Chapter 3: Policies and Procedures

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Policies and Procedures

Establish written policies
It is important to put policies and procedures for your child care program into writing. Written policies help you communicate and clarify the purpose of your program as well as your health, safety, and business practices.

When developing policies it is important to:

- Be familiar with state child care licensing requirements and city ordinances regarding health and fire safety. (Check with DHS child care licensing and the local health and fire departments).
- Use local resources (child care health consultants, nurses, physicians, and local health agencies) to help develop policies.
- Individualize the policies for your facility (your building and location) and your program (your mission and goals).
- Write specific and detailed policies. Clearly state expectations and responsibilities.
- Specify how the policies will be enforced.
- Provide copies of the policies for your employees. Ask them to keep you informed about how effective the policies are and if revisions are needed.
- Review the policies with parents upon enrollment. Have them sign two copies, one to keep on file and one for parents to take home. Encourage feedback from parents.
- Review your policies at least once a year. Make changes as needed.

Content of Policies
Policies should include, but not be limited to, the following information:

a. Program mission statement or statement of philosophy
b. A brief program description to include:
   - Days and hours of operation
   - Ages of children accepted
   - A statement of non-discrimination
   - A description of inclusion of children with special health care needs
c. Holidays (days the program is closed)
d. Enrollment procedures
e. Daily sign-in and sign-out procedures, including methods to verify an individual is authorized for pick-up
f. A statement allowing parent access whenever their child is in care
g. Payment of fees and deposits
h. Termination of enrollment and parent notification of termination
i. Supplies needed and personal belongings
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j. Staffing, including teachers, the use of volunteers, helpers, substitute teachers, and deployment of staff for different activities
k. Methods of communication between parents and staff; and schedules for conferences
l. Parent involvement
m. Supervision of children
n. Evening and night care plan
o. Methods of guiding and teaching appropriate behavior (discipline)
p. Daily health check
q. Care of children who are ill
r. Exclusion for children who are ill and alternative care plans
s. Immunization and health records
t. Medication administration
u. Handling urgent medical care
v. Plan for health promotion and prevention
   - Food and nutrition – including food handling, human milk, feeding and food brought from home, and daily schedule of meals and snacks
   - Physical activity – indoors and outdoors
   - Screen time
   - Daily hygiene
   - Sun safety
w. Infant safe sleep
x. Transportation and field trips
y. Presence and care of animals
z. Emergency Preparedness: plans and drills for natural and man-made disasters; including an evacuation plan, a shelter-in-place plan, a plan for disruption of utilities, and alternative shelter arrangements when required to leave the area
   - There should be a plan in place to account for all children and staff at the time of an emergency, especially when there is an evacuation or a group is already off site.
   - Assign responsibility to a staff member(s) to bring the class roster or sign-in sheet and practice accounting for all children and adults during every emergency drill.

aa. Security
bb. Confidentiality of records
cc. Smoking, tobacco use, alcohol, prohibited substances
dd. Weapons
ee. Maintenance of facility and use of pesticides and possible toxic substances
ff. Sanitation and hygiene
gg. Reporting child abuse and neglect
hh. Review and revision of policies, plans, and procedures

It is a good idea to develop a plan for how you will implement and enforce your policies.

Policies should vary according to the ages and abilities of the children enrolled to accommodate individual or special health care needs.

Adapted from Standard 9.2.1. I Caring for Our Children, 3rd Edition
Privacy and Confidentiality

Child care programs obtain confidential information about enrolled children, their families, and the employees. It is important for administrators and staff to be aware of their ethical and legal responsibility to protect the privacy of individuals and families.

Confidentiality of records
Programs keep individual files for each enrolled child that may include:
- Enrollment forms with emergency contact information and contact information for those authorized to pick up child
- Family’s health insurance information and name of health care provider
- Health screening results and immunization records
- Emergency care consent forms
- Nutritional restrictions
- Progress reports
- Parent conference logs
- Medication logs
- Documentation of behavioral or developmental evaluations, referrals or follow-ups
- Documentation of any injury occurring at the program site

Develop a plan for storing files in locked cabinets that can be accessed by appropriate staff when needed.

