The only full-day, year-round preschool with tuition assistance for the City of Alexandria’s working families.

2723 King Street
Alexandria, Virginia 22302
703-548-9255

www.alive-inc.org

Revised 09/28/2019
In response to growing concerns about poverty and hunger in Alexandria, ALIVE! was founded in 1969 as a grassroots movement led by faith-based organizations and private citizens. ALIVE! is the largest and oldest private social safety net for Alexandrians living in poverty, serving more than 14,000 individuals every year by focusing on Food, Shelter, Emergency Assistance and Education. Our partners and collaborators include 48 faith based organizations, government agencies, private industry, foundations, local public and private schools, non-profit organizations, and public and private citizens. Service delivery is only made possible with the support of over 900 volunteers annually.

ALIVE! CHILD DEVELOPMENT CENTER

The ALIVE! Child Development Center was founded in 1972 by a group of mothers from Alexandria who needed affordable childcare while they worked. For more than four decades, the ALIVE! CDC has provided a high quality, yet affordable early care and education program for the children of low-income working families. The CDC strives to prepare our children for academic and social success in kindergarten, as well as to help families locate resources, learn effective parenting skills, and sustain self-sufficiency.

ALIVE! CDC is proud to have been one of the first early childhood education programs in the City of Alexandria to be accredited through The National Association for The Education of Young Children (NAEYC) and continues to be awarded accreditation under the revised standards and criteria through January 2018. The Center is licensed through the Commonwealth of Virginia’s Department of Social Services and participates as an approved site for the Virginia Preschool Initiative (VPI) for at-risk four year old children. The center actively participates in the VA Quality program by obtaining high quality assessments through national quality rating standards.

This handbook has been prepared to provide families with important information about responsibilities, opportunities, and services offered by the ALIVE! Child Development Center.
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*Updated 09/28/2019*

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ALIVE! CDC PHILOSOPHY:

WHAT WE BELIEVE ABOUT CHILDREN

We believe that children learn best in a loving and nurturing environment through a developmentally appropriate program that encompasses the social, cognitive, emotional, physical, language, and creative growth of each child. While working on self-help skills and individual objectives as well as celebrating cultural diversity, each child has the opportunity to experience success and develop a positive self-esteem. We are dedicated to ensuring optimal learning experiences for all children through active exploration of their world while maintaining a safe, healthy, and appropriate environment.

ALIVE! CDC MISSION STATEMENT

It is the mission of the ALIVE! Child Development Center to provide high-quality yet affordable early care and education to the children of Alexandria’s low-income working families. Together with our families, we strive to ensure that each child is well-prepared to begin kindergarten. The ALIVE! CDC’s program focuses on providing a firm foundation in language and literacy, math and science, and social and emotional skills. We emphasize the importance of health, safety, and nutrition and offer art, music, movement, and sensory integration opportunities to enhance readiness.
ENROLLMENT INFORMATION

ALIVE! Child Development Center is open to children, ages three years through five years (not enrolled in kindergarten), of working families. Working families residing in the City of Alexandria whose children are eligible for the Virginia Preschool Initiative have priority for enrollment. To qualify for ALIVE! CDC’s Program, families must meet the City of Alexandria’s working or attending education-based coursework and training requirements for center-based care, complete the appropriate applications, and supply the required documents. To comply with state licensing requirements, all children must be completely toilet trained, independent with their toileting needs without adult assistance, and no longer using diapers and/or pull-ups.

HOW TO APPLY

To provide our families with affordable care, ALIVE! CDC offers a tuition assistance sliding-fee tuition program for those families who meet the established requirements. Parents may choose to opt-out of the sliding fee program, in which case they would pay the full tuition amount, as determined yearly by the CDC Committee. To be eligible to participate in this tuition assistance program, families MUST do the following:

1. First, be screened for the child care tuition subsidy by the Virginia Department of Human Services, 1900 Beauregard St, Suite 250, in Alexandria, phone: 703-746-5437. This screening can be accomplished either in person or by phone. Be sure to get the name of the case worker who assists you. Based on the information you give to the case worker, you will either be placed on the waiting list or informed that you do not meet the eligibility requirements for the child care fee subsidy.

2. Complete the Application for Tuition Assistance and submit all required documents. Applications are available from the CDC Program Administrator or Director, and must be submitted prior to scheduling the Family Orientation.

3. Complete the Enrollment Packet and attach all required documents.

4. Schedule and complete a Family Orientation that includes your child.
FAMILY ORIENTATION

ALIVE! CDC wants our families to have a smooth transition into our program. To assist in this process, we will arrange for you to attend a Family Orientation. Your child will visit his/her new classroom while you meet with the Director to review the enrollment paperwork and to discuss the parent handbook. You will then meet with our Family Support Worker to become acquainted with our support services and to schedule the first home visit.

If needed, we can arrange for a gradual introduction of your child to our center. Otherwise, your child may begin attending on the Monday after the Family Orientation has been completed. Bring the initial tuition payment on your child’s first day.

CHANGES IN ENROLLMENT STATUS

The City of Alexandria’s Child Care Subsidy caseworkers work closely with the CDC Director to ensure prompt payment of fees and co-pays. Any changes in a family’s fees or co-pays are reported to the CDC as well as to the parent. ALIVE! CDC is contractually required to collect the monthly co-pay as determined by the Department of Human Services (DHS). We must also abide by the eligibility dates determined by DHS. If a family’s eligibility for the City Subsidy ends, then the parent must make arrangements to begin to pay the full tuition, or to apply for the Tuition Assistance Program.

COMMUNICATION

Regular and respectful communication among parents, teachers, and support staff is essential to the success of our program’s goal to prepare children for kindergarten. ALIVE! CDC offers several ways for communication to happen.

Please Note: Adult cell phones are to be turned off during both arrival and pick-up times.

WHITE BOARD AND POSTED NOTICES

Each classroom has a whiteboard located near the sign-in sheet where messages of immediate interest to parents are written daily. In addition, notices of closings related to weather, upcoming holidays, or staff development days are posted at the main entrance, on the classroom doors, and on the office door. Please be sure to check these sites daily.
CONFIDENTIALITY

Families are assured that all employees of the ALIVE! CDC are committed to protecting all information that is of a confidential nature. During orientation, families receive an explanation of the various ways in which our program protects private information. Any sharing of information must be preceded by a signed release by the parent(s). Children’s files, including results of screenings and assessments, are kept in locked cabinets in both the CDC office and in the FSW office. In each classroom, the children’s portfolios, which may include copies of assessment/screening results, are maintained in locked file boxes. All classrooms are locked at the end of each school day. After leaving our program, children’s files are maintained in locked cabinets for a period of three years, after which they are shredded and appropriately discarded for security of confidential information.

ORDER OF AUTHORITY

Parents are always welcome to visit our program at any time, and we encourage you to visit in your child’s classroom whenever possible. Occasionally, parents may have concerns about a situation they observe. The first and best way to handle such a concern, is to speak, as soon as is practical, with the teacher directly involved, who can immediately offer an explanation or reassurance. It is of critical importance to your child’s success in school that you work to develop a positive and productive relationship with your child’s teacher(s). Trust between the teacher and parent is essential. (The one exception to this policy is if a parent witnesses possible child neglect or abuse; such a concern MUST be reported immediately to the Director or designated administrator.)

