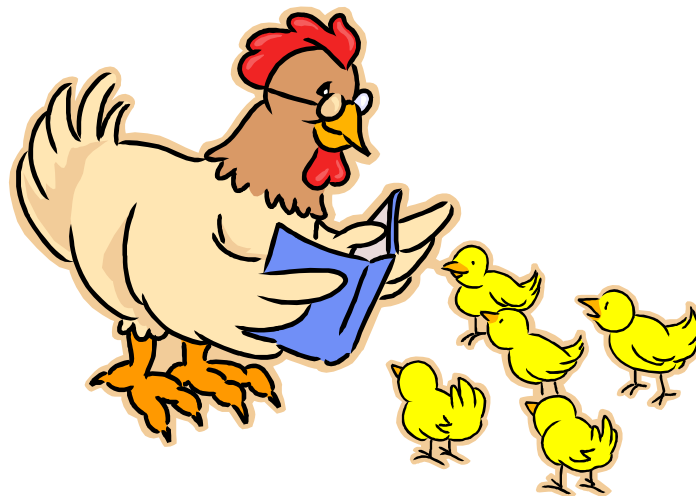


Henny Penny Nursery School
316 Essex Street
Salem, Massachusetts 01970

(978) 745-7315

School Handbook



The Goals and Objectives of the Henny Penny Nursery School are as follows:

1. To help ease the separation from home to school by providing a happy, accepting and nurturing atmosphere.
2. To provide a positive school experience in which the child can take pleasure in his/her accomplishments and strive for growth and competence.
3. To develop readiness skills and prepare the child for kindergarten.
4. To work cooperatively with parents regarding their child's development by means of progress reports, telephone conversations, informal check-ins, newsletters, parent-teacher meetings, parental visits to school and conferences.
5. To screen children with possible special needs and to take appropriate action in notifying parents and referring them to areas of help.
6. To expose children to a rich and varied set of experiences in order to expand their overall development.

The curriculum and classroom environment is designed to provide specific, planned learning experiences that support the social, emotional, physical, intellectual, and language development of all children. Interest areas are designed to encourage language development (expressive and receptive) as well as to provide opportunities to interact with peers and adults, to learn age-appropriate self-help skills, to play alone or with others, and to participate in a variety of creative activities. A wide array of educational materials and activities are incorporated into the classroom and in lessons with the common goal of introducing and reinforcing pre-reading, pre-writing and pre-math skills as well as to aid in development of motor skills (large and fine motor). Lessons and activities are planned and organized using the Massachusetts Department of Education Curriculum Frameworks. Teachers provide both small and large group activities and lessons in the following areas; dramatic play, cooking, music, expressive art, language arts, math, science, creative movement, block building, puppetry, children's literature, sand and water exploration, clay and play dough molding, and story writing.

The Henny Penny Nursery School Staff members are certified by the Department of Early Education and Care. Our staff is made up of early childhood professionals dedicated to providing opportunities for each child to grow both socially and academically. Our staff participates in professional development workshops in an effort to remain current and up to date in the constantly growing world of early childhood education and development.

SCHOOL HOURS:

School is open 4 mornings each week, Monday- Thursday from September-to June. Children arrive at 8:30am and are dismissed to their parents at 12:00pm. Parents of four and five year old children (as well as some older 3's) select a two; three, or four day per week program. On Tuesdays, children may bring their lunch for an extended "Stay and Play" until 1:00 PM. Those parents who would like their child to participate must

notify a staff member on the morning of the extended day. The staff member will record the child's name and collect the \$5 fee. Children who participate in the lunch bunch must be picked up promptly at 1:00pm.

TUITION

Tuition may be paid weekly or monthly. Families are asked to commit to either a weekly payment plan or a monthly payment plan for the entire school year. Our current rates are \$55.00 per week for 2 days, \$75.00 per week for 3 days and \$95.00 per week for 4 days. Tuition payments are based on our school calendar. For example, in September, our school calendar notes 4 weeks of school, therefore, a family whose child is enrolled for 2 days per week will be responsible for paying \$55 per week for 4 weeks, or \$220 for the month. In December, our school calendar notes 2 weeks of school. In this case, a family whose child is enrolled for 2 days per week will be responsible for \$55 per week for 2 weeks, or \$110 for the month.

Payments are expected to be made in a timely manner. When an account becomes past due by 4 weeks, the Director will request a meeting with the family to develop a payment plan and/or cut back on the number of days the child is enrolled.