Written consent
Confidentiality must be maintained to protect the children and families in your program, as well as employees. Each program should establish and follow written policies on confidentiality of the records of children and staff. The policies will ensure that materials in the records are not shared with anyone else without the written permission of the parent or guardian. See sample form Consent for Release of Information in the Appendix. Each program should also considering having parents sign a Permission to Photograph form. See sample in the Appendix.

Who needs to know?
1. The director of the program must decide who among the staff needs to know certain confidential information.
2. Caregivers and teachers should not discuss personal information regarding children and their families with any unauthorized person.
3. Confidential information should only be seen by and discussed with staff members who need the information to appropriately care for the child or provide specific services.

Personal discussions
Caregivers and teachers should not discuss confidential information about families in the presence of others in the program (including children). Remember many children have the ability to repeat your exact words and your “tone of voice”. Information should only be shared between staff members when necessary to appropriately care for the children.
Technology and privacy
Your policies should evolve as new technology creates additional challenges to privacy. To maintain confidentiality:

- **Never** release any information about a child, family or employee on the Internet without written permission. This includes photographs, names and contact information, any information or documents from child’s or employee’s record, and video clips.
- **Never** text information, photos, or videos on cell phones without written permission.
- Consider obtaining written consent upon enrollment for:
  - Posting photographs of children around the program.
  - Putting first name of children on their artwork and on their cubby.
  - Use of a video surveillance camera in the classroom for training purposes.

When to disclose information

1. Staff who prepare and serve food should be fully aware of which children have food allergies and what each affected child is allergic to.
2. Staff members who monitor outdoor play should be aware of any children who are allergic to bee stings, or if any children have chronic conditions which require close monitoring during play.
3. When a child in care is diagnosed with a communicable illness, staff and families of any children who may have been exposed can be notified and instructed to watch for symptoms. This should be done without mentioning the identity of the diagnosed child.
4. A child care program *must* report a known or suspected outbreak of a reportable illness to the public health department and the licensing agency. When this is done, identifying information about the affected child, including name, age, and how to contact the family should be reported. (It would be a good idea to let the family know you are making this contact).
5. Known or suspected child abuse must be reported to DHS Child Welfare. The child’s safety and welfare come before the family’s right to confidentiality.

Available to parents
Each child’s records must be made available to that individual child’s parent or guardian upon request.
Sample Policies and Procedures

Here is a sample Written Policies and Procedures to guide you as you develop your own.

Welcome to the Good Health Child Care Program. (We borrowed this name from the title of our Handbook.) We are happy that you have chosen Good Health Child Care to fulfill your child care needs. This handbook of written policies and procedures explains enrollment, hours of operation and other business policies, as well as detailed plans for the care of the children throughout the day and in all types of situations.

Program mission
We commit to create a stimulating, nurturing environment that builds on children’s curiosity and love of learning, and enriches all areas of their development. Our program strives to build partnerships with families and create a community of support. It is our goal to provide a loving atmosphere that emphasizes the healthy and safe development of the whole child.

Program description
The Good Health Child Care Program has a focus on child-centered learning in a safe, healthy, loving and supportive environment. Good Health Child Care provides care:

- Monday through Friday
- 6:30 A.M. – 6:30 P.M.
- For children from 8 weeks of age through 6 years
- For any child without regard to race, color, creed, religion, national origin, gender, or disability; and without regard to a parent or guardian’s race, color, creed, religion, sexual orientation or disability.

Holidays
The following is a list of holidays that the Good Health Child Care Program will be closed:

- New Year’s Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving and the day after
- Christmas Eve
- Christmas Day
- New Year’s Eve we close at 4:00 p.m.

If any of these holidays falls on a weekend, we will be closed either Friday or Monday. Tuition will remain the same.

Process for enrollment
- Visit our program with your child.
- Review all policies and procedures with the director.
- Fill out and sign all enrollment and permission forms.
- Provide a copy of your child’s immunization record, results of any hearing, vision, and developmental screenings, and develop a Special Care Plan with the director if needed.
Daily sign-in and sign-out procedures and authorization for pick-up
- Every child must be signed in and out by an adult each day.
- There is a sign-in pad at the entryway of each classroom where you will write the child’s name, the time of arrival, and sign your name.
- Upon pick-up write the time of departure, and sign your name.
- Staff will only allow children to leave with adults who are listed on the enrollment form as “authorized to pick-up”, and will ask for identification if they don’t know that person.
- Upon enrollment you will receive a security badge that will unlock the front door.
- If you have to make an unexpected change, call us and provide the name of the person who will be picking up your child. Identification will be required when they arrive.