If you have spoken with the teacher, and still have a concern, then please speak directly with the Director, who will then review the concern, and if needed and/or requested, schedule a meeting to discuss and resolve the concern. If this meeting fails to resolve the concern, then the parent should contact the Executive Director of ALIVE! at 703-837-9320 to discuss the concern.

DAILY ARRIVAL

PLEASE NOTE: Custodial parents retain the right to drop off and pick up their child. ANY other arrangement requires that ALIVE! CDC have a copy of the court order on file.

The ALIVE! CDC opens daily at 6:45 a.m. The “official” time will be determined by the wall clock mounted at the CDC entrance. All children must arrive no later
than 9:00 am each morning. Arrival after 9:00, without a written excuse from a medical provider or notification of appointment prior to arrival, may result in your child being sent home for the day. Because promptness and reliability in attendance are very important to a child’s success in school, ALIVE! CDC strives to help our families develop good attendance habits early in the child’s school experience.

The way your child’s school day begins directly influences his/her ability to learn and participate successfully in the planned activities. Please plan your arrival routine so that there is sufficient time for your child to transition into the classroom.

This important transition includes:
* locating the cubby and placing clothing and supplies in it;
* taking your child to the bathroom and ensuring that his/her hands are washed immediately upon entering the classroom;
* escorting your child into the classroom and turning your child over to a teacher;
* informing the teacher of any specific concerns, especially related to eating, sleeping, or events that may have occurred while your child was out of the center;
* completing the daily sign-in sheet, especially your phone contact and designated pick-up person;
* reassuring your child that you will return at the end of the day.

**DAILY PICK-UP**

Your child’s tuition and-or subsidy payments cover only authorized hours of care per day. Exact hours of care, not to exceed 10 hrs, will be authorized based on the parent’s work schedule and will be determined during Orientation. While we recognize the considerable traffic challenges we all face here in the Washington, DC metropolitan area, it is essential to remember that young children should not routinely remain at the Center for more than 10 hours a day because it is detrimental to their development. Parents whose work schedule/location require a greater than 10 hour day should arrange for their child to be picked up by another responsible adult.

The well-being and safety of your child is our number priority and if someone else that is on the authorized pick up list will be coming for your child you must let us know prior to them coming.
All those that are picking up the children must be at least 18 years old and provide proof of identity.

Occasionally, a parent will be late for pick-up. When this situation arises, it is essential that you contact the Center by phone as soon as you become aware that you will arrive later than the time indicated on the sign-in sheet. Children have an “inner clock” that tells them when to expect their parent. If the parent hasn’t arrived by that time, the child becomes anxious and worried. When staff have been informed of the parent’s lateness, they can more easily reassure the child that all is well. (Please be advised that late fees apply even when you call the Center.)

When a parent arrives late for pick-up, he/she will receive a copy of the form that details the amount of the late fee due. This fee is due the next business day. Late payment fees are discussed further on page 15.

WEEKLY ACTIVITY NOTES

Weekly activity notes are provided and lesson plans are posted on the classroom’s Parent Board

PARENT-TEACHER CONFERENCES

Conferences are intended to help keep parents informed concerning their child’s academic, social, and physical progress, and to provide an opportunity to share information and concerns and to have questions answered. Conferences between teachers and parents are regularly scheduled twice a year, in January and June. Please consult your School Calendar for the exact dates. To accommodate parents’ work schedules, parents are offered time slots on two separate days, between the hours of 3:00 p.m. and 5:30 p.m. A sign-up sheet will be provided in the classroom two weeks before the scheduled conference time. Of course, if you cannot come during the scheduled conference times, you can schedule another time by contacting your child’s teacher.

During the Spring Conference, those parents with children transitioning to kindergarten in the fall will be asked to sign a Consent for Transfer of Records form to allow ALIVE! to provide the new school with important information about their child. Parents will be provided with copies of all records that will be sent to their child’s new school.
FAMILY CONTACT INFORMATION

Before your child begins to attend the ALIVE! CDC, we must have on file ACCURATE and CURRENT contact information. We must ALWAYS be able to contact you (or your designated pick-up person) directly by telephone. If you provide your own personal cell phone number as the contact for the day, then that cell phone must be set to either ring or vibrate. If you do not have immediate access to your cell phone, then you must give us an alternate number (such as your supervisor or the company’s office manager) where someone can get in touch with you right away. If the contact information you provide changes in any way, you MUST inform us of the changes IMMEDIATELY. In the case of illness or an emergency, we will make every attempt to contact you, either directly through the phone contact information you have given us, or by contacting the individuals that you have designed as your emergency contacts.

CHILDREN WITH SPECIAL LEARNING NEEDS

ALIVE! CDC welcomes children with special needs and works hard to fully implement children’s Individualized Family Service Plan (IFSP) and Individualized Education Program (IEP). The presence of an existing IFSP/IEP will be identified as part of the enrollment process. ALIVE! CDC will provide full day early childhood care and education, and support the on-site resource services and accommodations written in the IFSP/IEP. If the IFSP/IEP is written for early childhood special needs services to be provided in another setting, such as the Alexandria City Public Schools (ACPS), ALIVE! CDC is not able to accommodate partial day enrollment.

Prior to the child’s first day of attendance, the Director will arrange for a meeting with the child’s family, IFSP/IEP Case Manager, ALIVE! CDC teachers, the Family Support Worker, and any other persons the family requests, to discuss implementation of the IFSP/IEP at ALIVE! CDC. This will include assignment of responsibilities for the teachers, Family Support Worker, and IFSP/IEP service providers ensuring support for all on-site resource services and implementation of accommodations. A time for an initial follow-up meeting will also be discussed.

For those children whose special needs are identified after enrolling in our program, a similar procedure will be conducted. ALIVE! CDC staff will assist the family in navigating the Child Find process. With parental consent, ALIVE! CDC will assist the family in sharing screening results, assessments, observations, and/or behavior plans with the Child Find team. Parents may request that CDC staff attend the Child Find screening, child study meeting, evaluation
appointments, eligibility meeting, and IEP meeting. Necessary staffing arrangements will be made for ALIVE! CDC staff to attend. Once the IEP has been developed, an additional meeting will be scheduled to discuss the implementation of on-site resource services and accommodations at ALIVE! CDC. If the IEP team determines that special needs services must be provided in a special education classroom, ALIVE! CDC will support the child and family until the start of enrollment in off-site services.

GENERAL INFORMATION

During the course of its more than four decades of service, the ALIVE! CDC has developed many policies and procedures to assist in providing a smoothly-operating, caring, and welcoming program. The following information details the most helpful of these policies and procedures.

NON-DISCRIMINATION POLICY

*USDA Statement of Non-Discrimination:
“In accordance with Federal law and the United States Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.”

*Complaint Procedures: To file a complaint of discrimination, write to:
USDA
Director, Office of Civil Rights
Room 326-W Whitten Building
1400 Independence Avenue, SW
Washington, DC  20250-9410
Phone: 202-720-5964 (voice and TDD)
USDA is an equal opportunity employer

EMERGENCY PREPAREDNESS PLAN

In conjunction with the City of Alexandria Fire Department, ALIVE! CDC has developed an Emergency Preparedness Plan, a copy of which is available in the CDC office.