ADMISSIONS

Children are admitted on a first come, first serve basis, regardless of race, creed, family background, national origin or disability. Henny Penny has an open enrollment policy and families previously enrolled in the school have first priority for their returning child as well as for siblings. When the availability for a given day has been filled, a waiting list is created and those parents are notified if an opening occurs. Prior to the registration of any new child, a parental visit to school and a meeting with the school's Director is required. Upon acceptance, the following forms must be completed and on file in the office for each child, on or before the first day of attendance:

- admission application with a \$50.00 non-refundable registration fee
- health form (to be completed by a Physician)
- current immunization information
- liability form for before and after school hours
- permission forms (trips, medical procedures, photographs) ,
- emergency information sheet with contact numbers
- medical authorization and consent form
- developmental history

In September or October, a Parent-Teacher Night will be scheduled for new and returning families. This is an opportunity for the staff to discuss curriculum, review policies and procedures as well as answer any parent questions and/ or concerns regarding our program.

PARENT INVOLVEMENT

Parent involvement is strongly encouraged at Henny Penny and is viewed as an essential part of the school's philosophy. Parents are welcome to visit the school and encouraged to assist in the classroom for special events and parties. They are especially urged to volunteer for special projects - to share a hobby, specialty, game craft or cooking.

DIRECTOR

The school's Director, Mrs. Kerry Martin, is responsible for the operation of the school and for the developing and maintaining the Early Childhood Education Program. She is formally responsible to the Standing Committee of the First Church of Salem. Mrs. Martin is responsible for the supervision and training of teachers, staff, and any parent volunteers assisting at school.

DAILY ROUTINE

The daily routine is posted in the classroom. Generally, children begin their day in the interest areas. When all the children have arrived, about 9:00 am, we sing "Conversation Time". This transition song signals the children to group in circle where we begin our calendar activities. We start off with The Pledge of Allegiance, and My Country 'Tis of Thee. Next, we move into our calendar activities and sing our calendar song, months of the year & days of the week songs, and weather song. Children count out the numbers & date on the calendar as well as chart the weather together. Mrs. Hermann and Mrs. Martin will explain the activities planned for the morning, introduce the teacher- directed group activity, and/or any guests visiting that day. Next, we break into groups. This circle time is a short get-together. Some days we'll read a book at this time if it's related to a theme and table activity or craft. Other days we'll simply explain what we're working on, share ideas, listen to the children, and then direct them back to groups and interest areas.

Activity time runs from about 9:30-10:45am. During this time, the children complete a skills based, teacher-directed activity while others engage in free play in the interest areas on a rotating basis. Following activity time, we sing "Time for Clean-Up". This is about a 10-20 minute transition period where we all work together to clean up the classroom and move into the conversation room for quiet book time. This is followed by a group trip to the restroom to use the toilet and wash our hands as we prepare to get our snacks from our cubbies. Snack time is from 11:00-11:20. The children choose their seats and enjoy their snacks while chatting with their friends. When snack-time is over, the remainder of the day is reserved for song, dance, movement, and stories. At about 11:50 we prepare to depart, assisting with coats, handing out papers and walking the children downstairs for dismissal.

ARRIVAL

Attendance is taken upon arrival to school at 8:30am. The time between 8:30-8:45 is reserved for transition time into school. You may walk your child into the classroom where we shall meet him/her. Any notes or communications should be made to Kerry or Barbara at this time. Please make every attempt to see that your child is on time for the beginning of class since he/she may miss the introduction of the day if arriving late.

PLEASE NOTE that children may not arrive prior to our 8:30 start time. While we appreciate that the children and families are eager and excited to start the day, the time between 8:00-8:30 is an important time for staff to prepare the classrooms & activities for the children. Early arrivals directly impact our ability to successfully & efficiently meet the needs of all students.

DISMISSAL

Children will be dismissed at 12:00 pm. Mrs. Hermann and Mrs. Martin will walk the children downstairs to the front door where we ask you to meet them. The teachers will dismiss the children to their parents, one by one. Children will only be dismissed their parent or guardian. Parents must notify teachers in writing if someone other than a parent or guardian will be picking up their child. Staff reserves the right to ask for identification from anyone, other than the parent or guardian, who will be picking up the child.