Parent access
As a parent of a child enrolled in the Good Health Child Care Program, you are free to visit at any time, and welcome to join your child for special events and even for breakfast or lunch.

Payment
A deposit of _____ is required for registration and supplies. Payment for each week of care is due Friday of the week before. If payment is not received by Monday morning of the week of care, a late fee of _____ will be charged. An additional fee of ____ will be charged for each day until payment is made.

**Enrollment fee ______ Due Date ___________ Weekly Tuition ______ Due Date ___________

Termination of enrollment
**Dismissal**
The Good Health Child Care Program reserves the right to dismiss a child for the following reasons (but not limited to):
- Lack of parental cooperation
- Failure to complete and update all required forms
- Routinely late picking up child
- Failure to pay
- Lack of compliance with policies and procedures
- Failure of child to adjust to the program after a reasonable amount of time
- Our inability to meet the child’s needs
We will provide two weeks written notice of dismissal for which full tuition is due, whether or not child is in attendance.

The Good Health Child Care Program will not dismiss a child with challenging behaviors without first working with a behavioral or mental health consultant and developing strategies for working with the child. These strategies may include changes to the room arrangement or the daily schedule, or specific methods for guiding the child toward self-regulation. Families will be included in the planning process.

**Withdrawal**
Parents are required to provide two weeks written notice when withdrawing a child from care. The two weeks will be paid in full, regardless of whether or not the child is in attendance.
Appropriate clothing and supplies
Parents must supply the following items:
- A change of clothes
- Diapers and any ointments needed (if child is in diapers)
- Toothbrush – replace twice a year
- **Dress child appropriate for the weather each day – and for playing outdoors!**
- Remember safe, comfortable, supportive shoes for running and playing. No Flipflops!

Personal belongings
We prefer that children do not bring toys from home unless it is something that can be shared with the entire group such as books or music CDs. We are not responsible for any loss or breakage of personal items. All personal items **must** be clearly marked with the child's name.

Personnel
Your child will be assigned a primary caregiver (teacher), however other staff will care for and interact with your child on a regular basis. All personnel have received training and successfully completed fingerprinting and background checks. Occasionally volunteers work in the classroom or assist on special outings, but they will never be left alone with children.

Methods of communication
Good communication is vital!
- Feel free to share any concerns or questions that may arise.
- Allow time at drop-off or pick-up for some brief information sharing with staff.
- You may call or email the Good Health Child Care Program at any time.
- Your child’s teacher will schedule a conference with you twice a year to discuss your child’s progress and development; however you can request a meeting at any time.
- The Good Health Child Care Program distributes a monthly newsletter to families, and classroom teachers provide weekly classroom updates. Families can decide if they want to receive these electronically or if they want a paper copy.

Parent involvement
Parents are welcomed and encouraged to participate in the early childhood program. Some ways you can be involved include:
- Help your child at home with concepts they are learning (see teacher’s classroom update and monthly newsletter).
- Lend or collect objects for units of study.
- Visit the program to talk about and demonstrate your job.
- Volunteer on field trips.
- Visit the program to be a volunteer reader.
- Provide healthy snacks and treats for special events.
- Serve on a Parent / Staff Advisory Board.
- Join your child for breakfast or lunch occasionally.
- Attend parent training events.
- Volunteer for playground repair and clean-up duty.
Supervision of children
Children will be well supervised and a trained staff person will remain with each group of children at all times.

Evening and night care
Currently the Good Health Child Care Program provides care from 6:30 a.m. to 6:30 p.m. If this changes all parents will be notified in advance, as they may want to choose a later shift of care.

Methods of guiding and teaching appropriate behavior (discipline)
We maintain a positive discipline policy, which focuses on prevention, redirection, love, consistency and firmness.