Sheltering in place will take place in choir room under church sanctuary, downstairs in the CDC hallway, or in the classrooms, depending on the scenario. If the emergency is an Intruder in the building the children will shelter in their classroom with staff, classrooms doors and windows will be locked, blinds drawn and children secured away from windows. We have gathered food, water, first aid materials and related supplies to care for the children for several days.
Emergency “shelter in place” drills are practiced with the children throughout the school year.

Should a situation arise in which there is a need to implement this plan, we will make every attempt to contact you, including a message with the REMIND messaging system, regarding our situation and reunification plans for your children with the information you have provided. *(This is another example of the importance of keeping your contact information current.)*

Should all forms of communication be rendered useless or if roads become clogged, please be rest assured that your child will be well-taken care of by our CDC staff. Our plan includes food, water, resting space, activities for the children with the CDC staff. The City of Alexandria Police and Fire will be aware of our location.

**BUILDING SECURITY**

ALIVE! CDC has a secured door system to help ensure the safety of our children. Entrance to the Center can be gained in two ways: through the use of an activated key fob (assigned to CDC staff and select ALIVE! volunteers) and through use of the door buzzer/video camera system. When the buzzer sounds, a staff member views the person at the door and asks for identification through the intercom. Only individuals who have business with the ALIVE! CDC (parents, volunteers, business persons) are admitted. When in doubt as to an individual’s identity, staff will make a visual identification through the secured door before admitting the person. Parents are advised to NOT allow another individual to enter the facility at the same time as they are entering, unless they know the identity of the other person.

**ALIVE! CDC CLOSINGS**

The Center will be closed in observance of the following holidays:

- New Year’s Day
- Martin Luther King, Jr. Day
- President’s Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving Day
- Friday after Thanksgiving
- Christmas Day and one additional day before or after
Specific dates for holiday closings vary from year to year. A calendar will be provided to parents in September, or upon enrollment, which includes information on holiday closings. In addition, our program is closed for professional development annually during the week prior to Labor Day, as well as for 4 separate days during the school year. Please REVIEW the School Year Calendar for the exact dates.

WEATHER CLOSINGS

Full Day Closings:
ALIVE! CDC follows the same inclement weather closings as the Alexandria City Public Schools. A message will be sent through the REMIND messaging. Please listen to the radio or television, or check online for these announcements. If the public schools are on vacation during inclement weather, ALIVE! CDC will follow the closing schedule of the Alexandria City Government.

Delayed Openings:
If the Alexandria City Public Schools have a delayed opening, ALIVE! CDC will open at 10:00 a.m., regardless of when the City schools open. Children will not be admitted prior to 10:00 a.m.

Early Closing:
If dangerous weather develops during the day, ALIVE! CDC will follow the early closing decision of the Alexandria City Public Schools. As soon as ALIVE! receives this notification, parents will be contacted via the REMIND messaging system and given a deadline, usually one hour, by which to pick up their child. Failure to pick up the child by the designated time will result in a late-pick-up-fee charge that must be paid by the end of that week.

FINANCIAL INFORMATION

ALIVE! CDC is blessed to have funding from a variety of sources, including, state, federal, and local subsidies, grants, donations, and parent fees. Each of these is vital to our continuing successful operation. However, these funds do not cover the full cost of each child’s care. Timely payment of parental co-pays and tuition fees help to fill this “gap” and are a requirement for participation in our program.
Virginia Preschool Initiative (VPI)

ALIVE! CDC is an approved participating program with VPI during the school year. The Commonwealth of Virginia has legislated preschool services available for low income 4 year old children attending select early childhood programs. The Virginia Legislature determines which children are eligible for VPI each school year. VPI programs begin in September and end the following June. ALIVE! Preschool parents enrolled in VPI must decide if their child will continue through the summer months must pay weekly tuition. The tuition is determined by ALIVE!’s Tuition Assistance Program based upon gross income and number of people in the household.

If your child is potentially eligible for this program, you will be contacted by the Director to complete an application for VPI. The basic requirements for participation in the VPI program include limited family income and that the child will be four years old no later than September 30th of the current school year. This process of application begins in early May.

TUITION/PARENTAL CO-PAY

Parents who are not eligible for the City of Alexandria Child Care Assistance will pay a weekly, bi-weekly, or monthly tuition. Parents may apply to be considered for ALIVE!’s Tuition Assistance based on gross income and the number of people in the household. If you wish to apply for this tuition option, you must fulfill several requirements. Please contact the Program Administrator to begin the process.

Tuition is due on the first day of the school week, usually Monday. Payments are considered to be late as of noon on Wednesday of the week. If tuition is more than one month late, the parent must meet with the Director immediately to work out a payment plan to enable the family to get “back on track” for tuition payments. Failure to meet with the Director or to fulfill the payment plan can result in dismissal of your child.

Parents who receive the Department of Community and Human Services (DCHS) Child Care Assistance (Child Care Subsidy) will pay a monthly co-pay, which is due no later than the fifth of each month.

If you are experiencing financial difficulty, please do not hesitate to contact the Director IMMEDIATELY, before you get behind in tuition payments. The sooner we know about your difficulty, the sooner we can begin to assist you to develop a plan for repayment.
PAYMENT

There are two options for payment: check or money order. Payment should be placed in the white tuition box on the wall located in the CDC office. Please write your child’s name on your check or money order. Please do not hand the payment to any staff member.

Payments are processed weekly. Each family’s financial account is updated, and written receipts are prepared. At least monthly, parents are given a copy of their current statement. If you believe an error has been made, please see the Program Administrator, as soon as possible, so that it can be corrected.

RETURNED CHECKS

Parents paying by check are responsible for all fees related to having a check returned by the bank. If your check is returned for “non-sufficient funds” ordinarily you will be the first to receive written notice from the bank. If so, please do not wait for ALIVE! staff to contact you about this. Please see the Director immediately to make arrangements for payment. If a check is returned a second time, then the Director may require all future payments to be made by money order.

LATE PICK-UP FEES

When a child is picked up after the 5:45 p.m. closing time, a late fee will be charged. The CDC sets its office clock by computer time, and this is the “official” time recorder.

The late fee is calculated as follows: $15.00 for any portion of the first five minutes the parent is late, then $1.00 per minute for each subsequent minute. The parent must sign the late fee form and will receive a copy. The fee is due (check or money order) no later than the last day of that week.

Please understand that late pick up of your child requires the teaching staff to work beyond their scheduled time and late for their family.
HEALTH AND SAFETY INFORMATION

ALIVE! CDC constantly strives to ensure the safety and health of each of the children in our care. We have developed policies and procedures to assist us in this important responsibility. Parents have an essential role in ensuring that our center is a safe and healthy place. So that your child can be safe and comfortably participate in all activities, and not a distraction, we ask the following:

- Children should wear comfortable clothing that will allow for active participation in program activities
- Only sneakers or closed shoes should be worn
- Because jewelry is frequently the source of conflicts, injuries, and is easily lost or misplaced, we ask that it not be worn at ALIVE! CDC. This includes bracelets, chains, earrings that extend beyond the ear or a loop, small beads that are lose or easily pulled off, bracelets, watches, necklaces should be worn under clothing and other fashion accessories are unsafe. The only exceptions are emergency medical information or child identification bracelets.

