

ROBYN'S NEST

PRESCHOOL AND PLAYCARE CENTER



Family Handbook

www.robynsnestspokane.com

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About Us

Our History

Robyn's Nest Preschool and Playcare Center was founded in 1992 by Robyn Willits. Originally a small home-based preschool, Robyn's Nest expanded in 2006 to its current location where it continues to serve over 60 children on a daily basis.

Our Vision

Robyn's Nest Preschool and Playcare Center aspires to be the premier choice of children and families in the Spokane area for high-quality, play-based early childhood education and child care services.

Our Mission

The mission of Robyn's Nest Preschool and Playcare Center is to provide safe, affordable, nurturing, child-centered, high-quality education in an environment that fosters a child's individual success and a lifelong love of learning through a play-based curriculum and collaboration with families and the community. We provide a broad range of stimulating, interactive, hands-on learning materials and experiences that promote each child's social, emotional, physical, cognitive, and creative development. Our approach is hands-on with an emphasis on active learning, problem-solving, and helping children become independent, self-confident, and inquisitive learners. We are committed to the children and families we serve and believe that together we can support each child in achieving their full potential.

Our Goals

Endeavor to Achieve Excellence. Creating a high-quality early education environment is all about thoughtful design. Every aspect of our program, from the teachers to the materials, is carefully selected and routinely evaluated to ensure excellence.

Provide Individualized Care for Each Child. Our caring, experienced staff are here to guide children's learning and offer personalized attention in a safe, loving, and encouraging educational environment. Carefully designed classrooms and curriculum enable each child to reach their full potential during every stage of development and smoothly transition into a school environment or society itself.

Offer Engaging and Enriching Curriculum. Our goal is to create an environment that infuses play with rich learning experiences which help your child build self-confidence, social skills, creativity, and academic readiness.

Collaborate with Families and the Community. We believe that collaborative relationships with families and the community are fundamental to achieving quality outcomes for children. We are committed to creating a mutually respectful and inclusive atmosphere where families and staff work together to support their child's success.

Continuously Improve our Program. We will persist in our efforts to continuously improve our program to meet and exceed state licensing standards and the needs of the children and families we serve.

"The day we stop exploring is the day we commit ourselves to live in a stagnant world, devoid of curiosity, empty of dreams." – Tyson

Our Philosophy

At Robyn's Nest we believe that "play" is the highest form of learning. Our goal is to provide an environment that infuses play with rich learning experiences helping your child build self-confidence, social skills, and academic readiness. Our classrooms are designed to create a safe, nurturing, and fun atmosphere for each age group. Our caring, experienced staff is here to offer personalized attention and support for your child

Access and Admission

Normal Hours of Operation

The Center is open Monday through Friday from 7am to 5pm.

Center Access

Families entrust their children to us on a daily basis. Therefore, their safety and security are at the top of our priority list. All exterior entry doors require a PIN code to gain entry. Only current clientele and staff will be issued valid PIN codes. Each PIN code is unique and specific to the individual. All entry and exit data are tracked by our computer system.

Guest Entry

Only current clientele and staff will be issued valid PIN codes to exterior entry doors. All others must ring the guest bell to be permitted access to our facility. It is vital that families do not give out their PIN code to friends and family members even if they are listed as authorized release persons.

Please do not give others your door code or allow children to play with the entry keypads!

Permission for Free Access (for Enrolled Families)

Since your child's adjustment is important, families are encouraged to make at least one visit with their child prior to the first full day of attendance. Families are welcome to come and visit their child during open business hours, but please try to be considerate of scheduled rest periods. If you must come in/out of classroom during this time we ask that you try to minimize the disruption.

Drug-Free Environment

We are committed to fostering and maintaining a healthy and safe environment for everyone. Staff, family members, and quests are prohibited from smoking and/or vaping in the Center or on its grounds. At no time shall anyone ever use, consume, sell, manufacture, or be under the influence of any alcohol or illegal drugs on Center property.

If we have reason to believe that any persons picking up a child is under the influence of drugs or alcohol, an emergency contact will be called to pick up the child. The incident will also have to be reported to Child Protective Services.

Non-Discrimination Policy

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

mail: U.S. Department of Agriculture

Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW Washington, D.C. 20250-9410;

fax: (833) 256-1665 or (202) 690-7442; or

email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Enrollment Process

Openings

Openings are generally filled on a first-come first-served basis. However, priority will be given to siblings of currently enrolled families, those who have previously attended our Center, and those on our Center's waitlist. While we do accept families on State Subsidy (WCCC), please keep in mind that the number of openings allotted to subsidized families is limited and preference will be given to private pay clients when openings become available.

Waitlist

Our Center strives to accommodate all requests for the registration of a child. Unfortunately, we have a limited number of spots in our child care program and are not always able to immediately accommodate every family's child care needs. Therefore, we have developed a waitlist for when the maximum capacity of a classroom has been reached or families desire to enroll on a future date.

Families can request that their child(ren) be added to our waitlist in-person or complete the waitlist form available on our website (www.robynsnestspokane.com). There is no fee associated with being on our waitlist.

Waitlist information is kept for approximately 90-days (longer for those seeking care on a specified future date). Preference will be given to siblings of currently enrolled families, families who have previously attended our Center, and those referred by past/current clients or staff. Otherwise, new contacts will be added to the list in the order they are received. Each time a family contacts our Center it will be noted. Those who keep in close contact with our Center regarding their child care needs may get bumped up on the list (pending Administration approval).

When our Center gets an opening, we will attempt to contact all families on our waitlist that meet that opening's criteria in order. Families may request to be re-added to our waitlist at any time.