In order to eliminate congestion in the driveway, please enter on the left hand side (as you are facing the church), drive around the circle and park as closely as possible to the exit on the right. If you expect to be delayed, please park on the street or in the back parking lot. The back parking lot is accessible by route 114/North Street.

TRANSPORTATION

If your child is a member of a car pool, please make sure we have a signed permission slip stating the names of all persons allowed to transport your child to and from school. We must also have a written note from you listing any person/s with whom you wish to release your child.

VACATIONS/CANCELLATIONS

We have tried to coordinate our school calendar with that of the Public Schools in Salem. If it is announced that school is cancelled for the Salem Public Schools, then Henny Penny will be cancelled as well. If Salem has a 1 hour delay, Henny Penny will start at 9:30am. If there is a 2 hour delay, school will be cancelled.

SNACKS

Parents should provide their child with a nutritious A.M. snack. The children have a busy morning and most of them require a hearty snack to maintain their energy. For children who will be attending Stay and Play, please be sure to pack 2 drinks, 1 snack and 1 lunch. Henny Penny is a PEANUT FREE SCHOOL. There are several children in our program that are extremely allergic to peanuts, nuts and nut oils. The best way to avoid this situation is to read the labels of any and all snacks you send in. If you need some ideas and suggestions for yummy & healthy snacks, feel free to ask the teachers.

BIRTHDAYS

Birthdays will be celebrated at Henny Penny with a special song at circle time & a prize from the birthday board for each child. In June, we host a popsicle party for those children who have summer birthdays when school is not in session. During the school year, families may send in a special birthday treat or snack to share with the class. Please be aware of our peanut/peanut butter free school policy when preparing birthday snacks. Mrs. Hermann and Mrs. Martin can provide you with a list of peanut free options, if needed.

CLOTHING

Please dress your child in simple, sturdy, washable clothing and sneakers or rubber-soled shoes. We will be working with many messy materials for projects and do not want special and/or fancy clothes to inhibit your child's participation. To help avoid any confusion, please make sure that labels or names are on all of your child's outer wear clothing, boots, and sweaters. Children are prone to spills and accidents. Therefore, we require each child to have a complete change of clothing, including underwear and socks, to be left in school. The clothing should be packed in a standard size shoe box with the child's name on it and brought to school the first week.

CONFERENCES

Written progress reports are completed in January, February and March. Conferences with each parent will be scheduled during this time. It is important to note that a parent or teacher may call for a conference as the need arises. Communication should not be limited to only conferences in late winter. Kerry Martin and Barbara Hermann are often available for brief discussions during drop-off and pick-up times as well as scheduled times before and after school.

PHONE MESSAGES

It is less than ideal to receive phone calls while school is in session. Except for emergencies, all calls should be made before or after school time. The school phone number is 745-7315. This is the Nursery's private line; no other church phone number is connected to our office.

NEWSLETTERS

A monthly calendar and weekly newsletter will be distributed to inform you of current and upcoming activities as well as to keep you informed as to all the exciting things going on in the classroom. General information and announcements are typically posted on bulletin board leading up the stairs.

TOILETING

In our daily schedule, we have supervised times for all children to use the bathroom facilities. We also strongly encourage the important habit of washing hands with soap and water. We encourage all children attending Henny Penny to use the toilet. For those children that are not ready, we ask that you send in diapers and/or pull-ups.

STAY AND PLAY

Stay and Play is an extended day for children to enjoy table top games, outdoor play, and lunch together. This extended day program is offered one day a week on Tuesdays. Stay and Play runs from 12:00 to 1:00pm for a fee of \$5.00. To avoid confusion, we ask that you avoid combining tuition payments with Stay and Play payments.

RECORDS

To aid in the assessment of each child, careful records will be maintained throughout the year. These files will contain your child's developmental history questionnaire, medical records, progress/conference reports, emergency information and any other correspondence pertaining to your child. Records are confidential and, as are all later school records, are protected by regulations specified by the Massachusetts Department of Early Education and Care. These regulations prohibit release of information to anyone other than school personnel and Department of Early Education and Care employees without written consent of the child's parents. Parents have access to all information in their child's file and have the right to add as well as to request deletion of information.

If a family withdraws their child from school, upon written request from the parent, a copy of the child's record will either be given to the parent or to the child's next school or program. The parent will be asked to sign a form verifying the request of the child's record and receipt of the child's record.

