behavior (Conscious Discipline)
- Offers respectful reminders
- Acknowledges each child's individual needs
- Is aware of each child's developmental stage
- Adopts a problem-solving approach to conflict
- Facilitates age appropriate expectations.

The Second Step curriculum we use allows the teachers to help facilitate resolution of conflict by offering guidance that is solution-focused. As the teacher facilitates resolution of conflict, children learn how to respect the needs of others while meeting their own needs. Children also begin to see that there is more than one way to solve a conflict, because the other child's feelings are important, and it is possible to solve conflicts so that both parties are satisfied.

Our teachers help children resolve conflict using the following strategies:

- Use empathy to explore the underlying issues and restate the problem. Empathy is essential; it teaches children to see the other's point of view.
- With the children, facilitate a collaborative solution to the problem and help the children follow through on their solution.
- Praise and encourage future abilities among the children to collaborate on a solution when conflicts arise.

MTSS IQPPS Criteria 1.1, 1.2

A multi-tiered system of support is used to come up with solutions to help children succeed within the educational environment. Teachers may work within collaborative teacher teams, parents, and support staff to find solutions to ensure students are continually successful at their developmental level.

Families will be informed on a regular basis as to their child's success in the classroom. If your child is struggling, we will invite you in to share more about your child and his/her behavior at home. Together we will work to ensure your child's success.

DROP OFF/PICK UP

Parents, guardians, or adults designated by parents must accompany the child to the building entry door where the staff is waiting at the designated arrival time. Please hold your child's hand while waiting for the staff to open the door and allow children to enter. Holding a child's hand at arrival, dismissal, and while in the parking lot is necessary for the child's safety. Despite a child's desire to be independent, a child can never be left alone outside of the building. ***We are mandatory reporters and we will report to the Department of Human services when children 12 years of age or under are in a car unattended.***

If a child's legal guardian (name is listed on the child's birth certificate) may not pick up a child, we must have a copy of legal documents stating that information and signed by a judge. If the adult is not on the approved contact list, we will NOT release your child to them without notifying you first. Your child will be taken to the office while parents/guardians are called for confirmation. You must notify the teacher of your child's class if there is any change to the approved contact list. Should the person not authorized to pick up the child attempt to take the child, the police will be called. (Police cannot take action unless the legal documents are available.)

Families are responsible for providing the school with names, relationships, and telephone numbers of persons authorized to pick up. Please be certain the list is complete, up to date, and only list individuals who are at least 18 years of age. No one under the age of 18 will be allowed to pick up a student. Please make sure that there are at least two people in addition to parents/guardians on the pick-up list. All visitors must sign-in at the office and be prepared to show picture identification before picking up a child.

We will not release a child to an intoxicated person, and will contact the police.

PARENT ACCESS

Parents/legal guardians may request access to their own child in the child care setting, as long as they are not prohibited from contact by court order. Parents need to remain observable while in the child's classroom, and may not be alone with any child other than their own child. Please contact the classroom teacher to discuss the reasons for this request.

Policies

Health Services Policies

IQQPS Criteria 5.2

The Davenport Schools' health offices are closely involved with your children when they are enrolled in this program. All DCSD buildings are staffed with properly trained health professionals. All staff are current in their Mandatory Reporting. At least one staff member, always present in the classroom, is current with pediatric First Aid/ CPR/AED certification. All Health Office staff are current with Medication Administration certifications.

ILLNESS

The Statewide voluntary preschool programs provide programming for healthy children. If your child becomes ill during the day, you will be contacted. We ask that you pick up your child **within an hour of being contacted.**

Temporary exclusions are designed to prevent the spread of disease and enable children to obtain the care and attention they need. The guidelines define three conditions for exclusions:

1. Inability of the child to participate in program activities.
2. Caregiver inability to provide care for the child without compromise of care for other children in the group.
3. Specific symptoms and diseases that warrant temporary exclusion from childcare.