- We stress two main patterns of behavior: respect for other people and respect for property, and we develop our Behavior Guidelines based on these.
- We review the guidelines with the children frequently.
- Please keep in mind that there WILL be disagreements between children. Sometimes they hit, push, throw toys, and even bite.
- Young children are learning how to express their feelings and we try to teach and guide them to do this without hurting others. We help provide words when we tell them to “use their words”. For example: when telling a 2-year-old to “use your words” instead of hitting when he is angry – we may say – “It looks like you were very angry when Sam took your truck. Tell Sam how you feel.”
- At the same time we teach negotiation skills so children learn to work out a plan when they want to play with the same toy (and teach the child who wants the toy next how to request it – “Sam – next time ask Josh if you can please have the truck when he is done.”
- We will try to prevent problems, redirect when appropriate, teach and model appropriate social interactions, and help children learn to manage and communicate their feelings.
- We will discuss inappropriate behavior, encourage making amends when the offense involves another person, and sometimes withdraw privileges based on the principle of "natural consequences”.
- We have a Comfort Corner – a designated area in each room that children can choose to go to for some time to reflect and calm down. Children re-join the group when they feel ready. The Comfort Corner is equipped with a comfy chair, or a soft rug and pillows, and also has books, soft toys, and squishy and manipulative toys.
- Under NO CIRCUMSTANCES will there be any spanking, physical abuse, verbal abuse, name calling or isolation used. Neither food nor sleep will ever be withheld from children as a means of punishment.

Daily Health Check
As you and your child arrive, a staff member will do a quick Morning Health Check – observing your child for any signs or symptoms of illness, possible fever, skin rashes, swelling or bruises, vomiting or diarrhea, general mood, and complaints of not feeling well, and fill out a Daily Health Check form. The health check is completed before parent leaves for the day in case there is an obvious reason that the child is not well enough to stay.
Care of children who are ill
Children who become ill while in care may be sent home if:

- The child’s illness is keeping him or her from comfortably taking part in activities,
- The sick child needs more care that the staff can provide without affecting the health and safety of other children, or
- Other children could get sick from being near the sick child.

Exclusion for children who are ill and alternative care plans
A child will be excluded from care at the Good Health Child Care Program when the following symptoms are present:

- Vomiting two or more times
- Diarrhea – two or more watery stools
- Red eyes with white or yellow mucus AND child has not seen health care provider yet
- Sore throat AND fever or swollen glands
- Rash AND fever or mouth sores with drooling
- Fever AND cough, sore throat, rash, vomiting, diarrhea, or pain
- Also any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

Be sure to have an alternate care plan, or be prepared to stay home with your ill child.

Immunization and health records
- A copy of your child’s immunization record will be required upon enrollment and you will be responsible for keeping your child’s immunizations up-to-date. We will send you a reminder a couple weeks before the next immunizations are due.
- Please provide a copy of any recent health assessments, hearing, vision, dental, and developmental screenings. We will collaborate with you to monitor your child’s health and development, and let you know if we have any concerns.
- If your child has a chronic medical condition or special health care need we will work with you and your child’s health care provider to develop a Special Health Care Plan.

Medication administration
- The Good Health Child Care Program will administer medication to children who have written parental consent and a plan in place that has been made and approved by the Director. Parent must complete and sign the Medication Administration Form.
- Whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction.
- Medication must be in original, child-proof container and labeled with child’s name.
- All medication containers and dispensers will be stored out of the reach of children and in a locked cabinet, or refrigerator if necessary, and will be returned to parent when completed.
- Prescription medication is administered in accordance with the pharmacy label directions as prescribed by the child’s health care provider.
- Non-prescription medication may be administered without approval from the child’s health care provider, following the written instructions from the parent, as long as the instructions from the parent do not conflict with the product directions on the container.
• Instructions for the dose, time, method to be used, and duration of administration will be provided in writing on the Medication Administration Form.

• A child’s health care provider may state that a certain medication may be given for a recurring problem, emergency situation, or chronic condition. The instructions should include the child’s name; the name of the medication; the dose of the medication; how often the medication may be given; the conditions for use; and any precautions to follow. Example: children who wheeze with vigorous exercise may take one dose of asthma medicine before vigorous active (large muscle) play; a child with a known serious allergic reaction to a specific substance who develops symptoms after exposure to that substance may receive epinephrine from a staff member who has received training in how to use an auto-injection device prescribed for that child (e.g., Epipen®).

• Medication will not be used beyond the date of expiration on the container or beyond any expiration of the instructions provided by the health care provider. Instructions which state that a medication may be administered “as needed” will be renewed by the health care provider at least annually.

• A medication log will be maintained by the program to record instructions for giving the medication, consent obtained from parent, amount, time of administration, and the person who administered each dose of medication. Spills, reactions, and refusal to take medication will be noted on this log.