Introductory Tour

All families are required to come in for an in-person introductory tour before they will be considered for enrollment. We have many reasons for this, but first and foremost, is that we like the chance to get to meet each family and learn about their specific child care needs before we agree to provide care. It also gives families the opportunity to see our program in action, review basic Center policies, and decide if we are the right fit for them. We run an excellent program, but that doesn't mean that we are necessarily the right program for every family.

Reserving a Spot

Once a family has completed their introductory tour, they may elect to reserve a spot in our Center for their child(ren) by paying a **non-refundable** initial deposit. This deposit will be applied towards their child's tuition.

Initial Deposit

The purpose of the initial deposit is to hold a place for your child, guaranteeing them a place in our Center. If, for reasons that are of no fault of the enrolling family, our Center must deny the child a place, the deposit will be fully refunded.

The initial deposit for families paying out-of-pocket (private pay) is equivalent to one week's tuition plus the annual registration fee. This will hold a spot for up to two weeks or until an agreed upon pre-specified date. If your family will be paying through Working Connections you may request that we hold a spot for up to 48 hours; long enough for the state to email us confirmation of a full-time authorization for an agreed upon pre-specified start date. Working Connections can issue authorizations up to 30 days prior to your child's anticipated start date.

Again, all deposits non-refundable and will be applied towards the cost of tuition.

Enrollment Paperwork

Families will be given an enrollment package after they have paid their initial deposit. Families must complete and return all enrollment forms prior to their child's first day in care.

Enrollment Records

General Requirements

Families must complete and return all enrollment forms prior to their child's first day in care. It is extremely important that the information in your child's records is accurate and kept up to date. Our Center will ask families to verify the accuracy of contact information an additional two-three times per year.

Access and Confidentiality

Children's records will be kept for the period of time designated by the State after enrollment eases. Only authorized family members, key staff, state officials, and those appointed by a court of law may access children's records.

Our Center aims to ensure that all families can share their information in the confidence that it will only be used to enhance the welfare of their children.

Contact Information (WAC 110-300-0460)

Families are required to provide the following contact information upon enrollment and report any changes to administrative staff as they occur.

- The name, address and home and business telephone number of the parent/quardian and other person to be contacted in case of an emergency
- The name, address and phone number of the person authorized to remove the child from the Center, and
- The name, address and phone number of the child's health care provider and dentist (if the child has a dentist).

Health Care Information (WAC 110-300-0460)

Families must also supply the following health history information:

- The date of the child's last physical exam or the date the child was last seen by a health care provider (Must be within the last 12 months.)
- Any allergies, expected symptoms and method of treatment if necessary
- Any health and developmental concerns or issues
- Any life threatening medical condition that requires an ICP, and
- · A list of current medications used by the child

Immunization Records (WAC 110-300-0210)

State law requires that immunization records are maintained for each child enrolled in the Center. Please be prepared to provide this information about your child upon enrollment. If you would like, you may ask your health care provider to fax immunization records directly to the Center. Our fax number is (509) 928-0559.

Children who are behind on their immunizations may be temporarily excluded from care.

CACFP Enrollment Application

Our Center participates in the Child and Adult Care Food Program (CACFP) The federal government requires us to have all families complete an Enrollment/Income-Eligibility Application upon enrollment and annually thereafter. (It's the bright yellow form in your enrollment package.) Collecting this information allows our Center to be reimbursed for a portion of our food-related expenses. It is extremely important that families take the time to see if they qualify for free and reduced meals as it dramatically effects the amount of our reimbursement.

Other Authorizations (WAC 110-300-0460)

Families must acknowledge that they have reviewed this handbook and other Center policies annually. They are also asked to authorize the Center to transport, photograph, and obtain emergency medical treatment for their child as well as consent for their child to participate in water activities.

Tuition and Payment Policies

Tuition Rates

Please contact our Center or visit our website for current rate information. Rates are based upon providing full-time care, up to a maximum of 50 hours per week. Families may choose to attend part-time, however, we do not offer a part-time rate. A 10% sibling discount is offered for families with multiple children (applied to eldest child). Families will be given a minimum of 30 days' notice prior to any changes to our tuition rates.

Tuition Policies

Our Center's tuition and payment policies are included in our enrollment packet. All families must sign and return the Tuition and Payment Policies Agreement prior to enrollment and annually, every September, thereafter. Please read it carefully as all policies will be strictly enforced.

Tuition Payments

To minimize administrative costs, the Center requires all tuition payments to be made via Tuition Express. Other forms of payment, including credit, debit, cash, and check, will only be excepted for the initial deposit. A Tuition Express Electronic Funds Transfer Authorization (ACH) form will be provided with each family's enrollment packet and must be completed and returned prior to the child's first day in care.

All tuition payments must be made through Tuition Express via Electronic Funds Transfer. All Tuition is due in advance of services rendered. Tuition fees are not subject to proration for illness, absence, holidays, or emergency closure of the Center. Tuition is not reduced as a result of Center closures.

Payment Schedules

All families are expected to pay as contracted, prior to services being provided. For your convenience, we offer the following payment schedules (billing cycles):

- . Monthly, on the first business day of each month
- Bi-Weekly, every other Friday

Annual Registration Fee

A non-refundable annual registration fee is due at the time of enrollment will be added to the first payment in January annually thereafter. Families who have paid a registration fee within 90 days of that date (after October 1st) will not be required to pay again until the following year. However, if a child is withdrawn from the program and subsequently re-enrolls, a new registration fee will be due at that time.

This fee is currently covered by WCCC for those clients who receive assistance.

Late Pick-Up Fee

A late pick-up fee will be assessed for any child in attendance outside the Center's normal operating hours. This fee does not constitute an agreement to provide care outside of standard hours service.

