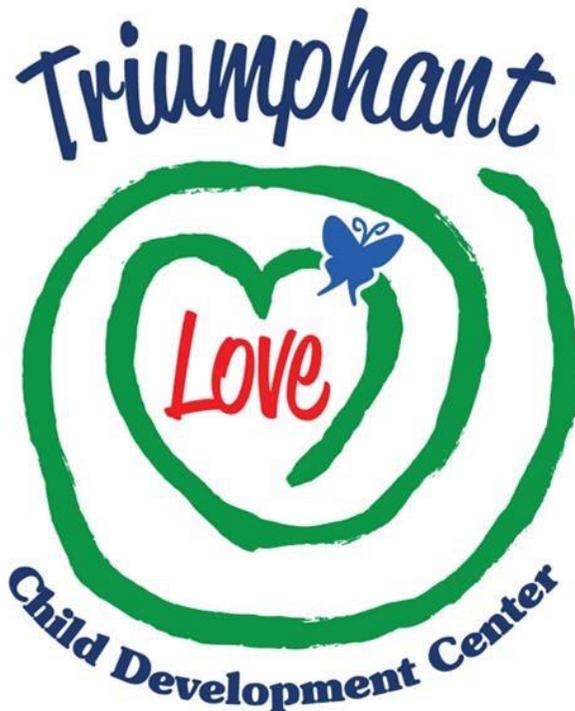


A Note to Parents

**TRIUMPHANT LOVE LUTHERAN
CHURCH
CHILD DEVELOPMENT CENTER
Parent Handbook Operational Policies
Updated Summer 2015 for the
2015-2016 School Year**



The Child Development Center is an early childhood program for your child that is accredited by the Evangelical Lutheran Education Association (ELEA) and Texas Rising Star.

ELEA accreditation is an honor the CDC received by the Evangelical Lutheran Education Association as an outstanding Early Childhood program meeting a rigorous appeal process.

as Rising Star is a designation that assesses the school is a quality program with standards in such areas as staff qualifications, classroom group size, teacher-child interaction, and health and safety.

**9508 Great Hills Trail
Austin, Texas 78759
(512) 346-1323
Website tlc.org
Facebook: Triumphant Love Lutheran
Child Development Center**

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I. Mission Statement

To provide a quality early childhood program for children and families in the community that celebrates and shares God's grace.

A. Anti-bias Policy

At the Child Development Center (CDC), we understand that preschool children will begin to figure out how they are alike and different from other people, and gradually they will develop an attitude about how they feel about differences. One of our goals is to help children develop a positive self-image and respect diversity. Therefore, the staff at the CDC take steps to help children learn to value all people thereby helping them to resist bias and prejudice and become more adaptable adults.

B. Spiritual Foundation

Along with providing a Christian environment in which the children can learn and grow, all children and families have the opportunity to attend weekly chapel. Prayers are said in all classes before lunch and after injuries. Our spiritual goal for the children is that they will feel the love of God through their positive experiences at the CDC. We believe that spiritual foundations are being built the minute a child enters the CDC.

C. Our Philosophy

The CDC is a ministry of Triumphant Love Lutheran Church (TLLC). The purpose of the center is to provide a Christian environment rich in opportunities for learning and is designed to encourage the spiritual, physical, emotional, social, and cognitive growth of young children. We recognize that each child is a unique gift from God with special needs and interests. All children regardless of sex, race, or religion should have the opportunity to play with a variety of materials, express their feelings and emotions, and know they are and can become individuals capable of many things.

The field of early childhood education is a profession of which to be proud. We are helping to shape, guide, and teach the next generation. A professional early childhood educator is someone who:

- Is a positive influence and role model.
- Understands that all children develop and learn differently and supports each child's individuality.
- Works effectively with parents and other staff members.
- Is a problem solver.
- Is open to new ideas and ways of thinking.
- Is committed to performing at the high standards of the Evangelical Lutheran Education Association (ELEA) and Texas Rising Star (TRS).
- Is consistent without allowing personal matters to affect his/her work.
- Is involved in training and school activities that will enhance professional growth.

"An untrained teacher is likely to focus attention on what is happening. Trained teachers focus on what is being learned." (Katz, 1984)

II. Parent Involvement

A partnership between a child's home and school is essential to create a positive learning experience. There are many opportunities, and it is important that each family participate equally to help support the needs of their child's classroom.

Please let us know what is happening at home or if any major changes have taken place within your family so we can better plan for the needs of your child. We value your input and encourage you to share any ideas or concerns that arise. Please be assured that all conversations will remain confidential.

We invite all parents to visit, observe their child, and participate anytime during our operational hours, Monday through Friday 9:30am - 1:30pm.

In the spring a survey will be conducted for all parents/guardians regarding the CDC teachers, staff and program. Parent/Guardian participation is expected.

A. Parent Volunteerism

As the CDC is a nonprofit organization we require volunteerism from parents every year. The school requires that each family volunteer four hours for each child enrolled each school year. There are many opportunities and ways to volunteer to support your child's school, such as workdays, fundraising events, seasonal events, Parent Partner, CDC Board member, or as the needs arise. Please be sure to complete the [Criminal History Form](#) as applicable.

Please note that your four volunteer hours need to be completed or scheduled prior to Spring Break. There is a volunteer sign-in book located on the credenza across from the director's office. Be sure to sign in after each volunteer opportunity to account for your volunteer hours.

Should you elect to not volunteer or do not volunteer prior to Spring Break, there is a \$75 per child, per year fee. This fee will be used to offset the expense of hiring substitutes as well as to pay for services that we typically use volunteers for.

It is very important that each CDC staff and volunteer respect each child and family's right to privacy and confidentiality. Do not discuss a child or parent with another child or parent.

Volunteer's Role in Guidance:

- Understand what behavior can be expected at each child's level of development.
- Accept each child at his/her present level of development.
- Remember that all behavior has a cause. Try to find out what the child is really telling you through his/her behavior.
- Avoid labeling a child as a behavior problem.
- Try to see the problem from the child's point of view and really listen to what he/she is saying both verbally and non-verbally.
- Help children solve their problems in constructive ways that give them a guide to meet similar problems in the future.
- Allow children to solve their own problems in their own ways whenever possible.
- Recognize that sometimes you need to give the words which describe the feelings of a child to him/her and to the group.
- Let the children know that you understand and accept the way they feel but that you cannot allow unacceptable behavior.
- Help children express their feelings in acceptable ways.
- Praise the kinds of behaviors you want to continue.
- Establish reasonable limits and make sure the children understand them. Be consistent.
- Speak to each child individually rather than to the group. Go to the child. Establish eye contact and speak directly to him/her rather than calling from across the room. Be brief in your explanation.
- Reassure children that you will not let them hurt others and that you will not let others hurt them.

- Rely more on re-direction and suggestion rather than the use of “don’t” or “no.”
- Give children a choice of two courses of action whenever possible. Be sure either choice is acceptable.
- Warn children before an activity is to end and give them time to finish what they are doing.
- Provide an environment the children can manage.
- Be a positive role model for the children.

B. Parent Partners

Parent partners are essential to the success of school events. Parent partners assist teachers by ensuring that all parents have the information needed pertaining to upcoming events and they assist the lead parent partner in getting parental involvement. The lead parent partner will communicate all necessary information to the parent partners who are then in turn responsible for communicating to their respective classes.