PROGRESS REPORTS AND REFERRALS

Parents meet in January and receive a progress report on their child. The report is delivered to the parent, read and explained. The parent has a 15-30 minute conference and questions are answered and referrals are made at this time. Kerry is also available to meet daily before school begins and when school is dismissed. Informal reports are given in the AM and PM as needed. '

A child who exhibits a developmental delay, speech and language, difficulties or hearing and/or sight problems are referred for assessment. Parents will be referred to the North Shore Children's Hospital or the Early Childhood/Pupil Services Department for the community for which they reside. The director will follow up with written referrals and/or report for Core Evaluations and Speech Assessments.

Parents may be asked to visit the classroom in session to observe, when a child has a significant behavioral problem. A course of action is planned (ie: daily notes, positive feedback/reinforcements, rewards, sticker chart) with the parent and followed up on. Any pertinent behaviors are recorded and: appropriate referrals for a smaller classroom setting, a language-based classroom or a self-contained classroom are made. Henny Penny Nursery School uses the procedures listed above for referring parents to appropriate educational, medical and mental health services for their child should the they feel that an assessment for additional services would be beneficial to the child.

BEHAVIOR MANAGEMENT PROCEDURE

Every effort is made to maintain a cooperative, pleasant atmosphere at Henny Penny. Our goal is to maximize the growth and development of the children and to protect the group and individuals within it. The children are made aware of the basic rules of conduct that must be observed while attending school. Behavior management will be used in a consistent, reasonable and appropriate way based on the understanding of the individual needs and development of the child.

Henny Penny adheres to specific child guidance goals that help children to:

- Be safe with themselves and with others;
- Feel good about themselves;
- Develop self-control and good coping skills;
- Appropriately express their feelings;
- Become more independent;
- Balance their needs and wants with those of others;
- Learn new problem-solving skills, including non-violent conflict resolution; and,
- Learn to use equipment and materials and other resources in caring, appropriate ways.

Should a child cause a disruption that would interfere with the learning of another child or should he or she endanger either another student or teacher, the following procedures are practiced:

1. The child is removed from the group.
2. The child may be redirected to another activity that acts as a calming influence.
3. The teacher or teachers talk to the child to help he or she understand why he or she has been removed from the group. After a period of time when the child seems ready, he/she will be brought back to the group. Teachers will assist the child in addressing the issue through conversation, either individually, with other students or both.
4. The child's parents will be made cognizant of the disciplinary action that was taken.
5. If a child is unresponsive to intervention and continues to be a behavior problem by endangering the health and safety of those around him or her, possible referrals for professional help may be suggested to the parents.

Henny Penny Nursery School strictly PROHIBITS

- a. Spanking or other corporal punishment of children
- b. Subjecting children to cruel or severe punishment such as humiliation, verbal or physical abuse, or neglect
- c. Depriving children of meals or snacks
- c. Disciplining a child for soiling, wetting or not using the toilet

SUSPENSION AND/OR TERMINATION

The following are circumstances in which a child may be suspended and/or terminated from Henny Penny Nursery School.

- A child jeopardizes the health and safety of him or herself or another child or children at Henny Penny
- The child's developmental needs are not being met at Henny Penny
- In the event of non-payment of tuition
- The family does not adhere to Henny Penny Nursery School policies
- A parent is verbally or physically abusive to a staff member

A Termination of services will result after an appropriate referral is made to a setting that can better meet the needs of a child. While this transition is being planned, Henny Penny will attempt to accommodate the child with an Individual Education Plan at our school. Teachers and the parents will explain that the child is going to a new school with children his/her own age, that can help him/her learn better. It will be made clear to the child that he/she is not "bad": but that the other program has teachers to help with specific needs (ie: speech, self-control; . behavior, etc.) It will be explained that it's a smaller school and the child will have more teachers and a special teacher just for him/her.

Termination of services may preclude a placement if the child is a threat to the safety of other children (ie: acting out, hitting, kicking or biting etc.) It may also preclude placement if the child disrupts the functioning of the group. In the, RARE event that this termination occurs, a referral for special services and evaluation will be requested and followed up by the director. A grace period of 10 school days will be allowed before termination in order to plan for and ease the transition.

The cause for termination will be determined on a case by case basis. Parents will be notified in writing of any suspension or termination decisions. A copy of this letter will be kept in the child's record. The director will inform the parents of availability of information and referral for other services. The staff will prepare the child for termination in a manner consistent with the child's ability to understand. A child will not be suspended or terminated as a form of punishment.