Annual Sunscreen Fee

Our Center provides hypo-allergenic sunscreen for a small fee from Memorial Day to Labor Day. A summer sunscreen fee will be added to the first tuition payment in June for each child enrolled even if the family opts to supply their own sunscreen. Families are strongly encouraged to apply sunscreen prior to dropping their child off at the Center. Center staff will apply sunscreen prior to afternoon recess when going outdoors for a period of more than fifteen minutes AND the outside temperature exceeds 75 degrees. Children enrolled in Camp Alliwannado will get multiple sunscreen applications throughout if they have longer periods of sun exposure.

Summer Camp Fee

A non-refundable Summer Camp fee is required by April 1st to reserve a spot for existing clients. Families who are not currently enrolled will also need to pay for their child's first weeks' tuition. Please note: camp fees are not covered by State Subsidy.

Tuition and Payment Policies

Tax Documentation

The Center will provide all CURRENT ACCOUNTS with written documentation of child care expenses, including payment receipts and year-end tax statements. Yearly tax statements will be available for pick-up in the front office by January 31st of the following year.

Clients can view their account activity at any time by selecting the "accounting" option on the check-in computer. Monthly statements can be printed or emailed upon request.

Our Tax ID Number is: 26-0597362

Withdrawal from Care

Two weeks' written notice is required before withdrawing your child from the Center. Withdrawal slips are available in the front office.

Families will still be held liable for payment of two weeks' notice even if their child does not attend. State Subsidy families who fail to give proper notice will be charged the going rate for days not covered by their authorization.

Due to limited storage, personal items (ie: clothing, diapers, bottles, medications, etc...) left at the Center are only kept for 5 days after your child's last day in attendance. The Center reserves the right to withhold items left on delinquent accounts.

Termination of Services (WAC 110-300-0485)

Child care services may be terminated immediately for any of the following reasons (but not limited to):

- Failure to meet or comply with the expectations, policies, and requirements set forth in this handbook.
- Failure to comply with tuition and payment policies; including, but not limited to, failure to pay as agreed.
- Failure to comply with this Center's health and illness policies.
- Failure to comply with current mask mandates and COVID-19 protocols issued by governing agencies.
- Failure or refusal to cooperate with addressing behavioral issues or concerns.
- Repeated failure to pick children up from care at scheduled times.
- Inappropriate conduct by adult family members; including threats, profane language, rude or aggressive behavior, or inappropriate physical contact with staff or the children in our care.
- Providing false information either verbally or in writing.

If services are terminated for any reason, tuition will not be refunded.

Expulsion from Care (WAC 110-300-0340, 0486)

On rare occasions, our Center may find it necessary to expel a child from care. In these instances, families will be notified about the circumstances and reasons for expulsion in writing and, when possible, at a face-to face meeting with the Center administration.

The decision to expel a child from care does not come lightly. Please see the Behavior Management and Discipline section of this handbook for more details regarding our discipline procedures and the steps our Center takes to avoid expulsion.

If your child is expelled from care, tuition will not be refunded.

Attendance Policies

Schedule

In order to provide children with a stable daily routine, we ask that your drop-off and pick-up times be consistent and as agreed. Families are required to provide an anticipated attendance schedule as part of the enrollment process. Washington State Licensing requirements mandate that all children must be picked up within the scheduled hours so that proper staff-to-child rations can be maintained.

Monthly Schedules (State Subsidy Clients Only)

Families who pay their tuition through state subsidy are required to submit and sign an anticipated monthly attendance schedule for their child prior to the first day of each month.

Maximum Hours in Care (WAC 110-300-0455)

Washington State Law states that a child may only be in care for up to a maximum of ten hours each day.

Late Drop-Off

In order to get accurate meal counts and maintain proper staffing ratios, we require that all children are dropped off by **no later than 10am.** We will make the occasional exception if your child will be late due to a doctor's, dentist's, or other appointment if it has been pre-arranged. This can be done by completing a Schedule Change slip (available at the check-in counter) or by notifying the Center either in person or by phone prior to 10am. Families who fail to do so may not be able to drop off their child(ren) for the day.

Late Pick-Up

A late pick-up fee will be assessed for any child in attendance outside the Center's normal operating hours. This fee does not constitute an agreement to provide care outside of standard hours service. If families fail to contact the Center and the Center is unable to contact an authorized individual to pick up the child after 30 minutes, Social Services will be contacted. Repeated late pick-ups may result in termination of care.

HINT: Door codes stop working 5 minutes after we close. If your door code doesn't work, you're late.

Absences and Vacations

Unfortunately, we are unable to offer unpaid vacation time or absence days. However, advance notice of any planned vacations or absences is greatly appreciated.

Center Closures

The Center will be open whenever possible on any regularly scheduled day, during normal business hours. However, occasionally severe weather or other conditions may prevent the Center from opening on time or at all. As a general rule, if the Central Valley School District is closed, it is highly likely the Center is as well. The Center will do its best to notify families of unexpected closures via the website, social media, and/or local news programs. If it becomes necessary to close the Center early, parents/quardians will be notified and be responsible for arranging for their child's early pick up.

Our Center will be closed in recognition of most major federal holidays. In addition to holiday closures, we dedicate time every year for professional staff development and training, deep cleaning, and routine maintenance. The Center will be closed on these days. A complete list of scheduled closure dates is available each year by October 1st for the following calendar year.

Tuition is not reduced as a result of Center closures.

Coronavirus (COVID-19) Closures (effective 9/1/2020)

If our Center has COVID-19 outbreak (one or more positive cases) and the health district requires that we close a particular classroom or the whole Center for a designated period of time, tuition payments must still be made. This ensures that the Center can keep our lights on and our staff employed, so that we are ready to go when are permitted to re-open.