Any time spent on parent partner activities goes towards your volunteer hours. Two parents from each classroom are recruited yearly to serve as parent partners. Their responsibility is to be available to assist the classroom with any special activities planned by the teachers or the CDC including, but not limited to, the following:

- Assist the teachers in coordinating classroom events.
- Assist the teachers in communicating information to all the parents.
- Assist in planning the Thanksgiving luncheon.
- Assist in the end-of-year picnic and fundraiser.
- Coordinate teacher birthday celebrations.
- Attend parent partner meetings.
- Assist in other CDC activities as requested by CDC director and/or Parent Partner Chair.
- Help maintain a positive school environment for all the families and staff at the CDC

The parent partners group will meet with the director regularly throughout the school year.

III. POLICIES AND PROCEDURES

A. Registration Policies and Procedures

Registration for fall will be held early in the spring semester for currently enrolled families. All current school year tuition/fees are expected to be up to date prior to registration. The \$175 Enrollment Fee will be paid within 24 hrs of on-line registration to secure your enrollment. Failure to pay voids original time stamp. Enrolling families will receive a confirmation letter within seven working days, verifying their child’s schedule.

Enrollment prioritization is as follows:

1. TLLC Staff
2. Returning Child(ren), with priority given in this order:
 - a. TLLC Members, with returning siblings
 - b. TLLC Members, single child enrollment
 - c. Non-TLLC Members, with returning siblings
 - d. Non-TLLC Members, single child enrollment
3. New Siblings of Returning Child(ren), with priority given in this order:
 - a. TLLC Members

- b. Non-TLLC Members
- 4. New CDC Families and/or Child(ren), with priority given in this order:
 - a. TLLC Members
 - b. Non-TLLC Members

Enrollment applications will be time stamped to prioritize within the various categories noted above.

B. Registration Fees

School Year:

At registration we will collect the registration fees with the completed Registration Form. These fees are not refundable. In May of that same year (or upon enrollment), a full month's tuition/deposit will be required in order to confirm your child's enrollment. The May tuition deposit will be credited to your child's last month in the school year. This fee is not refundable but will be used for the last month's tuition payment with one-month's written notice.

Summer Camps:

Summer camp registration fees will be collected in the spring with a completed Registration Form(s). Registration fees and paid tuition are not refundable.

C. Wait List

In order to better meet the needs of all children, the number of children in each class is limited. Once a class is filled, names are put on a wait list for the school year. Preference on the wait list is given to TLLC staff, siblings of currently enrolled children, church members, and then the community. A non-refundable \$30 fee is charged to be on the wait list per year.

D. Tuition/Fees

TLLC-CDC is a part-day program. We run from September to May, from 9:30 am to 1:30pm Monday through Friday. Tuition is due on the first school day of each month and no later than the 10th. Should there be a problem with payment, please notify the director. A \$10 late fee will be charged if paid after the 10th, \$15 after the 15th, \$20 after the 20th, and \$25 after the 25th. The school reserves the right to release a child from the school for delinquent or insufficient payment of tuition.

Only checks or Electronic Transfer payments will be accepted. All checks should be made out to "TLLC-CDC." A \$25 fee will be charged to you for any insufficient funds. Online payment options are available at tllc.org under the "Pre-school" tab. You can designate the number of withdrawals as well as the frequency (one or two times a month).

Monthly tuition and deposit, enrollment fees, and wait-list fees are based on the school calendar year (nine months). There are no refunds or prorated months of tuition for holidays, vacations, illness, dismissal, withdrawals, or other circumstances.

The CDC requires a one-month written notice be given to the CDC Director prior to withdrawal. The tuition/deposit can be credited to the last month the child attends the CDC with written notice but it will not be refunded.

Late Pick up Fees: School ends promptly at 1:30pm. A late fee of \$10.00 and \$1.00 per minute for each child will be charged beginning at 1:35pm. If a parent is late in picking up a child, staff must place

a note on the director's desk containing: *the date, the time of pick up, and the child's name*. If an emergency should arise and you believe you will be late, please call (512) 346-1323 or the church office at (512) 346-5683.

Drop-Ins: When a child from your class (who attends another day) is out due to illness or vacation, etc., there is an "opening" for the day. The CDC Director or the CDC Assistant Director has the discretion to allow a child to attend class on a non-scheduled day as a drop in. Requirements to accept a drop in include that space is available and that both the lead and assistant teacher are present. Parents are responsible for asking the CDC Director or the CDC Assistant Director if a drop-in space is available, and it is the CDC Director or the CDC Assistant Director's responsibility to fill out the CDC Additional Fee Form and to collect the \$30 drop-in fee from the parent.

Extended Hours: As demand dictates and staff is available, we may offer Optional care before or after school may be available for children. Our current license does not allow for a child to attend both before and after care in the same day, exceeding 5 hours of care. Registration forms are available at the CDC office and must be filled out in order to reserve a spot. There are additional charges for any extended care programs being offered. Schedules will be published as available. Late fees apply as stated above.

E. Sun's Out Scholarship Program

The CDC offers financial assistance to families through the Sun's Out Scholarship. Applications may be obtained from the CDC Director and the process is confidential.

F. CDC Board

The CDC is a ministry of TLLC, and as such is governed by the Constitution, Bylaws, Personnel Policies, and Operating Procedures of the church. The Senior Pastor and the CDC Director are permanent members of the CDC Board. The TLLC Nominating Committee nominates an additional 6 CDC Board members, who are elected by the TLLC congregation at the annual congregational meetings to serve two-year terms. The members are:

- CDC Director
- TLLC Senior Pastor or his/her designee
- Two CDC parents/TLLC members
- Two CDC parents/non-TLLC member
- Two TLLC members/non-CDC parents.

The CDC Board meets monthly to discuss, plan, and decide upon CDC business. The CDC Board meetings are also attended by two non-voting contributors: the CDC Assistant Director and a CDC Teacher Representative.

Parents who are interested in serving on the CDC Board for available seats, should submit nominations to the CDC Director once available seats are announced. The CDC Board will review applicants and make recommendations to the TLLC Nominating Committee.

G. Entrance Requirements change to "Admission Procedure"

All forms must be completed and returned to the CDC director by the first day of August. This includes: Enrollment Form with medical/health requirements and the Child Information Form. Parents who are volunteers in the classroom must also complete a Criminal History Form and attend a parent information meeting held at the beginning of the year. In an effort to keep our records up-to-date, we ask parents/guardians to inform the CDC office of any changes such as but not limited to: addresses, phone numbers, authorized pick-ups, etc..

Student Immunizations: Each child enrolled must meet applicable immunization requirements specified by the Texas Department of Health Immunization Requirements. All immunizations required for the child's age must be completed by the date of admission. It is the responsibility of the parents to provide their child's records and/or authorize TLLC CDC to utilize ImmTrac. Children without proper records cannot attend class until appropriate records are received by the CDC office. Please see the Minimum State Vaccine Requirements for Texas Children included at the back of the Parent Handbook. Parents seeking an Affidavit of Exemption from Immunizations for Reasons of Conscience, including religious beliefs; can find the form at <http://corequest.dshs.texas.gov>
Forms are good for two years from affidavit date

Staff Immunizations: As a requirement for employment, staff must follow Texas Minimum Standards immunizations per section 746.3611. Please see appendix for specific details. All precautions will be made to protect the children from exposure by staff to vaccine preventable diseases.

H. Vision, Hearing & Speech Screening

Vision and hearing screening is required for admission for children four years old, as of September 1, for the current school year. The screening results need to be included in your admission packet with authorized signatures. Vision, hearing and speech screening will be offered at the CDC during the Spring semester for a fee, or you may consult your doctor to schedule your child's screening.

I. Separation Policies

The CDC reserves the right to release any family from the school for lack of sufficient cooperation, delinquent or insufficient payment of tuition, incomplete records/immunizations or if – after careful consideration - the CDC is unable to meet the needs of the child and/or family. In the case of dismissal, registration fees and one-month tuition deposit will be forfeited.