STUDENT HEALTH CARE POLICY

For the continued health and safety of all the children at Henny Penny Nursery School, it is our policy that sick children must not attend school. Illnesses that require a child to stay home from school are:

Colds: Colds are common in the winter months. However, if there is a green or yellow discharge from the nose, persistent cough or if it is necessary for you to administer cough/cold medicine in the morning, please keep your child home.

Conjunctivitis: This is a highly contagious infection. If there is discharge from the eye, you must keep your child at home. If conjunctivitis is suspected, you will be asked to have your child examined by a doctor. If it is confirmed that your child has conjunctivitis, you must keep your child home and on antibiotics for 24 hours before returning to school.

Diarrhea: If your child has two or more watery stools in the morning before arriving to school, please keep your child home. If your child has diarrhea due to antibiotics, you must have written or oral consent from the child's physician confirming the child is not contagious and may attend school.

Fever: If you child's temperature is elevated and he/she does not seem to be functioning at his/her normal level, you should keep your child home. Anytime a child has a fever above 100 degrees, you must keep them home until they are fever free without medication, for 24 hours.

Lice: Parents are required to notify the school if any of their children have head lice (even if they do not attend this school) so that we may check other children in the class. If there are signs of eggs or lice on your child's head, you child must receive-treatment and have written consent from a doctor before returning to school.

Rashes: If your child has a rash or unusual soreness or redness that appears to be itchy or uncomfortable, please have your child checked by a doctor before sending them to school.

Strep Throat: Strep throat has a variety of symptoms, which do not always begin in the throat. If your child has a fever, rash and/or sore throat, please have him or her checked by a doctor. If the diagnosis is that of strep throat, your child must be on antibiotics for 24 hours before returning to school.

Vomiting: If your child is vomiting you must keep him/her home for 24 hours after the vomiting has completely stopped.

*If your child was admitted into the hospital 24-48 hours prior to attending school, please notify the Director immediately.

HEALTH CARE POLICY AND MEDICAL PLAN

The health and safety of each child at Henny Penny is of paramount importance. Every effort has been made to provide a safe environment and plan for emergencies. Both teachers are certified in first aid and CPR. In the event of an emergency, you will be notified immediately and your child will be transported to the nearest hospital by ambulance. If needed, a staff member will administer first aid and/ or CPR until medical assistance arrives. In the event that you cannot be reached, we will contact a person on your child's emergency contact list.

All families are required to complete a medical form prior to the child's first day of attendance. The Director and staff at Henny Penny must be made aware of any allergies or special healthcare issues. All allergies will be posted in the classroom so that staff, visitors and volunteers will be aware of all children with allergies. Parents should be sure to keep the school informed of pertinent medical information (updates and or changes) including the onset of communicable disease and to update files so that physical exams are current within one year.

Emergency Telephone Numbers (below) are posted in office & classroom

Health Care Consultant: Bradford Martin, R.N.B.S.N., 978-740-3750

Fire Department: 911, 978-745-7777

Police Department: 978-744-1212

Cataldo Ambulance: 978-744-4416 -

Poison Control: 1-800-222-1222

North Shore Medical Center: 978-741-1200:

FIRST AID AND TRANSPORTATION TO THE HOSPITAL

(1) In the case of an emergency or illness (such as a seizure, a serious fall or serious cut), the teacher in charge will begin administration of emergency first aid while the assistant teacher takes other children to another area or room.

(2) A member of the staff will contact the parent to come and pick up child or, if response time is a factor, to have the parent meet the child and accompanying staff at the emergency room of the hospital utilized in emergencies.

(3) In the event a situation arises that is life threatening or the child cannot be comfortably restrained in a car, an ambulance will be called immediately. The parent will be called to meet the child and staff at the hospital. The teacher or other designated staff will go with the child in the ambulance. The child's file will be taken, including permission forms and pertinent insurance information if the center has it.

(4) When parents cannot be reached, those listed, as emergency contacts will be called as a further attempt to reach parents. In the event a parent cannot be reached immediately, a designated staff person will continue to attempt to reach parents. If necessary, the child will be transported to the hospital by a staff member (or by ambulance) and the child's whole file will be taken, including permission forms.