Handling urgent medical care
• All Good Health Child Care Program personnel maintain their CPR certification and Pediatric First Aid training.

• If a child is injured or becomes seriously ill, the caregiver with that child will assess the child and begin to provide care, and will activate the Emergency Medical Services (EMS) by dialing 911 when immediate medical help is needed.

• The director or person in charge will contact the parents to inform them of the injury or illness and the action taken.

• If EMS decides the child needs to be transported to the hospital, a staff member will accompany the child and remain until the parent assumes responsibility for the child.

• The staff member who is with a child at the time of an injury or serious illness will complete an incident report form as soon after the incident as possible.

Plan for Health Promotion and Prevention
The Good Health Child Care Program promotes health through the following policies:

Food and nutrition
Physical activity
Screen time
Daily hygiene
Sun safety

Food and nutrition
• Meals and snacks will meet the requirements of the USDA Child and Adult Care Food Program (CACFP). We participate in the CACFP and all meals will be provided at no cost to parents. All parents will be required to fill out the USDA Eligibility Form.
• Weekly menus will be posted onsite and two weeks of menus will be available to view on our website.

• We are a “Breastfeeding Friendly” worksite as designated by the Oklahoma State Department of Health. We encourage breastfeeding and will serve expressed breastmilk and also welcome mothers to breastfeed onsite. We provide a comfortable, quiet breastfeeding area, as well as a place for employees to pump.

• It is our belief that infants should be fed on demand. If parents have another feeding schedule in mind we will discuss it, as long as the infant’s needs will be adequately met.

• If your child has allergies and requires a modified diet, we must be notified of this in writing. **We will need to have written instructions from the child’s health care provider describing any foods the child is not permitted to eat.** An appropriate substitution will be made. We may require assistance from parents to provide appropriate substitutions.

• Drinking water will be available to children indoors and outdoors throughout the day.

• Juice will not be served to children younger than one year of age. When juice is served to children one year and older, it will be 100% fruit juice and no more than 4 oz. per day.

• We never force a child to finish what is on his or her plate, but we do encourage each child to try one or two bites. Sometimes they are surprised by what they like!

• Children will be encouraged to serve and feed themselves in a family style environment with serving bowls, plates, and pitchers on the table.

• Children will be seated at the table when eating meals and snacks.

• The adults will act as role models to promote healthy eating behaviors by sitting with the children, eating healthy food, and having a pleasant conversation.

**Meal times:**

- Breakfast: 7:30 – 8:00 A.M.
- Mid-morning Snack: 10:00 A.M.
- Lunch: 12:00 P.M.
- Afternoon Snack: 3:00 P.M.

**Physical activity**

Young children need to be active. We begin teaching healthy living habits by encouraging movement and physical activity.

- Children should be active at least 60 minutes a day.

- Active play will take place indoors and outdoors. Parents must provide weather appropriate clothing.

- Active play will include teacher-led organized play and open-ended free play (where the child decides).

**Screen time**

Screen time includes the use of TVs, DVDs, computers, video games, phones, and other hand-held electronic devices with a screen. Screen time takes children away from hands-on creative play. Children also lose interactions with caring adults and social interactions with each other when watching screens.
In the Good Health Child Care Program screen time is limited to:

- No screen time at all for children under two years of age.
- Programming that is appropriate for children and has no advertisements.
- A 30 minute limit per day, no more than three days per week for children two and older.
- 15 minute increments of computer use except for homework and for children who require assistive and adaptive computer technology.

**Daily hygiene**

At the Good Health Child Care Program we teach children the importance of good hygiene practices to prevent illness and promote health. Hygiene practices we focus on are:

- Hand washing
- Brushing teeth
- “Cover Your Cough”
- Bathroom etiquette

**Sun safety**

We will follow our Sun Safety policy to ensure all children and staff members are protected from skin damage caused by the harmful UVB and UVA rays of the sun.

1. Parents will complete and sign the *Parent/Guardian Permission to Apply Sunscreen to Child* and it will remain on file at the program.
2. We will provide a broad spectrum SPF 30 or higher (*paba and alcohol* free) sunscreen, and apply to children’s exposed skin 30 minutes before going outdoors.
3. Outdoor play areas will have shade available and activities will be planned for before 10 a.m. and after 3 p.m. as much as possible.
4. We will include learning about sun safety into our curriculum and daily routines.