Unfortunately there are sometimes reasons we have to expel a child from our program either on a short term or permanent basis. We will do everything possible to work with the family of the child(ren) in order to prevent this policy from being enforced. The following reasons to suspend a child from this center include (but are not limited to):

- Child is at risk of causing serious injury to other children or themselves
- Parent threatens physical or intimidating actions towards staff members
- Parent exhibits verbal abuse to staff
- Failure to pay/habitual lateness on payments
- Failure to complete required forms including immunization record or Physicians Wellness Statement
- Habitual tardiness when picking up child

Proactive actions that will be taken in order to prevent separation:

- Staff will redirect child from negative behavior
- Staff will reassess classroom environment, appropriate activities, supervision
- Staff will use positive methods and a language when disciplining children
- Staff will praise appropriate behaviors
- Child will be given verbal warnings
- Child will be given time and space to regain control
- Child's behavior will be documented and maintained in confidentiality
- Parent/guardian will be notified verbally and in writing when disruptive behaviors might lead to separation
- Director, staff, and parent/guardian will have a conference to discuss how to promote positive behaviors
- Parent/guardian will be provided resources to address behaviors
- CDC may recommend the evaluation by professionals on premises

Subpoenas: It is policy and operating procedures for the CDC that the CDC Staff may not testify in court regarding children and families currently enrolled. Therefore, if you choose to subpoena a CDC staff person, your family will be released from the program and registration fees and tuition deposits forfeited.

J. Grievance Procedures

CDC staff wants to ensure the best experience for the children enrolled in the program and encourages an open dialogue between parents/guardians and teachers/directors. In the case a parent/guardian has a question or concern about something at the CDC, they are to utilize the following process to obtain resolution:

1. Raise the concern with the CDC staff member directly involved.
2. If the parent/guardian is not satisfied with the outcome with the CDC staff member, the concern should be taken directly to the CDC Director via the Grievance Form available in the Appendix of the CDC Parent Handbook.
3. If the parent/guardian is not satisfied with the CDC Director's response, they may take the concern to the CDC Board via the following steps:
 - a. Submit a completed Grievance Form to the CDC Board chairperson via email, which can be found in the CDC Directory. The chairperson will acknowledge the written grievance and take it to the CDC Board for review.
 - b. The CDC Board will review at the next scheduled meeting, of which the parent/guardian will be informed of the date, time, and location in the acknowledgement communication. The parent/guardian is invited to attend the meeting to discuss the grievance(s) submitted.
 - i. If the parent/guardian cannot attend, their written grievance(s) will be brought before the CDC Board to discuss and determine appropriate action.
 - ii. If the parent/guardian can attend the meeting, the grievance will be the last item on the agenda and the process will continue as follows: The parent/guardian will state their grievance(s) and the CDC Director will respond; then there will be a time for the CDC Board to ask questions. After all questions have been sufficiently answered, all non-voting contributors, the CDC Director, and the parent/guardian will be dismissed for the CDC Board to discuss and determine the appropriate action.
4. If the grievance is still unresolved after the steps outlined above, then the written complaint should go to the TLLC Senior Pastor (or Pastor's designee). The Senior Pastor will have 7 days to reply in writing to the parent/guardian. The Senior Pastor's decision will be final and binding.

K. Drop-Off/Pick-up Procedures

Our classes begin at 9:30am and end at 1:30pm unless enrolled in before or after care. Children should be brought directly to their classrooms where they will wash their hands upon arrival. Teachers will have clipboards outside their room and parents must sign their child in and out every day he/she attends. All children will have a visual and tactile health check performed by their teacher in the responsible adult's presence prior to entering the classroom. No children will be accepted into the classroom before 9:30am. If your child will be absent from school, please call (512) 346-1323 and let us know. Once you sign your child in, we assume responsibility for your child. Upon signing your child out for the day, we release them to your care.

Time in the classroom is important. Teachers spend time planning and preparing for all the children. When you arrive late, the child potentially misses out on learning opportunities. Please make every effort to arrive at school at 9:30.

Authorized Pick-up:

Parents must give written permission if a designated person, other than themselves, is to pick up their child. Written permission is given on the child's [ENROLLMENT FORM]. Changes may be made by amending the enrollment form in the preschool office with the full name and phone number of the designated person. In an emergency, the parent may call the Office and provide this information.

Whenever a parent/guardian cannot pick up their child(ren), verification must be made in order to identify designated person before the child may leave. Parents must fill out the [AUTHORIZED PICK-UP FORM] prior to or the morning of the day of pick-up. The person must register at the school office, where the staff will make a copy of her/his driver's license. He/She will then be given a Visitor Sticker with the name of the child and current date. The person will then be escorted to the classroom teacher before being allowed to pick-up the child. Parents/representatives must sign in and out on the attendance sheet daily.

If a staff member has any concerns about the person picking up a child, he/she must contact the director or assistant director to determine if the child will be released. The office staff may call a parent for confirmation regarding whether to release the child if there is not a CDC Authorized Pick-Up Form completed.

Electronics policy: The CDC is a cell-free zone. Refrain from using portable, electronic devices in any capacity in the parking lot and during drop-off and pick-up.

L. Emergency Procedures

Fire drills are conducted monthly and disaster drills are conducted every six months. A fire evacuation plan is posted in each classroom. In the event that we would need to evacuate the campus, the evacuation location is Atria at the Arboretum, 9306 Great Hills Trail, Austin, TX 78759, 512-549-4218.

Children will be walked via the sidewalk, or if the necessity dictates, driven to the Atria by the CDC and TLLC staff. Any child under the age of 24 months or who needs assistance walking will be placed in either a wheeled crib or stroller and pushed to the Atria, children with hearing disabilities will be held/hand held during the evacuation.

The procedure for handling a medical emergency includes calling 911 to receive professional medical attention immediately. The parents and/or guardian will be called next in order to be available for their child and to help make necessary decisions with the medical emergency and CDC personnel. An Incident/Illness Form will be filled out with the CDC staff and parents for every injury, accident, and illness. Notification will be made with Licensing immediately on any injury that requires treatment by a health-care professional.

The CDC has an Emergency Preparedness Plan for a range of events and hazards. The plan is available in the CDC office should you desire to review it.

Health Policies

For the protection of your child and of others, all children will receive a health check by teacher before being admitted into class each day. Children who are sick should remain home. Children may return to school when they are free of fever and symptoms for 24 hours, or with a doctor's note stating they are healthy and may participate in school. Staff follow the same exclusionary policy.

Children will be prohibited from care if:

- The illness prevents the child from participating comfortably in activities including outdoor play
- The illness requires greater care than caregivers can provide without compromising health, safety, and supervision of other children

- Child has oral temperature above 101, a rectal temperature of 102, or an armpit temperature of 100 and is accompanied by behavioral changes or other signs of illness
- Or symptoms and signs of illness such as: lethargy, abnormal breathing, two or more vomiting episodes in the last 24 hours, uncontrolled diarrhea, mouth sore with drooling, behavior changes, or other signs the child may be severely ill
- Or the child's physician has diagnosed the child with a communicable disease and the child does not have medical documentation to indicate that the child is no longer contagious

A child will be sent home immediately if any of the following symptoms are present:

- Fever: defined as a temperature at or above 100 degrees without medications
- Vomiting and/or diarrhea
- Eyes: red, glazed, discharging
- Ears: red, sore, discharging
- Contagious disease: "fresh" red spots
- Ringworm or impetigo
- Head lice
- Overall appearance of listlessness, extreme drowsiness, irritability, or other behaviors/symptoms that make it difficult for a child to function normally and safely.