EMERGENCIES WHILE ON A FIELD TRIP

If an accident or acute illness occurs while on a field trip, the lead teacher will take charge of the emergency, assess the situation, and give first aid as needed. The method and urgency of transportation for the child to receive medical treatment will be determined by the lead teacher based on the severity of the emergency or illness. If necessary, an ambulance will be called. The program director will be contacted by the lead teacher as soon as possible and informed of the nature and extent of the injury and the proposed plan of action. As a preventive measure, prior to departure from the center, the program director and or lead teacher will determine appropriate guidelines to be followed during the field trip to insure continuity and safety of the children including:

- (1) A first aid kit will be taken in all vehicles on all field trips.
- (2) Emergency information, including contacts and telephone numbers, will be taken on all field trips.
- (3) On a field trip, staff must be equipped with a cell phone at all times.

PLAN FOR INJURY PREVENTION

To prevent injury and to ensure a safe environment, the staff member who opens each classroom is responsible upon arrival each day for monitoring the environment and for the removal of any hazards. Any needed repairs or unsafe conditions will be reported to the Director. The Program Director will monitor the outdoor playground and remove any hazards prior to any children using the space.

- A. No smoking is allowed on the premises.
- B. Toxic substances, sharp objects matches and other hazardous objects will be stored out of the reach of children.
- C. A first aid kit and emergency contacts and telephone numbers for the children will be taken on all field trip.
- D. An injury report for any incident which requires first aid or emergency care will be maintained in the child's file. The injury report includes the name of the child, date, time and location of accident or injury, description of injury and how it occurred, name(s) of witnesses, name(s) of person(s) who administered first aid and first aid required. Staff should use the Accident/Injury Report Form to record the above information. Staff should submit the completed form to the Program Director for review. Once the Program Director has reviewed the Accident/Injury Report form and has signed it, it should be given to the parent. The parent should be allowed to review it, sign it, and then be given a copy. The staff member should then log the report in the Central Log of Injuries and then file the report in the Child's file. Only staff who have a current First Aid will be allowed to administer first aid no matter how minor the injury.

PLAN FOR MANAGING INFECTIOUS DISEASE

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

- the illness prevents the child from participating in the program activities or from resting comfortably;
- the illness results in greater care need that the child care staff can provide without compromising the health and safety of the other children;
- the child has any of the following conditions: fever, unusual lethargy, irritability, persistent crying, difficult breathing, or other signs of serious illness;
- diarrhea;
- vomiting two or more times in the previous 24 hours at home or once at the center;
- mouth sores, unless the physician states that the child is non-infectious;
- rash with a fever or behavior change until the physician has determined that the illness is not a communicable disease;
- purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow discharge, often with matted eyelids) until examined by a physician and approved for re-admission, with or without treatment;
- tuberculosis, until the child is non-infectious;
- impetigo, until 24 hours after treatment has started or all the sores are covered;
- head lice, free of all nits or scabies and free of all mites;
- strep infection, until 24 hours after treatment and the child has been without fever for 24 hours;
- many types of hepatitis are caused by viruses. The symptoms are so alike that blood tests are needed to tell them apart. In the U.S. the most common types of hepatitis are A, B, and C. Types B and C are spread through blood and other body fluids. Type A, is spread through contaminated food and water or stool (feces). Fact sheets are available from the state Department of Public health. www.state.ma.us/dph
- chicken pox, until last blister has healed over. A child who has been excluded from child care may return after being evaluated by a physician, physician's assistant or nurse practitioner, and it has been determined that he/she is considered to pose no serious health risk.

When a communicable disease has been introduced into the Center, parents will be notified immediately, and in writing by the Program Director. Whenever possible, information regarding the communicable disease shall be made available to parents.

PLAN FOR INFECTION CONTROL

The program director shall ensure that staff and children wash their hands with liquid soap and running water using friction. Hands shall be dried with individual or disposable towels. Staff and children shall wash their hands minimally at the following times:

- a. Before eating or handling food;
- b. After toileting;
- c. After coming into contact with bodily fluids and discharges;
- d. After handling center animals or their equipment; and
- e. After cleaning.

The program director and lead teacher shall ensure that the specific equipment, items or surfaces are washed with soap and water and disinfected with a fresh, standard bleach solution (1/4 teaspoon per 1 qt.)