We ask you to pick up your child **AND** we request that you keep your child at home if he/she exhibits any of the following symptoms:

- Fever – 100.4 degrees - No rectal temps will be done.
- Vomiting
- Diarrhea – Diarrhea is the sudden increase in the frequency and looseness of bowel movements (BMs). Watery, loose and unformed stools that cannot be contained in diapers or stools that prevent an older child from getting to the toilet in a timely manner present the possibility of a health risk to others in the daycare. For this reason, children with stools like those described above will be excluded from school.
- Red, inflamed or draining eyes or ears
- Evidence of scabies, ringworm, or other parasitic infections
- Redness of the throat
- Unidentified skin eruptions
- Difficult or rapid breathing, wheezing, or uncontrolled coughing
- Unusual tiredness, paleness, or irritability
- Evidence of a possible communicable disease
- A child’s inability to comfortably participate in center activities
- Mouth sores with drooling, unless a health care provider has determined that the child is noninfectious

Please report any contagious diseases immediately to the school nurse, teacher or program administrator. A written note from a doctor stating your child is free of disease must be obtained if your child has had a contagious disease. All families will be contacted when a contagious disease is circulating among the children.

If the person who is responsible for transporting your child to and from school has a contagious disease, please make arrangements for someone else to transport. If another person is not available, please let the office know and we will go get the child from the classroom to keep from spreading contagious diseases at the Statewide voluntary preschool programs.

If your child has had surgery, we require a written doctor’s note stating your child is ready to participate in our program before they can return.

THE FOLLOWING GUIDELINES ARE ENFORCED FOR THESE CONTAGIOUS DISEASES:

- **Chicken Pox:** Your child will be allowed to return to school after all Chicken Pox is crusted over (5 to 7 days).
- **Conjunctivitis (pink eye):** Your child will be allowed to return unless recommended otherwise by a physician.
- **German Measles (Rubella):** Your child may return to school seven days after the rash begins.
- **Giardia, Salmonella, Shigella, and Campylobacter:** Your child will be allowed to return to school when there is documentation of two negative stool cultures after treatment.
- **Hand Foot and Mouth:** Your child may return to school when he/she has been fever free for 24 hours, the blisters have all dried and no longer have excessive drooling.

- **Hepatitis A:** Your child may return to school one week after the illness has started and he/she is fever free for 24 hours.
- **Herpes Simplex Infections:** Your child may return to school with approval of child's doctor.
- **Hib Disease (Haemophilus influenza):** Your child may return to school when he/she has completed a course of an antibiotic as directed by your doctor. Your child may return with a doctor's note.
- **Impetigo:** Your child may return 24 hours after an antibiotic has begun and lesions are covered.
- **Measles (Rubella):** Your child may return to school four days after the appearance of the rash.
- **Meningococcal Disease (Neisseria meningitidis):** Your child may return when he/she has completed a course of an antibiotic as directed by your doctor. Your child may return with a doctor's note.
- **MRSA:** Your child may return with a doctor's note when the wound is covered and no longer draining.
- **Respiratory Illness (unspecified):** Your child may return when she/he is fever free for 24 hours and is able to participate comfortably in program activities.
- **RSV:** Also see Respiratory Illness above. Your child may return with a doctor's note.
- **Mumps:** Your child may return nine days after the swelling appears.
- **Pinworms:** Your child may return the day after treatment begins as prescribed by your child's doctor.
- **Ringworm:** Your child may return 24 hours after treatment begins as prescribed and lesions are covered.
- **Roseola:** Your child may return when he/she is rash and fever free.
- **Rotavirus:** All symptoms must be gone for 24 hours before your child may return to school.
- **Scabies:** Your child may return the day after treatment begins as prescribed by your child's doctor.
- **Shingles:** Your child may return when all sores are crusted.
- **Strep Throat/Scarlet Fever:** Your child must be on an antibiotic 24 hours and be free of a fever for 24 hours without medication before returning.
- **Tuberculosis:** A child diagnosed with active TB disease must be excluded. Children with TB disease may return after they have begun treatment and their doctor states they are not contagious.
- **Head Injury:** If a child receives a head injury during the school day, the parent will be informed. At the discretion of the school nurse or supervisor in charge, the parent may be asked to take the child home for observation.