DAILY HEALTH OBSERVATION

Each day as children arrive, staff will complete a short health observation, in which they evaluate each child’s appearance, movement and attire. If there is a concern, the teacher will ask you for information. Whenever a child presents with any of the symptoms that appear on page 18, he/she will not be admitted. Parents should report any incidents that might affect the child’s behavior for that day, such as not enough sleep, physical complaints, or things that happened at home.

One concern that is of particular importance for parents to report is the presence of bumps, bruises, and/or skin abrasions. Children often receive these types of minor injuries during their daily activities at home. An example might be that in the course of playing with siblings, the child receives a scrape on her side. Please be sure to tell your child’s teacher about any such mark, as staff are required to report such marks.
HEALTH SCREENINGS

Each year, children receive vision, dental, and hearing screenings during the month of October. These screenings are provided at no cost to the parent. Each parent will receive a brief report describing the results of each screening. If follow-up care is recommended, a list of appropriate medical providers will be made available by our Family Support Worker. Please consult the School Year Calendar, distributed in the beginning of September, for the specific screening dates.

GROSS MOTOR PLAY

Regular opportunities for gross motor play are essential to children’s successful learning and development. ALIVE! CDC offers a variety of age-appropriate equipment and activities on our certified playground. During inclement or dangerous weather, children play in the Fellowship Hall, which is rearranged with indoor play activities with appropriate safety. Because outdoor play is essential, children should come to school dressed appropriately for outdoor play. Clothing that doesn’t restrict their movement, concern for this includes, in cold weather: closed-toes shoes, coats with hoods, a hat, mittens, and long pants. In warm weather, children should wear closed-toed shoes, and may need a sweater or light jacket.

NAP TIME

Children will be offered the opportunity to rest each day, from 1 p.m. until 2:30 p.m. Each child will be provided a cot (labeled with his/her name) covered with a sheet and a blanket. Sheets and blankets are laundered weekly in a commercial laundry. Children may bring a special small blanket or pillow or soft stuffed animal (no longer than 6 inches) from home to sleep with. During the scheduled rest time, the room will be darkened and soft music played. Children who wake early will be allowed to look at books or play quietly with soft toys. Children with difficulty with sleeping or relaxing will be offered individual assistance.

ILLNESS

If your child develops the following symptoms while at home, please do not bring him/her to the center:

- Fever of 100 degrees or higher
- Diarrhea or constipation
Vomiting
Excessive coughing
Rashes or sores
Discharge from ears
Redness and/or discharge from eyes
Complaints of being in pain
Sluggishness

Children must be free of fever, diarrhea, and/or vomiting for twenty-four hours before returning to school. Rashes, sores, and eye- or ear- ailments require a doctor’s statement that the child may return to the center.

If your child develops any of the above symptoms while at school, you will be called. To ensure the health of the other children, your child will be separated from the other children, brought to the FSW’s office or the main office, and must be picked up within an hour of your being notified. (This is another example of why it is so important to keep your contact information up to date.) If your child or any member of your family develops a reportable communicable disease, as determined by your medical provider, then you MUST report this to the Center by calling 703-548-9255. The Center is required to notify all parents of possible exposure, the symptoms, and incubation time. Children may not return until the symptoms are gone.

MEDICATION ADMINISTRATION

Only medication that has been properly authorized can be administered at the center. This applies to both prescription and over-the-counter medicines. Over the counter ointments, pills, liquids, cream/lotion, lip balm, cough/throat drops and similar items are included in this policy. Medication can only be administered by a staff member who is currently certified by the Commonwealth of Virginia in Medication Administration. Prior to administering any medication, prescribed or Over the Counter, to a child, the parent must complete the Medication Authorization Form, available from your child’s teacher.

All medications, prescribed or Over the Counter, will be kept in a locked box in the CDC office, or if needed, in a locked box in the CDC refrigerator.

The medication authorization form must be completed by the child’s medical provider and returned to the CDC office before any medicine can be given. The form may be faxed to 703-548-0082. Non-prescription medications require an authorization form to be completed first by the parent. Such authorization must be resubmitted by the parent every ten (10) days.
Medication must be in the original container issued by the pharmacy that contains the original label. Expired medication will not be administered, and the medication will be returned to the parent when the authorization period expires. The label must include:

* name of medication
* physician’s name and phone number
* dosage and specific times to be given (NOT “give as needed”)
* child’s name
* expiration date

The staff administering the medication will enter the required information on the “Medication Log” Form that is maintained in the CDC office. Parents should review this log at pick-up time, and may receive a copy if desired. Parents will be notified immediately of any errors in administration or of any adverse reactions experienced by the child. For more information, please see the Medication Administration Policy in appendix IV.

INSECT REPELLENT AND SUNSCREEN ADMINISTRATION

Both Insect Repellent and Sunscreen products require the completion of a separate authorization form before these products can be applied. A new authorization form must be completed every year. Insect Repellent will only be applied when the Alexandria Health Department deems it necessary, or with a physician’s written order.

ALIVE! CDC will provide and apply both Insect Repellent and Sunscreen, unless the parent provides a medical provider's statement for alternative products.

INJURIES

ALIVE! CDC staff take every precaution to ensure the safety of the children while in our care. Should your child be injured while at our center, the staff will, first, tend to the injury, providing loving care that might include washing the injured area with water, bandaging the area, applying an ice pack, and offering comfort. Secondly, staff will complete a written incident report that will be reviewed and signed the Director. When the child is picked up, that person will sign the report; it will then be copied, and the copy given to the pick-up person. The original will be maintained in the CDC’s file.

If the injury requires more than the above attention, the parent will be called immediately.
If there is any indication that the injury may be serious, staff will administer first aid to the extent that they are trained. Emergency medical care will be summoned, and these professionals will determine whether or not to transport the child to the hospital. Should this be needed, an ALIVE! staff member, usually the child’s teacher, will accompany the child, while the Director or designee continue to attempt to contact the parent or other emergency contact. When the parent/other contact has been reached and informed of the situation, then the Director or designee will proceed to the hospital to join the child and teacher.

NUTRITION INFORMATION

Meals and Snacks

ALIVE! CDC provides daily meals and snacks to all enrolled children through the services of a contract caterer. All foods for meals and snacks are prepared, served, and stored in accordance with the Virginia State Department of Health Child and Adult Care Food Program (CACFP) guidelines. A total of three meals/snacks are served daily as follows:

* Breakfast served at 9:00 a.m.
* Lunch served at 12:00 noon
* Afternoon Snack served at 2:45 p.m.

Please do NOT bring any food (including candy, gum, or drinks) to the Center, or allow your child to enter with any food or drink items. If your child must have something to eat, please ensure that he/she has finished consuming the item before entering the Center.

At pick-up time, please do not give your child any food items until after he/she has been properly secured in your car. If you are having difficulty with your child’s behavior during arrival and/or departure, please speak with your child’s classroom teachers, who can help you solve these problems without using food.