PROCEDURES FOR USING AND MAINTAINING FIRST AID EQUIPMENT

Henny Penny maintains a safety kit in the office. Its location is marked by a red cross on the front of the drawer in the office. The first aid kits are stored out of the reach of children but easily accessible in case of emergency. Portable first aid kits used on field trips will include: first aid supplies, children's emergency contacts and telephone numbers, and change for a pay telephone. The first aid kit is kept supplied by the program director. First aid kits will be inspected monthly but supplies will be replaced as needed. Staff will report missing items to the program director. Staff certified in first aid and in accordance with recommended procedures will use all first aid supplies and/or equipment. All staff will be first aid certified within six (6) months of employment. One staff member certified in CPR will be on the premises during all hours of operation.

PLAN FOR ADMINISTRATION OF MEDICATION

Prescription Medication

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

Non-prescription Medication

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

Topical Ointments and Sprays

- A. Topical ointments and sprays such as petroleum jelly, sunscreen, and bug spray, etc. will be administered to the child with written parental permission. The signed statement from the parent will be valid for one year and include a list of topical non-prescription medication.
- B. When topical ointments and sprays are applied to wounds, rashes, or broken skin, Henny Penny will follow its written procedure for nonprescription medication which includes the written order of the physician, which is valid for a year, and the Authorization for Medication form signed by the parent.

All Medications

- 1. The first dosage must be administered by the parent at home in case of an allergic reaction.
- 2. All medications must be given to the teacher directly by the parent.
- 3. All medications will stored in the office, out of the reach of children (in the right upper cabinet or on the refrigerator door shelf if refrigeration is necessary). All medications that are considered controlled substances must be locked and kept out of reach of children.

4. The Lead Teacher will be responsible for the administration of medication. In his/her absence, the Program Director will be responsible.
5. Henny Penny will maintain a written record of the administration of any medication (excluding topical ointments and sprays applied to normal skin) which will include the child's name, the time and date of each administration, the dosage, and the name of the staff person administering the medication. This completed record will become part of the child's file.
6. All unused medication will be returned to the parent.

PLAN FOR MILDLY ILL CHILDREN

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

PLAN FOR MEETING INDIVIDUAL CHILDREN'S SPECIFIC HEALTH NEEDS

During intake, parents will be asked to record any known allergies on the facesheet. The face sheet will be updated yearly. All allergies or other important medical information will be posted in each classroom. Allergies list will be updated as necessary - new children enroll, unknown allergies become known. All staff and substitutes will be kept informed by the Program Director so that children can be protected from exposure to foods, chemicals, pets or other materials to which they are allergic. The names of children with allergies that may be life threatening (ie - bee stings) will be posted in conspicuous locations with specific instructions if an occurrence were to happen.

EVACUATION PLANS

Emergency Evacuation Plans will be posted at all exits

During an emergency evacuation the Lead Teacher will be responsible for taking the attendance information and for leading the children out of the building. Assistant teachers and other staff will assist in the evacuation and check for stragglers.

The Program Director will make a visual inspection of each classroom before exiting the building.

All classrooms, once evacuated, will meet by the back fence and wait for the go ahead by the Program Director before reentering the building.

Henny Penny will maintain a daily attendance list that is current. The Director is responsible for signing children in and out of the center by arrival and departure times. The attendance list will be kept on the top of the cubbies and be readily accessible in case of an emergency evacuation.

The lead teacher will be responsible for taking the attendance list and for accounting for all of the children in the class once they are safely out of the building.

Emergency evacuation drills are conducted every other month at different times of the program day as determined by the Program Director.

Children and staff should practice using different evacuation routes so that the children and staff will be familiar with them.

The Program Director will maintain documentation of the date, time, and effectiveness of each drill in the Fire Drill Log. This documentation will be maintained for five years.

PROCEDURE FOR IDENTIFYING & REPORTING SUSPECTED CHILD ABUSE AND NEGLECT

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

The following procedure will be followed:

1. A staff member who suspects abuse or neglect must document her observations including the child's name, date, time, child's injuries, child's behavior, and any other pertinent information. The staff member will discuss this information with the Program Director.
2. The Program Director or the staff member with the assistance of the Program Director will make a verbal report to DSS, to be followed by a required written report 51A within 48 hours.
Department of Social Services Telephone # is 978-825-3800
3. If a staff member feels that an incident should be reported to DSS, and the Program Director disagrees, the staff member may report to DSS directly.
4. All concerns of suspected abuse and neglect that are reported to DSS will be communicated to the parents by the Program Director unless such a report is contra-indicated