If symptoms occur while at the CDC, a parent will be notified and must come get the child immediately. There is no staff available to care for a sick child. The staff will complete an Incident Illness Form.

Please inform the director of any serious, contagious or prolonged illness. Please contact the director in the event of an absence from school.

A Communicable Disease Reference is included in the back of this handbook.

M. Allergy Management Protocol

Parents/guardians are responsible for informing their child's teachers and the Director of any risk of anaphylaxis, due to food allergies by completing the [Anaphylaxis/Allergy Emergency Plan] form.

Parents/guardians should schedule a meeting with the child's teacher and Preschool Director to determine the type and level of care that parent is seeking for their child. Parties will collaborate to complete the [Anaphylaxis/Allergy Emergency Plan] regarding:

- the nature of the allergy, signs, symptoms, medical management of the allergic reaction,
- recommendations for managing the presence of the allergen at the CDC,
- classroom ban, school wide ban, applicable signage
- medications to be stored and/or administered at the CDC,
- First aid training for staff regarding response procedures, medication dispensation.

The Director will also obtain a verbal or written confirmation of the requests from the child's physician.

When the [Anaphylaxis/Allergy Emergency Plan] is complete:

- all staff will be notified of the details of the plan,
- any necessary and/or related training will be conducted,
- all substitute teachers and parent volunteers will be informed of the child's allergy.

N. Medication Policy

The CDC will not administer medications, with the exception of EpiPens and inhalers as a part of a child's emergency allergy management. Sunscreen and insect repellent will not be administered at the CDC. Please apply these before school, as needed. Non-prescription, topical medication (i.e. teething gel and diaper rash cream) may only be administered after the parent completes a [MEDICATION FORM].

The teacher will follow the manufacturer's instructions on the label. Medication will be accepted only if it is in the original container and has not expired.

O. Incidents/Illnesses

An Incident/Illness Form will be filled out by a teacher when a child has physically been injured or becomes ill during school hours, the parent will be asked to sign the form at pickup, and it will be filed in the child's records. The parent(s) will receive a copy for their records within 48 hours, if requested.

P. What to Bring/What to Wear

Dress your child in play clothes that are appropriate for the current weather. All classes will go outdoors each day, weather permitting.

Footwear **must** enclose the toe area and have rubber sole. Each child should bring a change of clothing (underwear, socks, shirt, pants, etc.) in a zip lock bag with his/her name on each item. All children not capable of using the toilet should bring a labeled diaper bag with diapers and wipes. Bottles and cups must also be labeled with child's first name and last initial.

Q. Lunch Time

At the CDC we are committed to good nutrition as an integral part of the preschool experience. We ask parents to pack nutritious, plentiful lunches. The children not only benefit physically but also learn the principles of good nutrition. The lunches should include a healthy balance of fruit, vegetables, grain, and protein source. Do not send sodas, candy, gum, or other high sugar, non-nutritious foods for lunch. Should such items arrive at school, teachers will place them in the child's cubby to be returned home at the end of the school day.

Lunches should include a drink (no glass containers), labeled with the child's first name and last initial. Drinks can be plain white milk (not sweetened, kept cool with a cold pack), 100% real fruit juice (in original container) or water (no additives). We will not be able to heat your child's lunch.

If an allergy is present, it will be handled on a class-by-class basis.

In compliance with State Licensing and good health practices, food and drink brought from home needs to:

- Meet the USDA's food guidelines.
- Be labeled with the child's name and the current date. Food with expired dates will be discarded.
- Be packed with an ice pack if it requires refrigeration to stay cold.
- (If it is to be shared among the children) be either whole fruits or commercially prepared packaged foods in factory-sealed containers. This includes birthday celebrations.

According to Texas State Minimum Standard 90% of fatal chokings occur in children under 4 years of age. Children under 4 years old will not be served:

- Whole hot dogs (sliced & quartered are fine)
- Whole grapes (cut are fine)
- Nuts (try dried fruit instead)
- Popcorn
- Raw peas (cooked are fine)
- Hard pretzels (soft pretzels are fine)
- Spoonfuls of peanut butter (sandwich is fine)
- Chunks of raw carrots (cooked are fine)
- Meat larger than can be swallowed whole (cut into 1/2" squares for toddlers & 2s; sandwich meats are fine)

If the lunch provided from home does not meet USDA food guidelines, the CDC will do its best to provide an appropriate lunch. Please note that an appropriate charge to the parent may be assessed.

Toddlers/2s will not be allowed to carry bottles, sippy cups, or regular cups with them while walking or crawling.

Breastfeeding Policy: At the CDC we encourage and facilitate mothers in the breast feeding process.). Mothers may use the rocking chair in the infant room, or a private room in the church.. Teachers can use the staff infant room to warm bottles of breast milk.

R. Birthdays

Please notify your child's teacher one week in advance if you wish to bring a special snack for your child's birthday. Snacks will be served in conjunction with lunch. All goodies for celebrations must come from a commercially licensed kitchen in its original packaging (i.e. grocery store); they cannot be homemade. Please refrain from bringing in balloons as decorations as they pose a choking hazard and are an allergen that can create discomfort in some children. Birthday party invitations can be placed in each classmate's folder if all children in the class are being invited. Otherwise, you must deliver invitations off TLLC property.

Teacher Birthdays. Parents and children often want to celebrate teacher birthdays as well. In order to make all of our teachers feel special on their birthdays, we ask that parents follow these guidelines to ensure each teacher feels loved and appreciated. During the teacher's birthday week, a parent can bring in a birthday treat for the teacher from a commercially licensed kitchen. Please discuss the treat you plan to bring with the teacher prior to bringing it to the class. The teacher's birthday may be celebrated on two days, so that each class can celebrate with the teacher. The parents are welcome to decorate the teacher's classroom door and ask the kids to make cards. Your Parent Partner will contact the class about planning a celebration.

Parents and children often want to celebrate teachers' birthdays as well. In lieu of gifts, the TLLC CDC allows Parent Partners to coordinate the decorating of class doors, homemade cards, etc.

S. Guidance Techniques

Guiding children in positive ways helps them to maintain a positive self-image and to learn internal self-control. Positive guidance techniques you will see include:

- Phrasing statements positively (i.e., "walk inside" instead of "don't run")
- Reinforcing appropriate behaviors
- Redirecting behavior
- Giving choices
- Modeling appropriate behaviors
- Encouraging verbalization of needs and feelings
- Giving guidance that is individualized and consistent for each child
- Praising and encouraging good behaviors

A sense of trust and security develops between the teacher and the young child when the child realizes that the teacher is there to help them with their behaviors and not to punish them. The goal of guidance is to help the child in his/her growth toward self-discipline, while nurturing a positive self-concept. Early childhood educators need to have a sincere interest in children, an understanding of their problems, and respect for them as unique individuals.

Please let your child's teacher know if you are using any different approaches to behavior management

so we may better understand your child.

Discipline: CDC Teachers and staff will **never** use corporal punishment or withhold food as a punishment; will not humiliate, reject, or ridicule a child; use profane language; or place a child in a room unsupervised. The CDC builds trust and self-control.