Check-In and Check-Out Requirements

Electronic Attendance Records

Because our Center accepts state subsidized families, Washington State Licensing regulations requires our Center to use a verified electronic attendance records system. We use the Procare Parent Engagement system. This software uses electronic signature capture and a personal identification number (PIN) to ensure authenticity. All individuals who will be regularly or repeatedly dropping off or picking up children from our Center must be registered in Procare.

Door Codes (PINS)

The Procare Parent Engagement system will randomly assign all individuals listed as authorized release persons with a 4-digit code upon enrollment. Door code PINS are specific to each individual and allow us to precisely track every person who enters our facility. For security reasons door codes are normally only assigned to parents and/or guardians.

DO NOT SHARE YOUR DOOR CODE/PIN WITH OTHERS!!

If families have other individual(s) who pick up or drop off on a regular basis, they can request to have that individual's PIN code activated for door entry. Door codes will provide access to any of our exterior entry doors during normal business hours.

Signing In and Out of Care

Upon arrival at the Center, all parents or authorized individuals must check child(ren) in/out of care using one of the following options:

Contactless Check-In/Out. Parents/Guardians can check children in/out of care from their car (must be within 500ft of the Center) by using the Procare Parent Engagement App on their phone or by scanning one of the QR codes located throughout our facility.

Check-In Kiosk. A check-in kiosk is located inside the main entry. All parents/authorized individuals can use their Procare PIN on this device to check children in/out of care. If you don't know your PIN code, just ask!

Physical Sign-In/Out Sheet. If the sign-in computer is unavailable, or an unregistered guest drops-off or picksup, we will require a physical signature on the attendance sheets located on a clip board in the main entry. We ask that individuals only use this method if they are not listed as a permanent authorized pick-up in Procare.

Authorized Release Persons

This is a secure facility. Entry past the check-in area will be restricted to individuals listed as authorized release persons in your child's file. If families wish to have someone else pick their child up from care, they need to complete a Temporary Pick-Up Authorization slip available at the check-in counter (look for the bright green form). In a pinch, families can call in the request. Photo identification will be required.

Please note: Unless we have a restraining order on file, any parent or guardian is legally allowed to pick up their child from care.

Audits

Our Center's attendance records are subject to audits by various governing bodies including, the Department of Children, Youth, and Families (DCYF), Working Connections Child Care (WCCC), and the Department of Social and Health Services. Children's attendance records will be kept for the period of time designated by the State after enrollment eases. Any fines directly related to a client's failure to correctly follow the procedures listed in this policy will be forwarded to the offending party.

About Our Program

We Believe...

Children have the right to learn in a nurturing, safe environment where they and their families feel welcome, comfortable, and secure. Our goal is to provide an environment that infuses play with rich learning experiences helping your child build self-confidence, social skills, and academic readiness. As early educators, we aspire not only to help children learn the fundamental skills necessary to succeed in life but to instill in them a life-long love of learning.

Designing the Right Environment

Creating an active and engaging learning environment is all about thoughtful design. Our goal is to create a Center culture that reflects the children as individual learners while showing respect towards their families and cultures. From the moment they walk through the door, children and families should experience a warm, welcoming, homelike feel, building a sense of community and security. This sentiment is accomplished, in part, by having a childcentered focus throughout the entire facility and emphasizing a sense of softness in color, furnishings, lighting, and displays.

We designed all our classrooms around the nine basic interest areas or learning Centers outlined in the Infant/Toddler and Early Childhood Environment Rating Scales (Harms, Clifford, & Cryer, 2017/2014). The classroom materials are thoughtfully organized, easily accessible, and presented in a manner that invites children to immediately begin exploring with their bodies and minds. We firmly believe that a high-quality early learning program should provide children with easy access to an ample rotation of clean, beautiful, open-ended materials. Doing so provides the opportunity for children to make choices, engage in their own interests, and be active participants in their own learning.

Emergent Curriculum

At Robyn's Nest, our emergent curriculum places the child at the center of the learning process. Emergent curriculum is a dynamic and child-centered approach to early childhood education and curriculum planning that prioritizes children's interests, natural curiosity, and evolving developmental needs. This child-centered approach supports deeper engagement, encourages creativity, and nurtures a love of learning by making each educational experience uniquely relevant to every child.

Our teachers develop lesson plans based upon the interests of the children, the developmental learning objectives for each particular age group, and individual child observations/assessments. Often, they revolve around a theme. A theme can come from topics being studied within the class like a book, experience, or local event, or be inspired by seasonal, cultural, or other influences. Themes encourage the children to learn through play in both their handson learning experiences and their environment. The focus here is not on rote memorization and scripted lessons, but rather on teaching social, emotional, physical and cognitive skills.

It is important to remember that children learn most effectively through engagement with peers and materials when they have a choice. The role of our teachers is to provide meaningful educational experiences that focus on what children value, and to observe, support and facilitate deeper learning. It is also to create a classroom community where children feel safe to make mistakes, take risks, and fail all while continuing to persevere at a task. And sometimes, it is just a matter of using developmentally appropriate practices to take advantage of one of life's many teachable moments to extend learning

About Our Program

Outdoor Play

Growing bodies need room to run and play. After all, not everything in life can be learned within the four walls of a classroom. We strive to provide ample opportunities for the children to get outside and stretch their legs and imaginations so please dress your child for ALL weather conditions; we will be going outside.

If we are unable to go outside due to inclement weather (or smoke) alternate large-motor activities will be provided indoors.

Off-Site Activities (Field Trips)

Mighty Lion, Super Star, and Camp Alliwannado children will frequently participate in off-site activities. Students will either walk or be transported using our Center activity bus. Families will be notified in advance and will be required to sign a written consent form.