Children may not attend school if they have had a fever, diarrhea or vomiting within the last 24 hours and must not return until they are free of the above symptoms for 24 hours.

However, if the fever, vomiting, or diarrhea occurs during the school day, the child must be out the remainder of that day and the following day.

Our policy is, if your child is well enough to attend childcare, your child is also well enough to play outside. Exceptions may be made when written instructions from a physician indicate otherwise or when staff can reasonably accommodate the parent's request to stay inside.

MEDICATION IQPPS Criteria 5.4, 5.8

Over the Counter Medications

Over-the-counter medications include, but are not limited to the following:

- Body and hand lotions
- Diaper creams (A&D, Desitin)
- Lip balm
- All types of lotions
- Oral medication preparations
- Ointments
- Sunscreen
- Topical preparations
- Vaseline

All medications must be in the original container labeled with the child's name. The expiration date must be checked and current. **Children will not be allowed to transport medication, including over the counter medication.** Parents / Guardians must hand deliver them to the nurse.

An Over the Counter Products Administration Authorization and Permission form must be completed by the parent/guardian for each product brought to school. This form can be obtained from the school office. This form must be filled out completely, including the name of the medication, the dosage amount, the frequency and duration for when the medication is to be given/used. If a doctor prescribed the medication, a copy of that documentation must be provided to the school. No over the counter medication will be administered more frequently than is indicated on the product instructions.

We ask that you apply sunscreen prior to bringing your child to school and it will be reapplied in the afternoon with written parent permission and parent supplied sunscreen with an expiration date.

Prescription Medications

All prescription medications must meet the following conditions:

- Medication must be currently prescribed by a physician and be in the original container from the pharmacy. It must have the original pharmacy label with the child's name, date the prescription was filled, the prescription number, the name of the medication and instructions for administration including dosage, route, time, duration and frequency. Staff will record the administration of the medication.

- **The district's Medication Administration form must be signed by the prescribing physician and the parent or guardian.**
- All medication is stored in a locked container.

If a doctor prescribes an antibiotic for anything other than Otitis Media (ear infection), we ask that you keep your child home for 24 hours before returning to school. This time period and medication will help to keep all of our children healthy. A child may only return to school when he/she has been fever free for 24 hours. Tylenol or another aspirin substitutes may mask a fever and we will not administer it with an antibiotic.

Parents are not allowed to come to school and administer any type of medication, prescription or over the counter, without having medication administration paperwork on file. We cannot be responsible in the event that your child might have an adverse reaction to a medication.

*Due to DHS regulations, the Davenport School's statewide voluntary preschool programs do not have a stock EpiPen available. If your student requires an EpiPen you must provide it to the school.

SPECIAL DIETARY REQUIREMENTS

If at any time your child requires a diet different from what we serve, we must have written documentation of this need from your child's Physician. This requires the form entitled Diet Modification Request Form to be completed and returned to the school nurse. The diet restriction must be due to a medical reason and not a family/personal preference. Sites will provide a meal specified by your physician; the meal must meet USDA nutritional requirements.

ACCIDENTS AND EMERGENCIES

We will make every effort to ensure the safety of all children. In the event of any emergency or accident, a parent/guardian will be contacted immediately. When parent/guardian is NOT available, the child's physician or dentist will be called. Please update **emergency contact information** as soon as the information changes. When evacuation of the building is necessary due to fire, power/heat/cooling failure, structural/water or health hazards, all children and staff will go to designated areas. During tornado or severe weather warnings, children and staff will be gathered in the area designated. Each location has a crisis management plan in the office for your review.

INJURY REPORTS

Parents shall be notified on the day of the incident involving a child that includes:

- Minor injuries.
- Minor changes in health status.
- Incidents resulting in injury to a child.

Shall be verbally notified immediately when there is:

- A serious injury to a child.
- An incident resulting in significant change in health status.