Challenging Behaviors: **The CDC has a policy of using Redirection, Positive (Re)enforcement and Behavioral Modification to deal with discipline issues and challenging behaviors. As incidents occur we will strive to find the root of the behavior and address it. We will evaluate what we can do to alleviate it and insure that the child has success. Room arrangement, vocabulary skills, positive reinforcement and other strategies will usually stop any unwanted behavior.**

The CDC will communicate with the parent(s) or guardian(s) as to any incidents that occur within 24 hours. **In addition, any changes that need to be addressed will include input and discussion with the parent/guardian. The teacher will make notes as to the strategies employed as well as successes and alternate strategies needed. These notes will be kept in the class in the child's portfolio for referencing by the teacher.**

A. The First Day of School

It is common on the first day or first few weeks of school for children to feel varying degrees of separation anxiety. The CDC staff is trained to handle these feelings and take steps to help children feel more comfortable in their new surroundings. If separation anxiety is happening to your child (or to you) please remember that this too is a learning experience. Parents can also help their children by:

- Speaking positively and confidently about the upcoming new experience.
- Bringing them to the Open House or for a visit prior to their start date so they can form a mental picture of their new surroundings.
- Allowing them to bring a security blanket, stuffed animal, etc. that they are already bonded to. Objects that remind them of home often help. All parents are encouraged to bring a family picture to school that can stay in the classroom all year. This too will help the child develop a stronger connection between home and school.
- Being actively involved in your child's preschool experience by asking questions, showing pleasure in their artwork, visiting with the teacher, etc.

If your child has trouble separating from you when you drop him/her off, the teacher will intervene and give your child one-to-one attention while you leave. The longer the parent stays in the room, the more difficult it may be for the child. A positive, confident "I'll pick you up after lunch, have a great day" will also help. ALWAYS tell your child when you are leaving so you can maintain trust. If your child has trouble initially at school, you may want to come early and spend the last 15 minutes playing with your child in his/her room so that when you leave it is with a happy memory. If you need help with separation time, we are here to assist you.

B. Meeting Special Needs

Children with special needs are welcome at our school within the limitations of our ability to meet their needs. Evaluation of the school's ability to serve your child will be made in consultation with the parents, administration, and teacher in the context of the current circumstances. All children will be treated with love and respect. We will work diligently to help children with special needs make as much developmental progress as possible in our setting. We welcome information about how to best meet your child's special needs from your own experience in working with your child, your child's doctors, and therapists.

Sometimes children have special circumstances in their lives which may require extra attention or

awareness by the center's staff. Please advise the director or your child's teacher of circumstances that may be affecting your child's well-being or behavior (moving, new baby, divorce, job change, health issues, etc.) Any disclosures of this nature will be handled with complete confidentiality.

C. Bad Weather Policy & School Closures

If either Austin Independent School District (AISD) or Round Rock Independent School District (RRISD) close their school due to bad weather or other reasons, the CDC will be closed for the entire day.

If either AISD or RRISD delay the start of their school day due to bad weather or other reasons, the CDC will open at 10:30 am. Closing will remain at 1:30 pm.

If the CDC is closed for a day due to inclement weather, there will be no make-up day nor adjustments to tuition.

D. Visitation Procedures for Professionals

Parent request: Parents must contact the Director to arrange a visitation. A [RELEASE FOR VISITATION AND OBSERVATION] by a professional form must be completed prior to any visitations. Visitors must follow the visitation guidelines as written on the release.

Staff request: Staff must arrange any visitations with the Director. Visitors must follow the "Parent Volunteerism Guidelines" as stated in the Parent Handbook.

E. Animals

Animals may be present in our classrooms to enrich the environment. Approval from the office is necessary for any animal to visit. If an animal is to be present in your child's classroom a notification will be given to you in writing prior to the visit and a sign will be posted outside of the classroom door. If there are any concerns please see the teacher in charge or the director. Pets or visiting animals must have documentation from a veterinarian dated within the last 12 months to show that they are fully vaccinated and suited to be around young children. We do not allow pets to be on the playground for the safety of the children, protection of the equipment, and sanitary reasons.

F. Off-site Events

Three- and four-year-old classrooms will attend off-site events during the year. Parents will be notified at least 48 hours in advance of any event options for their child. Children attending will be transported by the parent, or an adult authorized by the parent, to the event location where they will meet the lead teacher. Parents will stay with their child throughout the event. After the event, parents are welcome to bring their child to school and sign them in for any remaining school hours.

Children attending the event with their parent are expected to wear the CDC school shirt while on the event. Orders will be taken at the beginning of each school year. Our state regulations require that each child must be easily identifiable with their childcare center's name and phone number which is present on our t-shirts. This insures their safety while away from the center. Parent permission to participate in off-site events is found on the Admission Form.

If you prefer your child not attend the off-site event, your child can come to school where the assistant teachers will conduct a normal day.

G. Gang-Free Zone

As a result of House Bill 2086 that passed during the 81st Legislature, Regular Session, Chapter 42 of the Human Resource Code was amended to require that information regarding gang-free zones be dis-

tributed to parents and guardians of children in licensed childcare centers.

What is a gang-free zone?

A gang-free zone is a designated area around a specific location where certain gang-related activity is prohibited and is subject to increased penalty under Texas law. Specific locations where certain gang-related criminal activity is now prohibited include, but are not limited to, public schools, playgrounds, video arcade facilities, and day care centers.

The area that falls within a gang-free zone can vary depending on the type of location. For example, certain gang-related activity that occurs within 300 feet of a video arcade facility is in violation of the new law, whereas certain gang-related criminal activity that occurs within 1000 feet of a school or day care center is a violation of a law.

How do parents know where the gang-free zone ends?

The gang-free zone is within 1000 feet of your childcare program. Maps may be produced for the purpose of prosecution and may be updated by the local municipal or county engineer. Parents may contact their local municipality for a copy of the map if they choose to do so.

Why are gang-free zones needed?

Similar to the motivation behind establishing drug-free zones, the goal of gang-free zones is to deter certain types of criminal activity in areas where children gather by enforcing tougher penalties.

What does this mean for my preschool?

Childcare providers are required to inform parents or guardians of children attending their center about the new gang-free zone designation. This means parents or guardians need to be informed that certain gang-related criminal activity or engaging in organized criminal activity within 1000 feet of your program is a violation of this law and is therefore subject to increased penalty.

IV. INFANT PROGRAM

Our infant program provides a warm, nurturing environment where caregivers play and interact with the children as they care for their needs. The infants develop trust in their surroundings and their caregivers. The infant's individual needs are met while the caregivers assure a stable daily routine. Toddlers are encouraged to develop independence while maintaining a sense of security. Schedules for the infant program include Monday-Friday, Monday/Wednesday/Friday or Tuesday/Thursday. Children wishing to enroll should be 4 months old by September 1st.

A. What to Bring

On the first day of school, each child must have on file all necessary paperwork plus the following:

- All dietary needs, including formula, juice, and lunch
- Diapers and requested supply of wipes
- Tight fitting crib sheet (New licensing requirements do not allow children under the age of 12 months to have any loose objects in their crib. This includes a blanket or stuffed animal.)
- Personal needs (pacifier, stuffed animal, etc.)

All supplies (bottles, diapers, bags, sheets, etc.) must be **CLEARLY LABELED WITH YOUR CHILD'S NAME**. Food and drink must also be labeled with the current date. Crib sheets will be sent home daily if your child naps.

Infants and toddlers/2's are **not allowed** to carry bottles, sippy cups, or regular cups with them while walking or crawling. They must be held or sitting while drinking.

As you enter the room, please either remove your shoes or put on disposable shoe covers located outside the room. Upon entering, parents and children need to wash their hands prior to engaging in any activity.

Infants Need Paperwork! Each day you will be asked to supply us with information that will help us care for your infant (when they last ate, slept, had a BM, etc.) When you come to pick up your child the teachers will also supply you with information about your child's day.