Water Activities

Water play is an essential sensory experience for young learners and a welcome respite on hot summer days. Indoors or out, water play releases energy. It can be both invigorating or relaxing and calming for young children. It's an amazing sensory experience introducing them to textures (slippery, slimy...) and temperatures. It will also help master the pincer grip which will enable them to hold a pencil correctly at school. Not to mention that it's just good clean fun.

Water activities will be supervised at all times. Water play containers will be emptied after each use and stored in a manner that prevents the collection of water when not in use. At least one additional staff member than would otherwise be required will attend off-site experiences that have access to bodies of water four or more inches deep (for example, a park with a lake or stream). A certified lifeguard will also be present when children are swimming, or the water is more than twenty-four inches deep.

Animal Interactions

Families should be advised that we will occasionally participate in activities that involve animals. If your child has allergies or another potential health risk associated with animals, please notify your child's teacher. See our **Animal Policy** in this document for further information.

Religious and Cultural Activities

We respect each child's right to practice and share their family's culture and chosen religion so long as it does not bring physical harm to the child or other children in the Center. Feel free to talk to your child's teacher or the Center Administration about ways we can incorporate your customs and traditions into our curriculum.

Holidays, Birthdays and Other Celebrations

Our Center celebrates New Year's Day, Groundhog's Day, Dr. Seuss's Birthday, Valentine's Day, St. Patrick's Day, Easter, Mother's Day, National Teddy Bear Picnic Day, Father's Day, Grandparent's Day, the 4th of July, Halloween, Thanksgiving, Christmas, and many other special occasions in a non-religious manner.

Birthdays are very special days, therefore or near your child's birthday we will throw a party to celebrate! There's no need to bring a thing! We will supply everything necessary to make your child's day one to remember. A birthday crown, balloon, and gift are given to the birthday child as we sing them a special birthday tune. Each member of your child's class will receive a special snack. And just to make the day a little sweeter—your child will get a custom "just-for-me" cake from Just American Desserts to take home. This service is provided at no extra charge to families!

Our Classrooms

Baby Bears Classroom Toddlers (12-30+ months)

Toddlerhood is a time of astonishing growth. In the short span of a year or so, your child experiences an explosion of language, along with dramatic advancement in fine and gross motor control, problem-solving ability, independence, and social interaction. Our Baby Bears classroom offers an environment where toddlers can safely explore, investigate, and nurture these skills.

There is no other way to put it - toddlers are busy, busy, busy. They are constantly on the move trying out their newly acquired skills of walking, climbing, saying "no", and getting out every toy they can find. Our teachers will provide opportunities to encourage and expand this blossoming independence throughout the day.

The teacher-to-child ratio for this classroom is 1:7, with a maximum group size of 14. However, we prefer to only enroll a maximum of 12 children in this classroom and generally have an additional teacher scheduled to assist during busy times like diaper changes, meals and outdoor play. Our goal is to provide a safe, secure "home away from home" where your little one can learn, play and grow under the close guidance and supervision of their teachers.

Little Monkeys Classroom Early Preschool (30 months - 4 years)

In the dynamic environment of our Little Monkeys classroom children begin to acclimate to a schedule within a whole group setting. Our child care approach for two- and three-year-olds is based upon their natural curiosity and willingness to try new things. Hands-on learning and play keep children actively engaged and continuously interested in understanding more about themselves, their friends and family, and the world around them.

As Little Monkeys grow, they gain a more profound sense of independence and confidence in their abilities. New skills may include handwashing, self-feeding, fine motor coordination, and toilet training. In addition to basic skills, your child learns about self-direction, self-reliance and self-esteem.

The teacher-to-child ratio for this classroom is 1:10, with a maximum group size of 20. However, we prefer to only enroll a maximum of 17 children in this classroom. An additional teacher is scheduled to assist during the busiest part of the day. This helps circle time, small groups, toilet training/diaper changes, meals and outdoor play go a little smoother.

Mighty Lions Classroom Potty-Trained Preschool and Pre-Kindergarten (3½ - 5 years)

We believe academic learning is most effective when it is playful and exploratory. Our Mighty Lions teachers skillfully weave in academic goals and objectives as they build on what children can do and challenge them to try new things. Through a balance of child-directed and teacher-initiated activities children are encouraged to contribute their own ideas and use their own problem-solving strategies to express their own individuality, as well as appreciate the unique traits of others.

Our full-day program and small group size offer the opportunity for individual attention and preparation for elementary school. A healthy balance of academics and socialization are the perfect steppingstone for a positive school experience.

The teacher-to-child ratio for this classroom is 1:10, with a maximum group size of 20. Similar to our other classrooms, an additional teacher is scheduled to assist during the busiest parts of the day.

Our Classrooms

Super Stars Classroom Before and After School Care (K-12 years)

School-age children want to feel all grown up, yet they still crave comfort and security. They want to be heard, listened to, and respected, and have the ability to influence the decisions regarding the course of their day. So, instead of just "boring old daycare" our Super Stars program is designed to support their expanding interests, both before and after school.

Our program maintains an atmosphere that encourages flexibility and allows for freedom of choice within appropriate guidelines. Our goal is to promote experiences and opportunities that enhance rather than duplicate that of the school day. Super Star teachers will provide a balance of organized and self-selected activities where children may choose to complete homework, play games, create crafts, read books and more all in a positive, supportive atmosphere.

Camp Alliwannado School-Age Summer Program (K-12 years)

When summer arrives at our Center, the Super Stars classroom is transformed into the ultimate summer camp! Camp curriculum includes engaging weekly themes and abundant on and off-site experiences.

This is a full-time summer camp that takes the place of our Super Stars program during the summer months. Priority enrollment is given to children currently enrolled in our Super Stars classroom, siblings of other children enrolled at our Center, and children who have previously attended our Center. Any other available openings will be posted by June 1st each year. Due to high demand, families enrolling in this program will be required to sign a contract agreeing to pay the tuition fees for the entire summer break (through Labor Day) regardless of attendance or early withdrawal.