Staff sit with the children during meals and snacks and engage in meaningful conversations related to the child’s home activities, upcoming events, and recent class activities.

Parents are always welcome to join us for any meal or snack. Please let the teacher know ahead of time so that she can ensure a sufficient amount of food and supplies.

Menus are posted each month in each classroom and on the Parent Bulletin Board outside the CDC office. Copies of the menus are also sent home to each family at the beginning of the month.
Special Nutritional Needs

The family of a child with special nutrition needs and/or food allergies needs to submit an individualized care plan (CACFP Medical Substitution Form: Statement for Special Diet Prescription and Food Allergy Action Plan) completed by the health care provider and placed in the child’s file. This form is available from the Director. With the parent’s consent, information about the child’s special nutrition needs will be posted in the CDC kitchen as well as in the child’s classroom.

Birthdays

Birthdays are very special occasions, and ALIVE! CDC wants to help celebrate your child’s special day.

Please note: Do NOT bring latex or rubberized balloons, as these present a choking hazard when they break. An inflated mylar balloon is acceptable. Please see the Director if you have questions about balloons.

Parents are welcome to provide a special afternoon snack for their child’s class. Please keep the food simple: a small cupcake, some sliced fruit, or a decorated cookie along with 100% fruit juice are popular items. Any food provided must have been purchased in a grocery store or bakery, and must be in its original, unopened container. Parents, and other family members, are welcome to join us during birthday snack time. Costumed characters are not to be a part of the birthday celebration. Please inform the teacher of your birthday celebration plans ahead of time.

Cooking Activities

Nutrition education is an important part of our curriculum, and cooking activities are a great way to help children learn about new foods. Our teachers regularly plan cooking activities, and parents are welcome to join in the fun.

CURRICULUM AND ASSESSMENT

Please see Appendix I for a complete review of the ALIVE! CDC curriculum and assessment processes for all our children.

PARENT—SCHOOL COLLABORATION

In order to promote optimal learning and development in each child, ALIVE! CDC is committed to establishing and maintaining collaborative relationships with all the families whom we serve.
There are several ways in which we seek to ensure this collaboration, with the most important discussed below.

FIELD TRIPS AND COMMUNITY VISITORS

Throughout the year, ALIVE! CDC provides opportunities for our children to experience new and different environments. We take trips to places such as museums as well as invite community members to share programs with us, such as puppet shows. Parents are always welcome to join us for all such events. Parents must sign up to participate and admission fees, if required, must be paid by the parent prior to the event.

Permission forms must be completed for each child before the day of the event. Children must be at school by the designated time and must be dressed appropriately.

If you arrive at the CDC after the bus has departed for the trip, you may transport your child to the site of the field trip, and make contact with staff. You MUST sign your child in on the appropriate form before staff can assume responsibility for your child. If you are unable to locate a CDC staff member when you arrive, your child cannot be left at the site, under any circumstances. You are responsible for your child.

While on a field trip, ALIVE! CDC staff always bring a fully-equipped first aid kit, medication (as needed) for individual children, emergency contact information for each child, and a cell phone to call for help if necessary. The contracted bus company arranges for alternate transportation if such a problem develops during the trip.

Prior to departure from the Center, and again before leaving the site of the field trip, the Director or Designee verifies the presence of each child, as well as the adult who is responsible for that child.

PARENT CIRCLE MEETINGS

ALIVE!’s Family Support Worker (FSW) assists our parent group in setting up meetings on topics of interest to our families. Parent Circle Meetings are conducted monthly, September through June, and are listed in the annual school calendar for an evening meeting 5:30pm to 6:45 p.m. ALIVE! provides free childcare and free dinner (for both children and parents). Parents MUST sign up for these meetings no later than the morning of the meeting day. The sign-up sheet will be located in the hallway under the Welcome Board.
Parents who have NOT signed up beforehand, and who arrive after 5:45 p.m. to pick up their child, will have a late fee assessed, even if they decide then to stay for the meeting. These meetings are a wonderful way to get to know other families as well as obtain valuable information about community resources and other topics of interest, such as budgeting, at-home literacy activities, and transitioning to kindergarten. Our FSW always welcomes parent ideas for meeting topics.

FAMILY CELEBRATIONS

Throughout the year, ALIVE! CDC provides several opportunities for our families to meet and celebrate together. Opportunities include: a Multicultural Festival, and a Family Holiday Gathering. Families and Staff share arts and crafts, food, and games in ways that promote cultural appreciation and togetherness.

PARENT CDC COMMITTEE REPRESENTATIVE

ALIVE! CDC has an advisory committee composed of volunteers who are interested in assisting our program’s growth and development. One of the positions on this committee is that of a parent representative. CDC Committee meetings occur monthly typically from 3-4:30 p.m. The parent representative serves for one year, presents items of interest and/or concern to our parents, and works with the other Committee members to resolve problems and positively promote our program. If you are interested in being the parent representative, please speak with the Director.

PARENT VOLUNTEERS

ALIVE! CDC welcomes parent volunteers throughout our program. As part of the enrollment and orientation process, parents are invited to share special cultural practices, such as food, crafts, games, and music as well as to assist in celebrating specific holidays. Parents also can volunteer to read stories, help with cooking and art activities, and join us for lunch or snack. There are also opportunities to help maintain our facility, such as painting, window washing, and sorting and organizing our storage areas. Please let your child’s teacher know if you would like to assist in these or in other ways.
DUAL LANGUAGE FAMILIES

ALIVE! CDC is fortunate to be able to welcome families from many different places. We celebrate the diversity of our community and promote learning that reflects this value.
ALIVE! currently has staff members who speak the following language: Amharic. Families who want, need, or prefer to participate in conferences and other meetings using their home language are welcome to do so. Just let us know and we will arrange to have a translator present. Families whose home language is other than those listed above can also receive the assistance of an interpreter.

FAMILY SUPPORT WORKER SERVICES

The ALIVE! CDC is fortunate to have the services of a full-time family support worker on our staff. The family support worker offers many and varied services to support families in preparing their children for success in kindergarten and beyond.
Among the services available are:
* referrals to community services;
* assistance with food, rent, utilities, clothing, and housewares;
* help locating and obtaining adult education opportunities;
* information on community-based family services;
* individual and group counseling;
* play therapy for enrolled children;
* transition services for children and families entering kindergarten
* facilitation of monthly Parent Circle Meetings
* confidentiality is ensured.

If you have any questions or concerns, please do not hesitate to contact our Family Support Worker (FSW) at 703-548-5254.
OTHER ALIVE! RESOURCES

For more than four decades, ALIVE! Inc. has been providing a range of social services to Alexandria’s low-income working families. Four of these programs are described below. Please note that these services are only available to CDC families by referral through our Family Support Worker. If you would like to apply for any of these services, please speak with the FSW.