A written report, fully documenting every injury, shall be provided to the parent or authorized person. This should be completed by staff that witnessed the injury and retained in child file.

Guardian Angel/JFK Behavior Management Plan

A Behavior Management Plan is a process of teaching, guiding, and nurturing students to assist them accepting responsibility for their behavior and actions. The Guardian Angel Preschool uses positive methods of behavior management, which encourages self-direction, self-esteem, socialization and cooperation. These include redirection, reinforcement, setting fair as well as age appropriate limits, letting students experience consequences of their behavior, offering choices, positive role-modeling and instructing students on how to demonstrate their feelings appropriately. Removing a student from situation to take a break may occur as the result of behavior management. Taking a break or time away from classmates is used when all other interventions have been tried and proved to be ineffective. Time away may also be used in situations where the child causes physical harm to themselves, classmates or staff. Classroom rules are age appropriate, clearly displayed in the classroom and are enforced with all students. No corporal punishment is allowed at any time. Withholding snack as a measure of discipline is not an acceptable practice for preschool staff. Notes, emails, daily notebook/behavior plan or phone calls may be utilized to communicate with parents about their child's behavior.

Guardian Angel/JFK Dismissal/Suspension Policy

Dismissal or suspension from the program may occur with the following situations:

- If a child is consistently exhibiting disruptive or dangerous behaviors toward themselves, classmates or staff members.
- If the student does not seem ready for preschool setting.
- The family fails to support the classroom policies.
- Tuition payments, for those families required to pay tuition, are consistently unpaid.

Upon suggestion or question of discharge or suspension, the parents will be invited for a parent-teacher-administrator conference to discuss the situation. A written summary will be made by the teacher and signed by the parent/guardian and staff present. A copy of this summary will be given to the parents. A mutually agreed upon follow-up meeting will be arranged subsequent to the first meeting. We will work with families to determine the most appropriate arrangements. In some cases, dismissal or suspension from preschool may be considered the most appropriate arrangement for the student. If at any time the parent does not feel the program is meeting the needs of the child, they are encouraged to contact the teacher/director for a conference.

Suspensions and/or dismissals (expulsions) from preschool will be reported to the DCSD.

BITING

Even in the best child care center, periodic outbreaks of biting occur among preschoolers. This is an unavoidable consequence of grouping young children together. When it happens, it can be scary and very frustrating for children, parents and teachers. Understanding the reason for biting is the first step to changing a child's behavior. Children bite for a variety of reasons: teething, simple sensory exploration, cause and effect, imitation, crowding, seeking attention, frustration and stress. Childcare group situations are difficult: dealing with others constantly around,

sharing attention and toys, and too much or too little stimulation are all very difficult for children. Biting is not something to blame on children, their parents or their teachers. When biting breaks out, a high quality childcare program immediately takes action, not to blame the biters but to change the environment and help children change their behavior.

It is important that the caregivers remain calm and in control of their emotions when biting occurs. Staff should not show anger or frustration towards the child. The caregiver should calmly respond to the child, letting them know that biting is not ok. In addition the following steps will be taken.

1. The teacher will remove the child from the situation and focus caring attention on the child who was bitten.
2. Encourage the biter to help take care of the child that was bitten (hold ice pack, comfort the child).
3. The care giver should talk to the child who bit (if able to communicate) and talk about different strategies that the child can use next time (give them appropriate words-if able) instead of biting. This should be done in a short simple way.

It is important to explore the reasons for biting when it occurs. Staff needs to work with parents to gather information about the child's behavior and begin observations to determine the reasons for biting. Examples of some triggers would be: communication deficits, transitions, hunger, lack of sleep, need for oral stimulation or teething pain. Once triggers are identified, staff can work on prevention strategies and start teaching replacement skills. Below are some examples of how the teacher will begin this assessment.