**Infant Safe Sleep**

1. Infants will always be put to sleep on their backs.
2. Infants will be placed on a firm mattress, with a fitted crib sheet, in a crib that meets the Consumer Product Safety Commission safety standards.
3. No toys, soft objects, stuffed animals, pillows, bumper pads, blankets, positioning devices or extra bedding will be in the crib or draped over the side of the crib.
4. Sleeping areas will be ventilated and at a temperature that is comfortable for a lightly clothed adult. Infants will not be dressed in more than one extra layer than an adult.
5. If additional warmth is needed, a one-piece blanket sleeper or sleep sack may be used.
6. The infant’s head will remain uncovered for sleep. Bibs and hoods will be removed.
7. Sleeping infants will be actively observed by sight and sound.
8. Infants will not be allowed to sleep on a couch, chair cushion, pillow, or in a car seat, swing or bouncy chair. If an infant falls asleep anyplace other than a crib, the infant will be moved to a crib.
9. An infant who arrives asleep in a car seat will be moved to a crib.
10. Infants may be offered a pacifier for sleep, if provided by the parent.
11. Pacifiers will not be attached to the infant’s clothing, and will not be reinserted if they fall out after the infant is asleep.
12. When able to roll from back to front, the infant will be put to sleep on back and allowed to assume preferred sleep position.
13. In the rare case of a medical condition requiring a sleep position other than on the back, the parent must provide a signed waiver from the infant’s health care provider stating the reason for another position.

14. Infants will have supervised “Tummy Time” when they are awake.

Transportation and field trips
The Good Health Child Care Program vehicle provides transportation during the school year to and from our local elementary school, as well as occasional field trips for children two years of age and older. A signed Permission to Transport Form must be on file before we will transport your child. Our vehicle is a small bus equipped with child restraint systems.

- The vehicle is licensed and insured for transporting children.
- The vehicle is equipped with a fire extinguisher, first aid kit, and emergency information for all children being transported.
- Drivers of the vehicle are certified in CPR and have completed the OKDHS approved child passenger safety course.
- Parents will receive notification before each field trip.
- Each child will be properly secured in a child passenger restraint system.

Presence and care of animals
- Parents will be notified in advance of any animals at the facility.
- Any pet or animal at our facility, indoors or outdoors, will be in good health and a friendly companion to children.
- Pets will be kept clean and housed in clean living quarters.
- Children and staff will wash hands before and after handling animals.
- Currently the Good Health Child Care Program has two pet gerbils. They are sisters and live together in one large cage. Each classroom (beginning with the two-year-olds), takes turns caring for and feeding the gerbils.

Emergency preparedness
The Good Health Child Care Program has developed and practices emergency plans for:

- Serious injuries or illnesses
- Lost or abducted child
- Poison exposure, including exposure to toxic substances
- Potentially violent situations in the program, including individuals with threatening behaviors
- Natural disasters, including tornado, blizzard, flood, earthquake
- Fires, including wildfires
- Disruption of utilities, including loss of electricity, gas, water

Shelter-in-place: An imminent threat of a tornado, or other weather related emergencies will require us to follow our Shelter-in-place procedures. If there is a tornado warning in our area we will practice our organized evacuation from the classrooms to the Safe Room that we had designed for the program. All employees are familiar with the procedure and what to take with them. The children practice this evacuation monthly so they remain calm and often help their teacher bring the Shelter-in-place supplies.
Lock-down: If there is a potentially violent situation, such as an intruder or a hostage situation that may threaten the safety of the children and personnel, the Lock-down procedures will be followed. Personnel are notified through a pre-arranged signal. They keep children in designated safe locations in the building, lock doors when possible, and encourage children to remain calm and quiet.

Evacuation: For situations that require everyone leaving the building, such as a fire, the Evacuation procedures will be followed. Personnel know at least two ways to evacuate the building with their group of children. The infant room has a crib on wheels that all of the infants are put in and wheeled out. Everyone will meet on the Northwest corner by the church.