B. Sudden Infant Death Syndrome

To reduce the risk of SIDS, infants will be placed on a firm surface on their backs to sleep. After being placed down on their backs for sleep, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position. As per Texas State Minimum Standard, children under the age of 12 months may not have any loose items in their crib. If a blanket is desired, a sleep sack may be worn. Any exceptions to these requirements require written direction from a physician.

C. About the Infant Curriculum

Yes, there is such a thing as an infant curriculum! In addition to maintaining the health and safety of your child, the infant/toddler staff will also be planning routines and curriculum for your child. They will be watching your child's development and looking for the many milestones that occur each year. The environment is the starting point for an infant/toddler curriculum. The environment includes a mirror where children can watch themselves on floor level, many sensory activities and materials, crawling areas, dramatic play equipment, etc. Curriculum in this class includes outdoor play.

The staff for infant/toddlers interact with the children in the following ways: helping them to track objects, reading books, singing songs, puppetry, imitating sounds and facial expressions, uncovering a hidden toy (object permanence), banging objects together, balancing, standing and reaching out to grasp objects.

V. CURRICULUM

A. How Children Learn

The National Association for the Education of Young Children (NAEYC), made up of Early Childhood professionals all over the country, has done extensive research on how children learn best and what is "developmentally appropriate" for young children. Here are some of the findings:

- Children learn best through concrete, play-oriented approaches.
- Curriculum should be tailored to meet the needs of the children. (Children should not be made to conform to a pre-set curriculum.)
- Workbooks, worksheets, coloring books, and adult-made models of art projects are NOT appropriate for the young child's preschool experience.
- In children's art, the "process" is more important than the "product." Adults need to remember that the children develop at different rates.
- Teachers should take "cues" from children to optimize their learning.

Our goal is to develop competent, happy, and curious children. Teachers will provide a variety of activities to stimulate the children, physically, intellectually, emotionally, and socially every day.

Activities at the CDC are both planned and spontaneous. The CDC will provide opportunities that encourage the development of the child's self-esteem and self-control with the use of positive guidance, an appreciation of cultural diversity, and respect for each child's individuality.

B. Learning Centers

In quality programs for children, the environment is also a teacher. “Learning Centers” are areas designed to “motivate children to learn through the interaction with a variety of developmentally-appropriate materials and equipment from which children can choose activities which interest them in becoming active learners.” Through hands-on, child-centered play children learn by testing and exercising their bodies, handling, tasting, smelling, observing, hearing and learning new vocabulary, acting out things and living things over, being accepted and accepting others, and solving their own problems.

1. Book/Reading Center

When children look at books and are read to, they learn:

- Left to right progression (pre-reading/writing skill).
- Appreciation for the written word.
- About other people and places (valuing diversity).
- To love books, remember details, and express their ideas.

2. Dramatic Play Center

When children play in the dramatic play/home-living center they learn:

- What it feels like to try on other roles (mom, dad, baby).
- How to problem solve personal events (new baby, hospital visit).
- How to interact socially with others.

3. Art Center

When children play in the art center they are:

- Strengthening their fine motor skills.
- Developing their creativity and self-expression.
- Learning there are many ways to create.
- Developing pre-writing skills.

4. Manipulatives/Block Centers (Math)

When children play in these centers they are learning:

- About math and geometric shapes.
- To understand size, weight, and number concepts.
- To control their eye/hand coordination.
- To match and classify objects.

5. Playground

When children play on the playground they are:

- Strengthening their gross motor skills.
- Developing body awareness and self-concept.
- Learning about nature and science.
- Practicing social skills and problem solving.

Please note: Children go outside every day, except in extreme weather conditions as defined by the CDC Director. Teachers will use their discretion to limit outdoor play as they see best for the children. Sometimes a parent asks if their child can remain indoors during outside play time due to health concerns. If a child is well enough to attend school, the child is assumed to be well enough to go outside. During all weather conditions, we ask that children be dressed in appropriate attire for the climate, noting that our playground is often colder than at your house. During warm weather please apply sunscreen and bug sprays at home prior to coming to school. Children’s water cups are taken outdoors and a water fountain is available.

6. Other Centers

In addition to the above learning centers, others like those below may be added to the classroom environment.

Science Center: Science is a way of looking at the universe. It is a way of investigating and learning problem solving. Experiments, plants, shells, etc. give children new experiences to think about and new words to try out.

Music Center: Music encourages children to use their bodies and learn to express themselves. They learn to hear differences in sounds, add new words to their vocabulary, and appreciate a variety of musical instruments and songs.

Water/Sand Centers: Not only are children soothed by water and sand play, they will also learn a great deal by experimenting with both. Floating/sinking, pouring and measuring, problem solving and how things change form are just a few of the many skills that children learn by playing with sand and water.

Screen Time and Technology: The CDC provides the classes with iPads or Notebooks to allow for additional learning opportunities. They are used to show videos, play lesson based games and allow children to research topics of interest as directed and supervised by the CDC staff. Screen time is limited.

C. Lesson Plans

Each teacher creates his/her own curriculum and activities based upon the observations made of the individual needs, interests, and developmental levels of the children in the class. Curriculum “emerges” and ideas are expanded when these observations take place. Higher learning takes place when problem solving, experimentation, and open-ended ideas are encouraged! Emphasis is not on acquiring facts and knowledge about a specific topic but rather on development of processes for learning. Lesson plans are posted outside each classroom.

“Emergent Curriculum is a planning process that is responsive to a particular group of people, in a particular place at a particular time. It requires that its practitioners trust in the power of play. It is about taking your own ideas and other people’s ideas, bouncing them off of each other, and trying them out on the children. Young children are active not passive learners. The ‘players’ are the staff and the children. The play really begins only when we meet the children. No teacher ever writes the perfect ‘script’ because the children are busy writing scripts, too.” From *Emergent Curriculum* by Elizabeth Jones and John Mimmo (1994)

VI. PARENTS

A. Parent-Teacher Conferences

Parent teacher conferences are held twice a year (more often if the parent or teacher requests it). The school will close one day each semester for conferences (see calendar for dates). Care will be provided for your enrolled child while you attend your scheduled conference time. On occasion, additional conferences may be needed and will be individually scheduled.

B. Communication/Notification

One of our goals at the CDC is to provide a safe environment where children can learn to be open communicators and problem solvers. Therefore, we also encourage open dialogue between adults as well. Please let us (teachers and the director) know if you have any questions, comments, ideas, problems, or concerns.

Parents will be notified about any incident, illness, or emergency situation.

Please help us stay informed by keeping us up to date on your address, phone number, any changes at home, if you plan to be gone for an extended period of time, etc.

The local Childcare Licensing office at 908-9650, The Public Regulatory Services Child Abuse hotline at 1-800-252-5400 and the state childcare website at www.txchildcaresearch.org are resources that are available to ensure quality childcare practices.

Parents/guardians will have the opportunity to participate in a Parent Survey which will be used to help us identify ways to better serve their child and family.

C. Portfolio

From the very beginning of school the teachers observe, take pictures, and document each child's pre-school experience and milestones over the year. Using these portfolios during conferences give the parents and teacher a chance to set goals and plan and discuss ways to better meet the needs of their children. With parents and teachers working together, the children will benefit! A portfolio will go home with your children upon their graduation or withdrawal from the program. It can be used to follow their development over time. Important things in the portfolio will include photographs, art work, observational notes, and conference forms.