ALIVE! Inc.’s resources include:

FAMILY EMERGENCY PROGRAM
$500.00 limit for assistance;
City of Alexandria residents only;
Emergency funds for rent, essential utilities, medical, and other critical expenses;
Must be referred by Social Worker

FOOD DELIVERY PROGRAM
Three-day emergency supply of canned and packages food, bread, and fresh eggs;
City of Alexandria residents only;
Families must meet USDA income guidelines;
Eligibility is once every 30 days;
Must be referred by Social Worker

LAST SATURDAY FOOD DISTRIBUTION PROGRAM
Fresh produce and surplus staple food (3-4 day supply) available on the last Saturday of the month;
City of Alexandria residents only;
Families must meet USDA income guidelines

FURNITURE PROGRAM
Donated furniture for families in need;
Pick-up and delivery on Saturday mornings;
City of Alexandria residents only;
Must be referred by Social Worker
APPENDIX: I

Curriculum and Assessment
The ALIVE! CDC uses curriculum and assessment materials that incorporate the latest theory and research in best practices in child development and early learning. The overall framework for this is provided by The Creative Curriculum, which balances both teacher-directed and child-initiated activities with a emphasis on knowing and responding to each child’s learning style and identifying and building on her/his strengths, interests, and needs. Al’s Pals: Kids Making Healthy Choices is a resiliency-based curriculum that develops the personal, social, and emotional skills essential to a child’s success in kindergarten. Lessons are taught twice a week using a friendly puppet, Al, who serves as a positive role model for both his puppet pals Ty and Keisha as well as the children. The lessons are rooted in resilience-specific learning objectives and include narratives, puppet scripts, songs, and activities that use real-life early childhood experiences. In addition to these two curriculums, ALIVE! also uses components of two other early childhood curriculums: R Is For Rainbow: Developing Young Children’s Thinking Skills Through The Alphabet, Handwriting Without Tears, and Color Me Healthy, each of which incorporate multisensory materials and activities to enhance academic readiness.

Assessment of children’s progress and development is on-going and systematic and uses both formal and informal approaches. All assessment information is shared with families in culturally sensitive ways. Results of assessments are used to benefit the children by providing information for decision-making about children, teaching, and program improvement. Informal assessment occurs through the use of the High Scope COR Advantage instrument, an anecdotal-based tool that provides systematic assessment of young children’s knowledge and abilities in many areas of development. A separate record is maintained for each child, with observational recordings entered and evaluated weekly. Information gathered using this instrument is used to plan weekly learning activities for both individuals and small groups. The Preschool and Kindergarten Behavior Scales are used in conjunction with the Al’s Pals curriculum. This is a checklist, completed by the teachers, that provides a functional appraisal of each child’s social skills development. Information gathered in the Fall before beginning the Al’s Pals lessons is used by our Family Support Worker to identify and serve children in need of specific skill development. Fall checklist results are also compared with the information gathered in the Spring, using the same checklist, to measure each child’s social skills growth during the school year. A third assessment instrument is used to evaluate the language and literacy skill development. The Phonological Awareness Literacy Screening (PALS-PreK) measures preschoolers developing knowledge of important literacy-related skills and offers guidance to teachers for
meeting children’s individual literacy needs. Screening is conducted both in the Fall and again in the Spring.

A Math Skills Checklist, developed by the ALIVE! CDC Director, is completed twice a year to track each child’s growth in concepts related to academic readiness.

Developmental Screening is conducted in the center on each child, within three months of enrollment. Children aged three years and older are screened by the family Support Worker using the Early Screening Inventory-Revised. For those children younger than three years of age, The Family Support Worker completes the Ages and Stages Questionnaire with the parents, during the initial home visit.

Results of the screening are shared with parents, and referrals made to the local Child Find office, as needed. The Family Support Worker assists the parents in completing the referral.

For those children whose screening indicates possible motor and/or sensory concerns, referral is made to ALIVE!’s contracted Occupational Therapy Assistant, who develops and implements appropriate activities to be used in the classroom, at home, and by the Assistant during weekly sessions.
APPENDIX: II

BUILDING AND MAINTAINING POSITIVE RELATIONSHIPS

ALIVE! CDC actively promotes positive relationships among all children and adults to encourage each child’s sense of individual worth and belonging as part of a community and to foster each child’s ability to contribute as a responsible community member.

CONTINUITY OF CARE AND PRIMARY CAREGIVERS

ALIVE! CDC classes have consistent teachers and teacher assistants for their school year. We recognize that primary caregivers represent continuity, dependable relationships that help children build secure attachments and build a sense of security and trust. The teachers work closely with each child to guide their development and exploration of learning opportunities throughout the day. The children and teachers stay together throughout the school year. We believe this promotes a secure attachment with all the children and teaching staff and helps the child to explore all learning experiences. The class becomes a group of many different relationships that encourages expanding social learning along with their developmental growth. Each teacher in the class has a small group of children that they spend time with each day and observe their learning experiences. Our developmental assessment of Child Observation Record (COR) utilizes the individual relationship between teacher and child to ensure reliable understanding of your child’s behavior reflecting knowledge and skills in the areas of approaches to learning; social and emotional development; physical development and health; communication, language, and literacy; cognitive development; and creative arts.

CHILD GUIDANCE AND DISCIPLINE POLICY

The twin goals of our guidance and discipline policy are to assist children in developing their ability to self-regulate, and to help children learn how to interact meaningfully and positively with others, both peers and adults. Staff interactions with children are intended to encourage each child to be fair, respect people and property, and assume personal responsibility, in a manner and at a level that takes individual and developmental needs into account.
Positive discipline teaches character as well as self-control. All staff will use only positive guidance techniques in order to help children achieve these twin goals of self-regulation and meaningful, positive interaction with others.

Positive guidance techniques include:
* arranging and rearranging the classroom to encourage the development of positive interactions;
* planning engaging activities, based on direct observation of children’s needs, interests, and skills;
* scheduling the day, including the use of effective transitions, in a manner that meets children’s needs and abilities;
* assisting children to set and learn important rules of group behavior and responsibility, appropriate for their age and developmental level;
* modeling, where the adult demonstrates appropriate behavior through her/his own actions;
* shaping expected behavior, both verbally and through gestures;
* redirecting children to more acceptable activities;
* establishing clear limits as to what behavior is acceptable;
* intervening swiftly, purposefully, and kindly to enforce consequences for unacceptable and harmful behavior.

Prohibited practices include, but are not limited to:
* corporal punishment of any kind, including hitting, spanking, slapping, shaking, pinching, hair-pulling, grabbing, binding, tying or any other action that produces physical pain;
* withdrawal, or the threat of withdrawal of food, rest, toileting, or regularly scheduled play;
* any form of psychological abuse or coercion, such as shaming, intimidating, threatening, or demeaning;
* the use of abusive, profane, or derogatory language or tone of voice.

**TIME OUT:** The technique of time-out is to be used *ONLY* as a last resort, for very brief periods (up to three or four minutes), and when the child is physically harming another, or is in danger of harming himself/herself. When used infrequently, time-out may give a specific child the opportunity to calm down and cool off after a particularly frustrating situation. But when used often, or in a manner other than as described above, it may not only be ineffectual, but it may actually be damaging to the child, as it then is a form of punishment.

**RESOURCES:** Effective guidance and discipline requires that staff work together as a team. Please consult the Director and/or the Family Support Worker for assistance.
CHALLENGING BEHAVIOR CONCERNS

When a child presents persistent, serious, challenging behaviors, the ALIVE! CDC teachers, Family Support Worker and Director will work, in conjunction with other professionals, with the family as a team to develop and implement an individualized plan that supports the child’s inclusion and success.