A non-refundable Camp fee is required by April 1st to reserve a spot for existing clients. Families who are not currently enrolled will also need to pay for their child's first weeks' tuition. Please note: camp fees are not covered by State Subsidy.

The teacher-to-child ratio for school-age programs is 1:15.

Classroom Supplies List

~ What to bring to Daycare ~

Diapers/Pull-ups. 1 week supply, minimum

Diaper creams, ointments, powders, lotions and other medications*

Teething aids:*

Baby Bears 1-3yrs

Infants Motrin or Ibuprofen may be dispensed with parental consent. Teething tablets, Orajel, Tylenol, and Acetaminophen require a doctor's note or Rx.

Change of clothing, 2 complete sets - more if potty training

Small nap blanket. Needs to fit in a shoebox-size container

Appropriate outdoor clothing and footwear

Pacifier (if needed)



Diapers/Pull-ups. 1 week supply, minimum

Diaper creams, ointments, powders, lotions, lip balms, and other medications*

Change of clothing. 2 complete sets - 5 if potty training!!

Small nap blanket. Needs to fit in a shoebox-size container

Appropriate outdoor clothing and footwear



21/2-4yrs

Mighty Lions 31/2-5yrs

Change of clothes. 1 complete set

Appropriate outdoor clothing and footwear

Any Medications*



School-Age K-5th grade

Backpack for school supplies.

Change of clothes. If prone to accidents

Appropriate outdoor clothing and footwear.

Any Medications*



Change of clothes.

Appropriate outdoor clothing and footwear. Will need closed-toed & water shoes Swim suit.

1st-5th grade

Any Medications*

ALL MEDICATIONS MUST BE CHECKED IN THROUGH THE FRONT OFFICE

What to **NOT** bring to daycare:



Bottles





Electronics





Food or Drinks



Money

Items from Home

Over-the-Counter (OTC) and Prescription Medications

All medications, whether over the counter or prescription, must be checked in through the front office. This includes common over-the-counter items such has cough drops, diaper creams, lotions, and lip balms.

Families will need to complete a Medication Authorization form so that we can administer these items in accordance with physician's/manufacturer's directions. See the Center Health Care Policy for further details.

Car Seats, Backpacks and Bags (Including Diaper)

For the safety of all the children in our care items such as car seats, boosters, backpacks, and bags (including diaper bags) are not allowed in classrooms. For your convenience, you may check these items with front office staff upon drop-off. Please make sure items are labeled for easy identification.

Shoes and Clothing

Health codes stipulate that children need to wear a covering on their feet (i.e.: socks, shoes, etc.) to help prevent the spread of fungal infections and injuries. Sandals must have ankle straps. NO FLIP-FLOPS!

Dress your child so that they are free to play on the floor or outside. Keep in mind that children feed themselves and enjoy messy play, messy art activities, and just getting plain messy!

Families are to provide 1-2 complete changes of clothes for their child to be left here. Please label all clothing with your child's first and last name for easier identification and check often for size. Families will be asked to replace these items after accidents or as their child grows and weather conditions change.

Blankets

If your child is enrolled in classroom that naps, please send a small blanket for them to use. Blankets must be able to fit into our blanket storage cubbies (about the size of a shoe box) and remain at the Center for weekly laundering.

Toys, Food and Other Items

Both Little Monkeys and Mighty Lions have assigned days and times for "sharing". Check the posted weekly curriculum or ask your child's teacher when their turn is. Please only allow your child to bring items on this day.

If your child chooses to bring something, it must be with the understanding that we cannot be held responsible for its safe return. Please do not send jewelry or toys with small parts which may pose a choking hazard to younger children. Figurines and playthings that promote violence are also not permitted. All items must be able to easily fit in your child's cubby for storage when not in use. If you are not sure, please ask your child's teacher.

Some children in our care have highly sensitive food allergies and even the mere contact with a surface that has touched a particular food item can cause an anaphylactic reaction. Any outside food or drink will be discarded immediately unless it has been prearranged with the Center administration or cook.

Items such candy, including gum, money and portable electronic devices are not allowed at the Center. School-Age children who bring these items will be asked not to remove them from their backpacks.

Lost and Found

Each classroom has a bin for unclaimed items located near the children's cubbies. Please check this frequently for lost/missing belongings. Due to limited space, items may be disposed of or donated after 30 days.

Daily Routines

Sample Classroom Schedule

Classroom schedules are frequently changed and updated to meet the needs of the children in our care. Families can find the current daily schedule prominently posted in each of our classrooms. Below are simplified examples from a few of our classrooms. Please feel free to talk to your child's teacher if you have any questions about your child's day.



	Little Monkeys
7:00am	Free Choice of Centers
	Clean-up. Wash our hands.
8:30am	Breakfast
	Individual Toileting / Diapering Wash our hands.
9:15am	Circle Time
9:30am	Small-Group Activities
	Clean-up. Get ready to go outside.
10:15am	Outdoor Play 45 min sand/water table available (weather permitting)
	Put away our things. Wash our hands.
11:00am	Free Choice of Centers
	Individual Toileting / Diapering Wash our hands.
	Put away our things. Wash our hands.
11:30am	Lunch
	Clean-up. Wash our hands.
12:00pm	Rest Time / Quiet Activies
	Individual Toileting / Diapering Wash our hands.
2:30pm	Afternoon Snack
	Clean-up. Wash our hands. Get ready to go outside.
2:45pm	Outdoor Play 45 min sand/water table available (weather permitting)
	Put away our things. Wash our hands
3:30pm	Free Choice of Centers (all centers open except sand/water)
	Individual Toileting / Diapering Wash our hands.
4:30pm	Small-Group Activities
	Clean-up. Get ready to go home.