1. The teacher will examine the context in which the biting is occurring and look for patterns. The teacher will document and ask the following questions:
 - Was the space too crowded?
 - Were there too few toys?
 - Was there too little to do or too much waiting?
 - Was the child who bit getting the attention and care he/she deserved at other times, other than when he/she was biting?
1. The teacher will change the environment, routines or activities if necessary
2. The teacher will work with the child who is biting to resolve conflicts and frustrations in more appropriate manners, including using words, if they are capable of them.
3. The teacher will observe the child, to get an idea of why and when they are likely to bite.
4. The teacher will identify children likely to be bitten and make special efforts to reduce their chance of being bitten.
5. The teacher, parent and administration will meet regularly to regulate an action plan and to measure the outcome of these changes.
6. If biting continues the teacher will observe the group more closely and work with the parents to seek out additional resources as necessary to shadow the child who is biting.

First Aid in response to biting (both child and adult)

1. Wear gloves, clean wound with soap and water. Run water over wound for 5 minutes.
2. Apply ice or cool compress to help reduce the pain or swelling.
3. Bandage the wound as necessary.

4. Write a detailed incident report for both children involved with the incident.

First Aid if bite breaks the skin. (both child and adult)

1. Wear gloves, clean wound with soap and water. Run water over the wound for 5 minutes.
2. Control the bleeding.
3. Cover the wound with sterile dressing and bandage.
4. Contact the parents of BOTH children involved and encourage them to contact their healthcare provider to determine if they need to be seen.
5. Write a detailed incident report for both children involved with the incident.

When children bite, their parents are informed personally and privately the same day. All information is confidential and names of the children involved in the incident are not shared between parents. In addition, biting is always documented on our standard incident form which is completed and signed by teacher, parents and an administrator is notified. One copy is given to the parent and one copy is kept in a locked file cabinet in the office.

When biting occurs, here's what you can expect from us:

- We will put the child's safety first and provide first aid as well as comfort, support and advice to any child who is bitten.
- We will provide appropriate programming for children to help prevent biting.
- We will make current information and resources on biting available to you.
- We will provide teachers with adequate knowledge and training to deal properly and effectively with biting.
- We will take your concerns seriously and treat them with understanding and respect.
- We will tell you what specific steps we are taking to address biting and explain the reasoning behind those steps.
- We will respond to your questions, concerns and suggestions—even when our response to some suggestions is no.
- We will work to schedule conferences about biting with you, at a time you can attend.
- We will keep your child's identity confidential if he or she bites. This helps avoid labeling or confrontations that may prolong the behavior.

We wish we could guarantee that biting will never happen in our program, but we know there is no such guarantee. You can count on us to deal appropriately with biting so it will end as quickly as possible. We want the best for all the children in our program. If you want more information on biting or have questions or concerns, please let us know—we are here to help you and your child on their journey to independence!

HEALTH EXAMINATIONS/IMMUNIZATIONS

IQPPS Criteria 5.1

Physical Examination

For each child five years of age and younger not enrolled in kindergarten, Davenport schools require a physical examination report, submitted within 30 days from the date of admission, signed by a licensed medical doctor, doctor of osteopathy, physician's assistant or advanced registered nurse practitioner. The date of the physical examination shall be no more than 12

months before the first day of attendance. The written report shall include past health history, status of present health including allergies, medications, and acute or chronic conditions, and recommendations for continued care when necessary. ***It is your responsibility to update health examinations every year and immunizations as they are required and administered. Please submit in writing all immunization updates including the name and date of the immunization received.*** This information must be brought to school, mailed or faxed from your physician's office to the school nurse.

Immunization Requirements

Prior to starting childcare/preschool, students must present an approved Iowa Certificate of Immunization signed by a health care provider stating the student has received the immunizations required by law. Only for specific medical or religious purposes are students exempted from the immunization requirements. Parents who have questions should contact the school nurse. Iowa law requires evidence of immunization before any student can be enrolled in the Davenport Schools. A certificate of immunization must be on file at school before attending. The certificate may be obtained from the doctor's office or the school nurse. Students with immunizations partially completed will be issued a provisional certificate allowing an additional 60 days to complete the remaining immunizations. If an updated certificate of immunization is not provided at the end of the 60-day period the student will no longer be allowed to attend school.