The plan will:
- identify the contextual factors that predict the serious behaviors;
- respond to the behaviors in a manner that promotes safety, is calm and respectful, and informs the child of what is acceptable behavior;
- promote self-regulation

Once the plan has been implemented, it will be monitored and followed up with subsequent meetings to discuss progress and make adjustments as needed.

Parent and family participation is essential for the child to begin to regulate their behavior and become a happy, engaged child in the classroom with the other children.

If a child continues to present the same level of challenging behaviors, after intervention is provided, that jeopardizes the safety and well-being of the children and staff in the classroom, the FSW or Director may call the parent for the child to be picked up from school. On-going communication, between the teachers, parents and the Family Support Worker, regarding the child’s self-regulation will be a priority. It is essential that the parents are engaged in the intervention plan. Safety and well-being of all children within our classrooms remains a priority of our center.

SUSPECTED NEGLECT AND ABUSE

All employees of the ALIVE! CDC have been trained to recognize signs of possible child abuse and neglect and are mandated by Virginia State Law to report suspected instances of child neglect, abuse, or endangerment to Child Protective Services. Staff will use guidance from Child Protective Services to communicate with families concerning such reports. The staff are required to be mandated reporters for suspected neglect and abuse.
SITUATIONS THAT REQUIRE HANDWASHING

All staff, volunteers, and children shall follow these procedures for hand washing at the following times:
A. Upon arrival for the day or when moving from one classroom to another;
B. Before AND After:
   * eating, handling food, or assisting a child with eating;
   * giving medication;
   * playing in water;
C. After:
   * using the toilet or helping a child use the toilet, including adjusting the child's clothing/belt;
   * handling bodily fluid (mucus, blood, vomit) from sneezing, wiping and blowing noses, from mouths, or from sores;
   * handling uncooked food, particularly raw meat and poultry;
   * handling pets and other animals;
   * playing in sand;
   * cleaning or handling garbage

HANDWASHING PROCEDURES

Children, staff members, and volunteers shall wash their hands using the following method:

A. Check first to ensure that disposable paper towels and liquid soap are accessible;
B. Turn on water (temperature should be comfortable, between 60 and 120 degrees);
C. Hold hands under water flow to moisten;
D. Apply liquid soap:
E. Rub hands together vigorously until a lather appears, then continue to wash for at least 10 seconds (Sing *Happy Birthday* song.) Wash between fingers, around fingernails, the back of the hands, around the wrists, and under jewelry (if wearing);
F. Rinse hands with fingers pointing downward until all lather and visible soil has been removed; leave water running;
G. Dry hands with disposable towel and throw towel into lined trash container;
H. Use another disposable towel to shut off faucet, then throw this towel into trash container.

Staff members may assist children with hand washing as needed. Such assistance can include: pushing up the child’s sleeves, turning the faucet on and off (with a paper towel), pumping out the liquid soap (using a paper towel) and pulling down the disposable towel from the dispenser. Staff shall wash his/her own hands after assisting each child, and before beginning to assist another child.

*Handwashing after toileting will be completed in the bathroom sinks ONLY. Classroom sinks are to be used for all other hand washing. Classroom sinks will be cleaned and sanitized twice daily, and as needed.*

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**APPENDIX: IV**

Medication Administration Policy and Procedures

Revised 08/16/2018

**PURPOSE:** This policy was written to encourage communication between the parent, the child’s health care provider, and the child care provider to assure maximum safety in the giving of medication to the child who requires medication to be provided during the time the child is in the care of the ALIVE! Child Development Center.

**INTENT:** Assuring the health and safety of all children in our Center is a team effort on the part of the family, the health care provider, and the CDC staff. This is particularly true when medication is necessary to the child’s participation in our program. Therefore, an understanding of each of our responsibilities, policies, and procedures concerning medication administration is critical to meeting that goal.

**GUIDING PRINCIPLES AND PROCEDURES:**

1. Whenever possible, it is best that medication be given at home. Dosing of medication can frequently be done so that the child receives the medication before going to the Center, and again, when returning home and/or at bedtime. The parent is encouraged to discuss this possibility with the child’s health care provider.

2. The first dose of any medication should always be given at home and with sufficient time for the parent to observe the child’s response to the
medication given. When a child is ill due to a communicable disease that requires medication for treatment, the health care provider may require that the child be on a particular medication for a full twenty-four hours before returning to the Center. This is for the child’s protection, as well as for the protection of the other children.

3. All medication, whether prescription or over-the-counter, ointments, pills, liquids, cream/lotion, lip balm, cough/throat drops and similar items are included in this policy. will only be given when ordered by the child’s health care provider and with the written consent of the child’s parent/legal guardian. The Authorization To Give Medication: Child Care Facilities form is attached to this policy and will hereafter be referred to as the Permission Form. All information required on this form must be completed before any medication can be given. Additional copies of this form are available from your child’s classroom teacher.

4. Medication cannot be given “as needed.” The child’s health care provider MUST complete the Permission Form listing specific reasons and times when such medication is to be given.

5. Medication given at the Center will be administered ONLY by staff currently certified in Medication Administration Training (M.A.T.). Such certification shall consist of satisfactory completion of a training course developed or approved by the Virginia Department of Social Services. The Director will inform the parent at the time of enrollment which staff members have this certification. In addition, the names of currently MAT-certified staff are posted on the Parent Information Board in the hallway at the CDC office.

6. Any prescription or over-the-counter medication brought to the Center must be specific to the child who is to receive it, be in its original container, have a child-resistant safety cap, and be labeled appropriately as follows:
   * Prescription medication must have the original pharmacy label that includes the pharmacist’s phone number, the child’s full name, the name of the prescribing health care provider, the name and expiration date of the medication, the date it was prescribed or updated, and the dosage, frequency, and any special instructions regarding its’ administration or storage. It is suggested that the parent ask the pharmacist to provide the medication in two containers, one for home and one for the center.
   * Over-the-counter (OTC) medication must have the child’s full name on the container and the manufacturer’s original label with the dosage, route, frequency, and any special instructions for administration and storage must be clearly visible. This applies to both prescription and over-the-counter medicines. Over the counter ointments, pills, liquids, cream/lotion,
lip balm, cough/throat drops and similar items are included in this policy.

* Any OTC medication without instructions for administration MUST have
a completed Permission Form from the health care provider prior to being
given at the Center.

7. **Examples of over-the-counter medications that may be given include:**
   * Antihistamines
   * Decongestants
   * Pain relievers/fever reducers
   * Cough suppressants
   * Sunscreen

8. **All medications will be stored:**
   * In the Center’s office and in a locked box (except for sunscreen, which
     will be stored in a locked
     cabinet in the office)
   * If refrigeration is required, in a locked and labeled box in the Center’s
     refrigerator, located in the
     kitchen.
   * Separately from staff medications

9. **For the child who receives a particular medication on a long-term daily basis,**
   staff will advise the parent/guardian one week prior to the medication
   needing to be refilled so that required doses will be readily available.