	Mighty Lions
7:00am	Free Choice of Centers
	Clean-up. Wash our hands.
8:45am	Breakfast
	Clean-up. Wash our hands.
9:10am	Circle Rug "Morning Meeting"
9:30am	Small Group Activities
	Clean-up. Get ready to go outside.
11:00am	Outdoor Play 30 min sand/water table available (weather permitting)
	Put away our things. Wash our hands.
11:45am	Lunch
	Clean-up. Wash our hands.
12:15pm	Circle Rug Activity
12:30pm	Small Group Activities
2:00pm	Outdoor Play 30 min sand/water table available (weather permitting)
	Put away our things. Wash our hands
2:45pm	Afternoon Snack
	Clean-up. Wash our hands.
3:00pm	Free Choice of Centers
3:30pm	Outdoor Play 30 min sand/water table available (weather permitting)
	Put away our things. Wash our hands.
The second secon	Free Choice of Centers
4:00pm	(all centers open except sand/water)

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September 2025

Rest and Sleep Policy

Rest and Sleep Schedule by Classroom

Baby Bears Classroom Toddlers (12-30+ months)

In the Baby Bears classroom, we recognize the importance of individualized sleep routines for our youngest children. While a daily rest time is scheduled, toddlers under 30 months will be permitted to follow their own sleep schedules as needed. This approach respects each child's unique rhythms and ensures that their developmental needs are met.

Since the DCYF mandates that we follow individual sleep schedules for children under 30 months of age, occasionally a child will sleep through a meal. When it is possible to safely save a meal or snack until the child awakes, we will. Otherwise, if the next scheduled mealtime is more than 30 minutes away, we will serve a nutritionally comparable substitute.

Little Monkeys Early Preschool (30 months - 4 years)

All preschool-age children in our Little Monkeys classroom will be offered a supervised daily rest period if they show a need for rest. For those who do not require rest, quiet activities will be provided to maintain a peaceful environment. This allows children to recharge or engage in low-energy activities based on their individual needs.

Mighty Lions Pre-Kindergarten ($3\frac{1}{2}$ - 5 years)

The Mighty Lions Pre-Kindergarten classroom is designated as a non-napping space. However, older children who may need rest will have the option to participate in quiet activities or relax in one of our cozy areas, ensuring comfort and tranquility for those who seek it.

Family Preferences

Families who prefer that their pre-kindergarten age child continue to receive a rest period during the school day have the option of keeping their child in the Little Monkeys classroom. This arrangement allows for flexibility, ensuring that each family's preferences are respected and that children's individual needs for rest and sleep are accommodated. By providing this choice, we support both the well-being of the children and the desires of their families regarding rest routines at school.

Diapering Policy and Procedure

Diapers and Baby Wipes

Families are to supply all diapers, which must be disposable for sanitation reasons. Children evacwill be checked hourly and/or changed at least every two hours unless they are napping. Please bring enough diapers to last at least one full week. This saves a lot of time and hassle for both families and staff.

Families will be notified when they need to restock. Families will not be allowed to leave their child in care if they do not have enough diapers to get through the day.

Kirkland baby wipes are offered at no charge. However, if your child has sensitive skin you are free to provide wipes at your own expense

Ointments, Creams and Powders

Diaper ointments, creams and powders are considered medications and must be processed through the Center Administration. DO NOT bring these items directly to the classroom. Families must complete a Medication Authorization so that we can administer them in accordance with manufacturers' directions. Families will receive a written record at the end of each day stating when and how medication was dispensed.

Diapering Policy

Children will not be left unattended on the diaper-changing table. Safety belts will not be used (they are neither washable nor safe). The diaper changing table will only be used for diapering (toys, pacifiers, papers, dishes, etc., will not be placed on diapering surface). The diaper changing surface will remain impervious to moisture and intact (no tears, rips, duct tape).

Diapering Procedure

The following diapering procedure will be posted (All About Diapering ITERS-R) and followed at our Center:

- · Wash Hands.
- Gather necessary materials.
- Place child gently on table and remove diaper. Child is not left unattended.
- Dispose of diaper in container with cover (foot pedal type).
- Clean the child's diaper area from front to back, using a clean, damp wipe for each stroke.
- Apply topical cream/ointment/lotion when written consent is on file.
- Wash Hands (remove gloves if worn and then wash hands). A wet wipe or damp paper towel may be used for this hand washing only.
- · Put on clean diaper. Dress child.
- Wash child's hands (May use a wet wipe for young infants).
- · Disinfect changing pad.
- · Wash Hands.

^{**} If gloves are used, all of the above steps must still take place **

Potty Training Policy



program believes that potty training is a natural developmental process that should be approached with patience, consistency, and positive reinforcement. While we work closely with families to support each child's individual timeline and needs, we have found that we experience the best results when we are able to focus our efforts on a small group of students (4-5) at a time.

Our teachers look for the following signs of readiness when selecting children to potty train:

- Staying dry during naps and for periods of two hours or more during the day
- Showing interest in using the toilet or potty
- Ability to communicate toileting needs verbally or through gestures

Families must also agree to:

- Provide at least four to five complete changes of clothes daily
- Supply pull-ups, underwear, and any special toileting supplies
- Replace soiled clothing and supplies promptly as needed
- Maintain consistency between home and center approaches

Toilet training involves many steps (discussing, undressing, going, wiping, dressing, flushing, and hand washing). Our staff will reinforce the child's success at each step and document children's efforts in their daily report so families can follow their progress.