4-5 MONTHS

- One dose DPT
- One dose Polio
- One dose Hib
- One dose Pneumococcal

6-11 MONTHS

- 2 doses DPT
- 2 doses Polio
- 2 doses Hib
- 2 doses Pneumococcal

12-18 MONTHS

- 3 doses DPT
- 2 doses Polio
- 2 doses Hib or 1 dose if received at or greater than 15 months of age
- 3 doses Pneumococcal if received 1 or 2 doses at less than 12 months of age; or 2 doses if has not received any previous doses; or received 1 dose at or greater than 12 months of age

19-23 MONTHS

- 4 doses DPT
- 3 doses Polio
- 3 doses Hib with the final dose in the series at or greater than 12 months of age, or 1 dose received at or greater than 15 months of age
- 1 dose of MMR at or greater than 12 months
- 1 dose varicella at or greater than 12 months of age if born on or after 9/15/97, or a reliable history of the natural disease

- 4 doses Pneumococcal if received 3 doses at less than 12 months of age; 3 doses if received 1 or 2 doses before 12 months of age; 2 doses if child has not has received any doses or has received 1 dose on or at 12 months of age

24 months and older

- same as 19-23 months except Pneumococcal.
- 4 doses Pneumococcal if received 3 doses at less than 12 months of age; or 3 doses if received 2 doses before 24 months of age; or 2 doses if child received 1 dose before 24 months of age or received 1 dose between 12 and 23 months of age; or 1 dose if no doses had been received prior to 24 months of age.

HYGIENE

IQPPS Criteria 5.5, 5.6, 2.27

Hand Washing

At arrival each day, your child will wash his/her hands with warm water and soap. All children have their hands washed after diapering or after each use of the bathroom. Their hands are also washed before and after each snack and meal and before/after using a group material such as water table or play dough.

Adults also wash their hands:

- before and after feeding a child
- before and after administering medication
- after assisting a child with toileting
- after handling garbage or cleaning.

Proper hand-washing procedures are followed by adults and children. When handling blood or body fluids that might contain blood (when wearing gloves is required), wearing gloves is an optional supplement, but not a substitute for, hand washing in any required hand-washing situation listed above. Staff wear gloves when contamination with blood may occur.

Staff do not use hand-washing sinks for bathing children or removing smeared fecal material. 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.

Hand hygiene with an alcohol-based sanitizer with 60% to 95% alcohol is an alternative to traditional hand-washing with soap and water when visible soiling is not present.

Diapering

Children are not required to be completely toilet trained in order to enroll in the Davenport's SWVP programs. For children who are unable to use the toilet consistently, the program makes sure that:

For children who require cloth diapers, the diaper has an absorbent inner lining completely contained within an outer covering made of waterproof material that prevents the escape of feces and urine. Both the diaper and the outer covering are changed as a unit.

Staff change children's diapers or soiled underwear in the designated changing areas and not elsewhere in the facility

Staff change children's diapers or soiled underwear in the designated changing areas and not elsewhere in the facility. Diapering stations or changing tables should have a nonabsorbent surface that may be covered with a disposable paper sheet. The surface should be cleaned after each use with a non-irritating disinfecting agent, and any paper covering disposed of in the diaper receptacle. Diapering stations should never be used for food preparation areas or to hold food or food service items.

All diaper changing materials should be kept within arms reach of the table, so that staff never leave a child unattended. A lined and covered diaper receptacle with a foot pedal will be kept beside the changing table, so staff do not have to walk with a soiled diaper.

Wet or soiled clothing is changed immediately upon aware. At the request of the Scott County Health Department, we do not rinse or wash soiled clothing or cloth diapers. Any formed fecal matter will be put into the toilet. Clothing soiled by feces or urine will be tied in a plastic bag marked with your child's name and placed in a separate container and sent home at the end of the day. Staff check children for signs that diapers or pull-ups are wet or contain feces at least every two hours when children are awake, when children awaken from rest time.