D. Assessment

As we are not trained professional therapists, the CDC will use anecdotal observations of your child to help assess their developmentally-appropriate stage as well as to design the classroom and curriculum to meet the needs of your child. Assessment is the process of observing, recording, and otherwise documenting what children do and how they do it as a basis for a variety of educational decisions that affect the child. Assessments involve the multiple steps of collecting data on a child's development and learning, determining significance in light of the program goals and objectives, incorporating the information into planning for individuals and programs, and communicating the findings to families and other involved people.

These assessments occur within the context of reciprocal communications with families (daily discussions and parent-teacher conferences). Assessment results are used to benefit children by aiding the teacher with curricula, tailoring instruction for each child's needs and strengths, and program improvement. This information ensures that the program meets its goal for children's learning and developmental progress. The assessment process is individualized for each child. No two children progress at exactly the same rate.

E. Confidentiality Statement

It is very important to respect each child and family's right to privacy and confidentiality. Do not discuss a child or a parent with another child or parent. Never speak negatively about a child when the child is present.

F. Parent Education & Resources

A variety of resources and referrals are available to parents including books and articles on child development issues. Please feel free to ask. Materials are also available for check-out from the TLLC library. Annually at the beginning of each school year, parents are given an orientation. We provide ongoing and current parenting resources to our families (ex. CDC Newsletter, Love & Logic Seminars, and opportunities for family involvement).

A current/updated copy of the Texas Department of Protective and Regulatory Services Minimum Standards for Day Care, and the Standards for the Texas Rising Stars program are available in the office for any parent to review.

VII. STAFF

The staff at the CDC is made up of a least one Early Childhood Specialist (the CDC Director), Early Childhood teachers, and/or Early Childhood assistant teachers. All staff members are required to have at least 30 hours of professional training per year. We know that ongoing training helps us to stay informed on current issues and developments in the field of Early Childhood Education.

In compliance with State Licensing and our accreditation programs the following are the guidelines under which we hire staff:

Director: Must have a least a Baccalaureate degree with at least 9 credit bearing hours of course work in administration, leadership, or management and at least 24 hours of specialized college-level course work in Early Childhood Education, Elementary Education, or Early Childhood Special Education.

Teachers: Must complete 30 hours of childcare related training per year. Thirty percent must have:

- A Child Development Associate Credential (CDA) or equivalent.
- Twelve semester hours in Child Development or Early Childhood Education and one year of experience.
- Two years paid experience while working toward a CDA.
- Two years paid experience while under the supervision of a staff member that has either:
 - A. A CDA or equivalent.
 - B. An Associate degree or higher in Child Development.
 - C. A degree in Early Childhood Education or related field.

All staff members are trained each year in:

- Infant/child CPR and First Aid.
- Prevention techniques for and the recognition of symptoms of abuse and neglect as well as the responsibility and procedure for reporting suspected abuse and neglect.
- Safe church

Independent Babysitting: The CDC does not refer, recommend, or endorse any employee, and shall be held harmless in any situation where an employee may independently babysit outside their regular work schedule on or off the CDC premises. Staff members are not acting as agents of the CDC when babysitting for families. Employment at the CDC does not infer or imply suitability for other work.

Social Media Policy: We encourage professional relationships between families and staff. While we value open communication between families and staff, CDC's staff policy discourages personal social media interaction between staff and currently enrolled families (ex. Facebook, Instagram, Twitter, etc.)

VIII. APPENDIX

- A. TLLC CDC Grievance Form
- B. Vaccine Requirements
 - 1. Student Requirements
 - 2. Staff Requirements
- C. Communicable Disease Reference
- D. Substitute Agreement
- E. Parent Handbook Agreement

A. TLLC CDC Grievance Form

TLLC CDC Grievance Form

Grievance Received By: _____ Date Received: _____

Grievant's Information

Name: _____

Phone: _____ Email: _____

Grievance Information

Date(s) of Occurrence:

Please state the policies, procedures, or rules that have been violated.

Please give a detailed account of the occurrence.

What remedy do you seek:

By signing below, I indicated that the information contained on this form is true and factual to the best of my knowledge:

Parent/Guardian Printed Name: _____

Parent/ Guardian Signature: _____

Date Signed: _____

B. Vaccine Requirements
1. Student Requirements

2014-2015 Texas Minimum State Vaccine Requirements for Child-Care Facilities



This chart summarizes the vaccine requirements incorporated in Title 25 Health Services, §§97.61-97.72 of the Texas Administrative Code (TAC). This chart is not intended as a substitute for consulting the TAC, which has other provisions and details. The Department of State Health Services is granted authority to set immunization requirements by the Human Resources Code, Chapter 42.

Age at which child must have vaccines to be in compliance:	Minimum Number of Doses Required of Each Vaccine							
	DTaP	Polio	HepB	Hib	PCV	MMR	Varicella	HepA
0 through 2 months	None	None	None	None	None	None	None	None
By 3 months	1 Dose	1 Dose	1 Dose	1 Dose	1 Dose	None	None	None
By 5 months	2 Doses	2 Doses	2 Doses	2 Doses	2 Doses	None	None	None
By 7 months	3 Doses	2 Doses	2 Doses	2 Doses**	3 Doses***	None	None	None
By 16 months	3 Doses	2 Doses	2 Doses	3 Doses**	4 Doses***	1 Dose*	1 Dose*	None
By 19 months	4 Doses	3 Doses	3 Doses	3 Doses**	4 Doses***	1 Dose*	1 Dose*	None
By 25 months	4 Doses	3 Doses	3 Doses	3 Doses**	4 Doses***	1 Dose*	1 Dose*	1 Dose*
By 43 months	4 Doses	3 Doses	3 Doses	3 Doses**	4 Doses***	1 Dose*	1 Dose*	2 Doses*

* For MMR, Varicella, and Hepatitis A vaccines, the first dose must be given on or after the first birthday.

** A complete Hib series is two doses plus a booster dose on or after 12 months of age (three doses total). If a child receives the first dose of Hib vaccine at 12-14 months of age, only one additional dose is required (two doses total). Any child who has received a single dose of Hib vaccine on or after 15 months of age is in compliance with these specified vaccine requirements.

Texas Department of State Health Services
Immunization Branch



Stock No. 6-15
Rev. 04/2014

2014-2015 Texas Minimum State Vaccine Requirements for Child-Care Facilities

*** If the PCV series is started when a child is seven months of age or older or the child is delinquent in the series, then all four doses may not be required. Please reference the information below to assist with compliance:

- For children seven through 11 months of age, two doses are required.
- For children 12-23 months of age: if three doses have been received prior to 12 months of age, then an additional dose is required (total of four doses) on or after 12 months of age. If one or two doses were received prior to 12 months of age, then a total of three doses are required with at least one dose on or after 12 months of age. If zero doses have been received, then two doses are required with both doses on or after 12 months of age.
- Children 24 months through 59 months meet the requirement if they have at least three doses with one dose on or after 12 months of age, or two doses with both doses on or after 12 months of age, or one dose on or after 24 months of age. Otherwise, one additional dose is required.

Vaccines:

DTaP: Diphtheria, tetanus, and pertussis (whooping cough); record may show DT or DTP

IPV: Inactivated Polio virus

Hib: *Haemophilus influenzae* type b vaccine

MMR: Measles, mumps, and rubella vaccines combined

HepB: Hepatitis B vaccine

HepA: Hepatitis A vaccine

Varicella: Chickenpox vaccine

PCV: Pneumococcal conjugate vaccine

2. Staff Requirements

Effective August 25, 2014, Triumphant Love Lutheran CDC has implemented the following immuniza-

tion policy for employees to be in compliance with the Texas Department of Family and Protective Services, Minimum Standard Rule # 746.3611, which requires a policy for protecting children from vaccine-preventable diseases. While the safety of our employees and the children in our care is paramount, we have elected to make immunizations for vaccine-preventable diseases optional to the employee.