Relocation: Some emergencies require moving to an alternate location, such as a bomb threat, or fast-moving wildfire. The Good Health Child Care Program employees will follow the Relocation procedures, which include a plan for transporting everyone, a list of items to bring, a pre-determined location, and a plan for reuniting parents and children. Our primary relocation site is the Early Childhood Training Center, 200 Main Street, Anywhere, Oklahoma. Our secondary relocation site is the Girl Scout Office, 555 1st Street, Somewhere Else, Oklahoma. We will contact all parents when it is safe to pick up your child.

Some things we will consider when deciding whether to continue caring for children during utility failures:

- Is there a back-up power supply available?
- Is there an alternative means of cooking food?
- Is a safe heat source available if the weather is cold, or a safe way to ventilate the building if the weather is hot?
- If there is no running water and toilets won’t flush we will begin the evacuation procedure for our alternate location. If it is late in the day we will call parents to pick up the children early, rather than relocate everyone.

Security

Entrances are protected from unauthorized visitors by remaining locked from the outside. Upon enrollment parents will receive a security badge that will open the front door when scanned. All other visitors will have to push the buzzer. Remember, if you loan your security badge to a friend or relative to pick up your child and you did not put their name on the enrollment form as “authorized to pick up”, they will not be allowed to take your child.

Confidentiality of records

- The Good Health Child Care Program will maintain records of each child, but they will only be accessible to the program director and the child’s primary caregiver when needed.
- Each staff person receives training in maintaining confidentiality and signs an annual agreement to maintain confidentiality.
- Each child’s record will be made available to that individual child’s parent upon request.
• If a parent requests that we share some information from their child’s record with another organization, school, or agency, the parent must fill out and sign the Consent for Release of Information form.

Smoking, tobacco use, alcohol, and prohibited substances
• The indoor and outdoor environment, and vehicles used by the program are designated as non-smoking areas 24 hours a day.
• The use of tobacco, simulated tobacco products, and related items is prohibited on the facility premises and in the vehicles.
• Matches and lighters are inaccessible.
• The use of alcohol or illegal drugs is prohibited on the facility premises.
• Possession of illegal substances or unauthorized potentially toxic substances is prohibited.

Weapons
There are no weapons permitted at the facility. The Good Health Child Care Program has a “No Weapons on Site” policy.

Maintenance of facility and use of pesticides and possible toxic substances
• The Good Health Child Care Program will provide proper maintenance of the building indoors and out, on the playground, and the parking lot.
• All potentially toxic materials, such as pesticides, toxic cleaning materials, and paint and renovation materials will be used according to manufacturer’s instructions, and when children are not in care.
• These materials will be stored away from the facility so they will never be accessible to children.

Sanitation and hygiene
We do our best to maintain strict cleanliness and hygiene standards.
• Floors are swept and mopped daily.
• Bathrooms are cleaned at least daily.
• Children use separate cups, plates, bowls and eating utensils that have been thoroughly washed.
• Tables and high chair trays are washed and sanitized before and after each use.
• Children and staff wash hands upon arrival, after going to the bathroom or diaper changing, after coming in from outside and after handling pets, and before and after meals and snacks.
• Infants sleep in separate cribs with clean sheets replaced daily. Crib mattresses are wiped clean and sprayed with sanitizing solution daily.
• Beginning at toddler age, washable cots are used. Each child has a separate cot; with a sheet and a blanket that are washed weekly (unless soiled, then they are washed as often as necessary) and cots are wiped clean and sprayed with sanitizing solution weekly.
• Mouthed toys are washed and sanitized after each use.
• All other toys are cleaned and sanitized as needed (at least weekly).
### Reporting Child Abuse and Neglect

Any suspected child abuse or neglect will be reported by the personnel of the Good Health Child Care Program. Oklahoma statute (Title 10, Section 7102) defines child abuse as harm or threatened harm to a child’s health, safety, or welfare by a person responsible for the child.

Every person, private citizen or professional, who has reason to believe that a child has been abused, is mandated by law to promptly report suspected abuse to the Oklahoma Department of Human Services (OKDHS), or the Oklahoma Child Abuse Hotline: 1-800-522-3511. Failure to do so is a misdemeanor.

### Review and revision of policies, plans, and procedures

The policies and procedures are revised and updated as we learn new information and as we receive input from families, so feel free to provide input and to ask questions at any time.

I _______________________________ (print name) have gone over these policies with a Healthy Child Care Program staff person and by signing this I agree to follow the policies set forth.

**Parent signature:**

**Date:**