Please keep an extra set of season-appropriate clothing in your child's backpack at all times.

This should include socks and underclothing. In the event that the clothing are used at school, parents need to replace these extra items immediately so there is always a full set in the backpack.

Fingernails

Fingernails **must** be trimmed at home.

Oral Health

In the event of a dental emergency, appropriate first aid will be administered and parents will be contacted.

HEAD LICE

- Children shall not be excluded immediately or sent home early from child care because of head lice. Parents of affected children shall be notified and informed that their child must be treated properly before returning to the child care facility the next day.
- Children and staff who have been in close contact with an affected child shall be examined and treated if infested. Infestation shall be identified by the presence of adult lice or nits(eggs) on a hair shaft 3 or 4 mm from the scalp.
- Rationale: Head lice infestation in children attending child care is common in the US and is not a sign of poor hygiene. Head lice are not a health hazard because they are not responsible for spread of any disease.

INSURANCE

Parents can apply for low-cost or no-cost health insurance for their children through the state's Healthy and Well Kids in Iowa (Hawk-I) program. Children birth to 19, who meet certain criteria, are eligible. The coverage includes doctor's visits, hearing services, dental care, prescriptions, immunizations, physical therapy, vision care, speech therapy and hospital services to name a few. Parents are urged to call 1-800-257-8563 (toll-free) or go to the web site at <https://dhs.iowa.gov/hawki> for more information.

General Policies

CONTACT INFORMATION

It is necessary that you keep us informed of new addresses, phone numbers, and changes of employment. We need this information in case there is an emergency.

CONFIDENTIALITY

IQPPS Criteria 10.8

Confidentiality is a top priority for the Davenport School's preschool programs. Personal information of families and staff will not be shared for any reason without prior written consent of the individual. When discussing a child's activities and friends in the classroom, only first names will be used. In situations regarding Incident/Accident Reports, names of children involved will never be given to families.

Health information collected from families is maintained in one central location within the facility. The files are kept current by updating as needed, but at least quarterly. The content of the file is confidential, but is immediately available to

- a. administrators or teaching staff who have consent from a parent or legal guardian for access to records
- b. the child's parents or legal guardian
- c. regulatory authorities, upon request.

MANDATORY REPORTERS

IQPPS Criteria 6.1, 10.6

All staff members are mandatory reporters of child abuse. If a staff members suspects child abuse they MUST report their suspicion to the Department of Human Services.

NAP TIME

Preschoolers attending full day will be offered a rest period during the core day. Children are assigned individual cots, which are labeled with children's names. Sheets are changed and laundered as needed, or once per week. If your child is accustomed to sleeping with a small stuffed animal, he/she may bring it to school and store it in his/her cubby until rest time. All children are encouraged to try to sleep, if a child is unable to fall asleep a quiet replacement activity will be provided.

TRANSPORTATION IQPPS Criterion 10.9

Transportation is provided for those children that qualify for specialized transportation during a team meeting for their Individual Education Plan (IEP). River Bend Transit currently provides this transportation. Car seats or harnesses are used for each child. Parents are responsible for walking their child to and from the bus, and securing them in their seat.

Parents are responsible for canceling bus service on days when their child will not be attending. Call the bus service directly, River Bend Transit (563-386-7484) The school office must also be notified when your child will not be using bus transportation.

DRESS CODE

Children are taken outdoors daily (weather permitting, 20 degrees or warmer) and should be dressed accordingly: light jacket, cap, boots for damp days in fall and spring; heavy winter jacket, mittens, scarf, hat, snow pants and snow boots in winter.

Children should wear clothing that is comfortable, washable, and suitable for all activities, including sitting on the floor and outdoor play.

An extra set of clothes, marked with your child's name, shall be kept at school at all times. If wet or dirty clothes are sent home, please return a clean, extra set of clothes the next day.

EQUAL EDUCATIONAL OPPORTUNITY

In keeping with the American's with Disability Act (ADA), we will make reasonable accommodations to meet all children's needs regardless of ability. We provide referrals to the Area Education Agency (AEA) for further evaluation to determine needs for special services.