The only exception to this policy is the TB test that is currently provided for the employee during the pre-employment physical that is required by TLLC.

Vaccines that we currently recommend our employees receive:

- Influenza (annually)
- Pertussis (Tdap)

If the employee is not exempt from having these immunizations, TLLC-CDC recommends that employees consider these immunizations.

The employee will indicate below if there are any exemptions that would prevent them from receiving an immunization for a vaccine-preventable disease.

A copy of this policy, signed by the employee, will be kept in the employee file.

If the employee decides that these immunizations are appropriate and beneficial for their health and well-being, and receive the immunization, they are asked to provide the CDC Director with documentation that the immunizations have been received.

TLLC-CDC will encourage the use of protective medical equipment to protect employees and children in care from exposure to possible disease. The protective medical equipment would include gloves, masks, and hand sanitizer. The use of protective medical equipment will be based on the level of risk the employee presents to children by the employee's routine and direct exposure to children. Employees should not be in direct contact when they are ill or exhibiting signs of illness. TLLC-CDC will monitor information provided to the public through the CDC and/or other sources to determine the level of risk the employee presents.

There will be no discrimination or retaliatory action against any employee who does/does not receive immunizations for vaccine-preventable illness. The use of protective medical equipment will not be considered retaliatory when used by employees of TLLC-CDC.

All employees will be required to sign this policy and signed policy will be retained on file. The information related to whether or not an employee chooses to have immunizations for vaccine-preventable diseases will be kept confidential. Failure to sign this policy will result in the employee not being able to work directly with children.

Diseases Requiring Exclusion from Schools
Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter A, Rule §97.7

(a) The school administrator shall exclude from attendance any child having or suspected of having a communicable condition. Exclusion shall continue until the readmission criteria for the conditions are met. The conditions and readmission criteria are as follows:

- (1) amebiasis--exclude until treatment is initiated;
- (2) campylobacteriosis--exclude until after diarrhea free for 24 hours without the use of diarrhea suppressing medications and fever free for 24 hours without the use of fever suppressing medications;
- (3) chickenpox--exclude until the lesions become dry or if lesions are not vesicular, until 24 hours have passed with no new lesions occurring;
- (4) common cold--exclude until fever free for 24 hours without the use of fever suppressing medications;
- (5) conjunctivitis, bacterial and/or viral--exclude until permission and/or permit is issued by a physician or local health authority or until symptom free;
- (6) fever--exclude until fever free for 24 hours without use of fever suppressing medications;
- (7) fifth disease (erythema infectiosum)--exclude until fever free for 24 hours without the use of fever suppressing medications;
- (8) gastroenteritis--exclude until diarrhea free for 24 hours without the use of diarrhea suppressing medications;
- (9) giardiasis--exclude until diarrhea free for 24 hours without the use of diarrhea suppressing medications;
- (10) hepatitis A--exclude until one week after onset of illness;
- (11) infections (wounds, skin, and soft tissue)--exclude until drainage from wounds or skin and soft tissue infections is contained and maintained in a clean dry bandage; restrict from situations that could result in the infected area becoming exposed, wet, soiled, or otherwise compromised;
- (12) infectious mononucleosis--exclude until physician decides or fever free for 24 hours without the use of fever suppressing medications;
- (13) influenza--exclude until fever free for 24 hours without the use of fever suppressing medications;
- (14) measles (rubeola)--exclude until four days after rash onset or in the case of an outbreak, unimmunized children should also be excluded until at least two weeks after the onset of the last rash;
- (15) meningitis, bacterial--exclude until 24 hours after start of effective treatment and approval by health care provider;
- (16) meningitis, viral--exclude until fever free for 24 hours without the use of fever suppressing medications;
- (17) meningococcal infections (invasive disease)--exclude until 24 hours after start of effective treatment and approval by health care provider;
- (18) mumps--exclude until five days after the onset of swelling;
- (19) pertussis (whooping cough)--exclude until completion of five days of antibiotic therapy;
- (20) ringworm--none, if infected area can be completely covered by clothing or a bandage, otherwise exclude until treatment has begun;
- (21) rubella (German measles)--exclude until seven days after rash onset or in the case of an outbreak, unimmunized children should be excluded until at least three weeks after the onset of the last rash;
- (22) salmonellosis--exclude until diarrhea free for 24 hours without the use of diarrhea suppressing medications and fever free for 24 hours without the use of fever suppressing medications;
- (23) scabies--exclude until treatment has begun;
- (24) shigellosis--exclude until diarrhea free for 24 hours without the use of diarrhea suppressing medications and fever free for 24 hours without the use of fever suppressing medications;
- (25) streptococcal sore throat and scarlet fever--exclude until 24 hours from time antibiotic treatment was begun and fever free for 24 hours without the use of fever suppressing medications; and
- (26) tuberculosis, pulmonary--exclude until antibiotic treatment has begun and a physician's certificate or health permit obtained.

(b) The school administrator shall exclude from attendance any child having or suspected of having a communicable disease designated by the Commissioner of the Department of State Health Services (commissioner) as cause for exclusion until one of the criteria listed in subsection (c) of this section is fulfilled.

(c) Any child excluded for reason of communicable disease may be readmitted, as determined by the health authority, by:

A list of all communicable diseases can be found in the CDC office or at

[http://info.sos.state.tx.us/pls/pub/readtac\\$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&ti=25&ch=97&rl=7](http://info.sos.state.tx.us/pls/pub/readtac$ext.TacPage?sl=R&app=9&p_dir=&p_rloc=&p_tloc=&p_ploc=&pg=1&ti=25&ch=97&rl=7)

D. Substitute Agreement

I have read the staff handbook and agree to abide by all guidelines in the handbook with special regard to the following bullets.

- I understand my hours at the CDC are 9:15 am until 1:45 pm. I agree to help the teachers in charge with all set up and clean up.
- I understand that all information concerning families, children and staff is confidential and not to be shared with others.
- I understand the CDC abides by the DFPS minimum standards and ELEA accreditation guidelines and I agree to follow these rules.
- I have read the positive guidance techniques in the staff handbook and agree to follow these steps.
- I understand that cell phones are not permitted in the classroom and will be turned off and not on my person.
- I understand that a Criminal History Check must be completed prior to my substituting.

Signature

Date

Printed Name

E. Parent Partner Agreement

Parent Partners are essential to the success of school events. Parent partners assist teachers by ensuring that all parents have information needed pertaining to upcoming events and they assist the lead parent partner in gaining parental involvement. The lead parent partner will communicate all necessary information to the parent partners who are then in turn responsible for communicating to their respective classes.

Any time spent on parent partner activities counts toward volunteer hours for the child in the class you are representing. Two parents from each classroom are recruited yearly to serve as parent partners. Their responsibility is to be available to assist the classroom with any special activities planned by the teachers or the CDC including but not limited to the following:

- Assist teachers in coordinating classroom events
- Assist teachers in communicating information to all parents
- Assist in planning Thanksgiving luncheon
- Assist in the end of year picnic
- Coordinate teacher birthday celebrations as outlined in handbook
- Attend parent partner meetings
- Assist in other CDC activities as requested by the CDC director

All activities/fundraising must be approved by the director and/or the CDC board.

All communication with families must be approved by the director and/or the CDC board.

All information pertaining to CDC children and/or families must remain confidential.

Prior to serving as a Parent Partner, I must attend a Parent Partner Orientation.

I acknowledge I have read the parent handbook and the parent partner agreement and agree to abide by these guidelines.

Signed

Date

Printed Name

F. Parent Handbook Agreement