10. **Used or expired medication will be returned to the parent/guardian when it
    is no longer needed or able to be used by the child.**

11. **Records of all medications administered to any child while attending Alive!**
    CDC are completed in ink and signed by staff who administer the medication.
    These records are maintained in the CDC office in a locked cabinet.  Samples
    of the forms used are attached to this policy and include:
    - Child Day Center Medication Log
    - Authorization To Give Medication Form
    - Child Emergency Information Form
    - School Entrance Health Form
    - Emergency Authorization Form

12. **Information exchanged between the child care provider and the**
    **parent/guardian concerning medication that the child is receiving should be**
    **shared when the child arrives and/or departs each day, as needed.  Such**
    **information might include any problems, observations, or suggestions**
    **related to the medication administration.**
13. Confidentiality related to the administration of medication will be safeguarded by the program staff. Parents/guardians may request to review/their child's medication records at any time the program is open.

14. Parents/guardians will sign all required forms before any medication is given. As needed, parents/guardians will update information related to the administration of medication to their child.

15. The parents/guardians will authorize the CDC Director or Director Designee to contact the pharmacist and/or health care provider for more information about the medication the child is receiving. The parents/guardians will also authorize the health care provider to speak with the CDC Director or Director Designee in the event a situation arises that requires immediate attention to the child’s health and/or safety prior to the parent having been reached.

16. The parents/guardians will receive a copy of this policy and have an opportunity to discuss its content with the CDC Director or Director’s Designee. The signature of the parent/guardian on the Authorization to Give Medication form indicates that said parent/guardian understands and accepts the guidelines and procedures detailed in this policy, and will comply with them, in order to safeguard the child’s health and safety. Parents/guardians will receive a copy of this policy at the time of initial orientation to the CDC Program, and, additionally, before the child begins receiving any medication at the CDC, and at the beginning of each new school year in September.

17. This policy will be reviewed annually by the CDC Director and other personnel as determined by the CDC Committee.

ALIVE! CDC School Year Calendar  
2019-2020

<table>
<thead>
<tr>
<th>Year</th>
<th>Date</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>Tues, Sept 3</td>
<td>First Day of School</td>
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<tr>
<td></td>
<td>Thur, Sept 19</td>
<td>Back-To-School-Night @ 5:30 pm (Mandatory Meeting for parents)</td>
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<td></td>
<td>Thur, Oct 3</td>
<td>Parent Circle Meeting @ 5:30 pm – Positive Discipline</td>
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<td></td>
<td>TBD</td>
<td>Dental Screening (Children must be here no later than 9am)</td>
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<tr>
<td></td>
<td>Mon, Oct 14</td>
<td>Professional Development Day (CDC Closed to children)</td>
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<tr>
<td></td>
<td>TBD</td>
<td>Vision Screening (Children must be here no later than 9am)</td>
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<tr>
<td></td>
<td>Fri, Oct 18</td>
<td>Cox Pumpkin Farm Field Trip</td>
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<tr>
<td></td>
<td>Wed, Oct 23</td>
<td>Hearing Screening (Children must be here no later than 9am)</td>
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<tr>
<td></td>
<td></td>
<td>Friday, Nov 1 Children's Halloween Costume Parade at Woodbine @ 10:30</td>
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<tr>
<td></td>
<td>Tues, Nov 5</td>
<td>Speech-Language Screening (Children must be here no later than 9am)</td>
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<td></td>
<td>Thur, Nov 7</td>
<td>Parent Circle Meeting @ 5:30pm – Science</td>
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<td></td>
<td>Fri, Nov 8</td>
<td>Fall Picture Day</td>
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<td></td>
<td>Fri, Nov 15</td>
<td>Professional Development Day (CDC Closed to children)</td>
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<td></td>
<td>Thur-Fri. Nov 28-29</td>
<td>Thanksgiving Holiday (CDC Closed) (closed Fri instead of Veterans’ Day)</td>
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<tr>
<td></td>
<td>Fri, Dec 13</td>
<td>Family Holiday Party - 5:30- 7 pm</td>
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<td></td>
<td>Tues, Dec 24</td>
<td>Christmas Holiday Observed (CDC Closed)</td>
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<td></td>
<td>Wed, Dec 25</td>
<td>Christmas Holiday Observed (CDC Closed)</td>
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<tr>
<td></td>
<td>Mon-Tues Dec 30-31</td>
<td>Professional Development Day (CDC Closed to children)</td>
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<tr>
<td>2020</td>
<td>Wed, Jan 1</td>
<td>New Year’s Day Observed (CDC Closed)</td>
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<tr>
<td></td>
<td>Tues, Jan 14</td>
<td>Parent-Teacher Conferences 3:00-5:30 pm</td>
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<td></td>
<td>Thur, Jan 16</td>
<td>Parent-Teacher Conferences 3:00-5:30 pm</td>
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<td></td>
<td>Mon, Jan 20</td>
<td>Martin Luther King Holiday (CDC Closed)</td>
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<td></td>
<td>Fri, Feb 7</td>
<td>Celebration of Our Families’ Culture @ 5:45 pm</td>
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<td></td>
<td>Fri, Feb 14</td>
<td>Children’s Pink and Red Food-Tasting Celebration</td>
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<td></td>
<td>Mon, Feb 17</td>
<td>Presidents’ Day (CDC Closed)</td>
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<td></td>
<td>Mon, Mar 2</td>
<td>Professional Development Day (CDC Closed to children)</td>
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<td></td>
<td>Thur, Mar 5</td>
<td>Parent Circle Meeting @ 5:30pm – Kindergarten Readiness</td>
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<td>Thur, April 2</td>
<td>Parent Circle Meeting @ 5:30 pm – Gift of Literacy</td>
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<td>Tues, Apr 10</td>
<td>Spring Picture Day @ 9:30 am</td>
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<td></td>
<td>Fri, Apr 10</td>
<td>Children’s Egg Hunt</td>
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<td></td>
<td>Mon, Apr 13</td>
<td>Professional Development Day (CDC Closed to children)</td>
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<td></td>
<td>Thur, May 7</td>
<td>Parent Circle Meeting @ 5:30 pm – Topic TBA</td>
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<td>Fri, May 1</td>
<td>National Zoo Field Trip</td>
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<td></td>
<td>Mon, May 25</td>
<td>Memorial Day (CDC Closed)</td>
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<tr>
<td></td>
<td>Tues, June 9</td>
<td>Parent-Teacher Conferences - 3:00-5:30 pm</td>
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<td></td>
<td>Thur, June 11</td>
<td>Parent-Teacher Conferences - 3:00-5:30 pm</td>
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<td></td>
<td>Fri, June 19</td>
<td>Pre-K Graduation (CDC Closing @ 3 pm)</td>
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<td></td>
<td>Mon, Jun 26</td>
<td>Summer Session Begins</td>
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<td></td>
<td>Fri, July 3</td>
<td>Independence Day Holiday (CDC Closed)</td>
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<td></td>
<td>Fri, TBD</td>
<td>Last Day of School Year: (CDC Closing @ 5:00 pm)</td>
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<tr>
<td></td>
<td>TBD</td>
<td>Cleaning &amp; Training Week (CDC Closed)</td>
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