INTOXICATED PARENTS

In the event that a parent or other authorized person arrives at the center or bus while intoxicated or in an impaired condition, staff will use their best judgment in determining if he is in a condition which may prevent him from assuring the child's welfare.

Should it be determined that the person is in a condition that prevents him from assuring the child's welfare, staff will:

- a. Assist with alternative arrangements for child pick-up, including, attempting to contact another person on the Authorized Child Pick-up List.
- b. Notify the police if required including giving vehicle description and license plate number.

SMOKE FREE SCHOOLS

Cigarettes and smokeless tobacco products are prohibited on Davenport School's premises, including parking lots and outdoor play areas. Smoking and the use of smokeless tobacco products is also prohibited in vehicles being used for the transportation of children, and while on field trips.

CELL PHONES

Children miss their parents when they are away. At the end of the day a child wants nothing more than to have the full attention of their parents. In addition, drop off/pick up is the best time of day for staff to communicate with parents. Therefore, we ask that parents refrain from using their cell phones at pick-up and drop-off times and while in the school building.

Staff Policies

IQPPS Criteria 6.2, 6.3, 10.2, 10.14

Teachers and Para Educators

Statewide voluntary preschool programs are staffed with certified teachers. All Teachers for the four-year old classrooms have a minimum of a Bachelor's Degree in Early Childhood Education and are licensed by the Iowa Board of Educational Examiners. Teacher Associates in all four year old classrooms have a minimum of a Child Development Associate Credential (CDA) or an Associate's Degree or are enrolled in a program leading to a CDA or equivalent.

The program administrator has the educational qualifications and personal commitment required to serve as the program's operational and pedagogical leader.

All staff are evaluated at least annually by an appropriate supervisor or, in the case of the program administrator, by the governing body.

All teachers and teacher associates are certified in Infant/Adult First Aid, CPR and AED and have received at least two hours of training in both child-abuse prevention and universal health

precautions. Staff members also receive training annually for emergency evacuation procedures, and training on developmentally appropriate practices.

CLASSROOM RATIOS

All statewide voluntary preschool programs, we maintain the following staff-to-child ratios at all times in our classrooms: 4 and 5 years: 1 staff for every 10 children.

FAMILY INVOLVEMENT

IQPPS Criteria 7.2

Participation by families is a major element of our program, as parents are the first and primary teachers of their children. Opportunities for families to participate will be provided. Consistency is essential for the success of the children, therefore duration and frequency of the visit will be mutually agreed upon by the teacher, family member and administration. Family involvement activities will be incorporated into the calendar at the Davenport School's preschool programs. All families are encouraged to:

- Volunteer in the child's classroom*
- Attend family nights
- Volunteer to assist on walking trips*
- Share ideas for curriculum & projects
- Share hobbies or job experiences
- Participate in social events

* *Please obtain Volunteer Application from front office (Davenport sites)*

Parents/guardians are welcome to visit school anytime during our operating hours. We ask that you keep the child's best interest in mind as a means to guide your visits. If a child has a difficult time saying good-bye it may not be a good idea to have more than one separation in a day. When you do visit, we ask that you restrict your activities with your child and be considerate as to what the teaching staff is in the process of accomplishing.

STAFF/FAMILY COMMUNICATION

Parents/guardians and teachers have the opportunity to exchange information regarding the children through daily notes, along with during arrival and departure. This is important in providing continuity between the child's home and school. The staff is pleased to answer any questions, or help with any problems parents/guardians may have regarding their children. If there is not enough time for this type of exchange during the arrival/departure times, a time for more in-depth discussion can be arranged with the classroom teacher. **The staff welcomes all suggestions for improvement of any part of our program.** Telephone messages can be received throughout the day.

Parents will receive a weekly or monthly newsletter on a regular basis informing them of upcoming events and other pertinent information. Please check for notes from teachers each day.

Emergency Crisis Procedures are available in a separate handbook and available to parents upon request and can be viewed in building main offices.