It's important to remember that at this stage children are just learning to recognize when their bodies need to use the toilet and must be able to act quickly to avoid having accidents. Dressing children in clothing that is easy for them to remove will increase their odds of success. When accidents do occur, staff will respond calmly and reassuringly to help assist the child with cleaning up and changing their clothing. Soiled items will be put in a sealed bag in children's cubbies for families to take home and any affected items/areas will be sanitized according to the center's health care policies. Children will never be punished or humiliated for accidents.

We believe in supporting each child's individual pace without rushing the process. We will never force a child to sit on the toilet against their will or for long periods of time if they do not want to. Families are encouraged to openly communicate with their child's teachers about potty training progress and setbacks. Together we can discuss ways to adjust our approach based upon what works best for each individual. Sometimes, if a child fails to make any forward progress for an extended period of time teachers may determine that a break from training is needed.

While our staff want to support any potty training efforts families are making at home, <u>our policy</u> is to allow newly enrolled or transferred children to settle in for a month or two (at minimum) to get used to the classroom routine before starting to train at the center.

Children will be considered fully potty-trained after they have been "accident free" for four consecutive weeks.

August 2025

Biting Policy and Procedure

Teething Aids and Medications

Teething Aids

Pacifiers and teethers are great comfort items and can help soothe the discomfort caused by teething. When our staff notice children are mouthing items or having teething discomfort, we may offer them a pacifier or teether to chew on. While pacifiers need to be supplied from home, we provide a large variety of chilled and leashed teethers here at the Center for children to use. Pacifiers and teethers are stored to minimize cross contamination and are sterilized regularly.

PLEASE NOTE: Toddlers will need to be weaned from pacifier use before they transition to the Little Monkey's classroom.

Teething Medications

We can administer Infant's Motrin (Ibuprofen) in accordance with manufacturers' directions if parents/guardians complete a Medication Authorization form. Other pain relievers such as: Infant's Tylenol (Acetaminophen), teething tablets and Baby Orajel require a licensed health care provider's written prescription along with the parent/legal guardian's consent.

Biting Policy and Procedure

Why Children Bite

Children biting other children is one of the most common and most difficult behaviors in group child care. It can occur without warning, is difficult to defend against, and can provoke strong emotional responses in the biter, the victim, the parents, and the caregivers involved.

For many toddlers, the biting stage is just a passing problem. Toddlers try it out as a way to get what they want from another toddler. They are in the process of learning what is socially acceptable and what is not. They discover that biting is a sure-fire way to cause another child to drop what they are holding so the biter can pick it up. However, they experience the disapproval of the adults nearby and eventually learn other ways of gaining possession of objects or expressing difficult feelings.

For other children, biting is a persistent and chronic problem. They may bite for a variety of reasons: teething, frustration, boredom, inadequate language skills, stress or change in the environment, feeling threatened, or to feel a sense of power.

No matter what the cause, biting in a group situation causes strong feelings in all involved. Our Center has developed the following plan of action to be used when biting occurs in any of our rooms. Per DCYF regulations, all incidents of biting will be documented.

Procedure When Bites Occur

The Biter:

- The biter will be immediately removed with no emotion, using words such as "biting is not okay it hurts."
- Staff will avoid any immediate response that reinforces the biting or calls attention to the biter. Attention is focused on the victim.
- The biter is not allowed to return to the play area and is talked to on a level that the child can understand. (ex: "I can see that you want that truck, but I can't let you hurt him. We don't put our teeth on people.")
- Redirect the child to other play.
- Staff will fill out an injury/incident report to inform parents and verbally inform Center Administration.

The Victim:

- Separate the victim from the biter.
- Staff will provide comfort and administer first aid, if necessary.
- Staff will fill out an injury/incident report to inform parents with a photo of injury.

Biting Policy and Procedure

Biting Policy and Procedure (continued...)

If Biting Continues

Staff will:

- Meet with Center Administration on a routine basis for advice, support and strategy planning.
- · Chart every occurrence, including attempted bites and indicate location, time, participants, behaviors, staff present and circumstances.
- Shadow children who indicate a tendency to bite:
 - > As much as possible, plan to head off biting situations before they occur.
 - > Teach non-biting responses to situations and reinforce appropriate behavior.
 - > Adapt the program to better fit the individual child's needs.
- Shadow children who tend to be bitten:
 - > Head off biting situations whenever possible.
 - > Teach responses to potential biting situations: "NO! or "Don't hurt me!"
- · Work together as partners with the parents of both children and frequent victims to keep all informed and develop a joint strategy for change.
- · Consult with Early Learning Professionals, behavior specialists, or mental health consultants for additional guidance and resources.
- · Consider early transition of a child "stuck" in a biting behavior pattern for a change of environment, if developmentally appropriate.

Temporary Exclusion

Our Center has a responsibility to ensure the safety and well-being of all children enrolled. When a biting incident occurs, whether it involves actual bites or attempts, the Center Administration will assess the situation carefully. The frequency and severity of the behavior are considered along with the child's age in determining the appropriate response. In some cases, depending on these factors, the Center may decide to send the child home for the remainder of the day. This action is taken at the discretion of the Center Administration and is intended to ensure the ongoing safety and well-being of all children present.

Expulsion Due to Biting

The Center may decide to permanently expel a child if they continue to pose a safety concern to themselves or others. This decision may be made when, despite reasonable modifications and collaborative efforts between teaching staff and the child's family, there is no significant reduction or elimination in the frequency or severity of biting. The Center strives to work closely with families and staff before reaching this decision, but the safety of all children remains the highest priority.

See our Center's Expulsion Policy for more information.

Food and Nutrition

Child and Adult Care Food Program (CACFP)

Our Center serves meals and snacks according to the guidelines set forth by the USDA Child and Adult Care Food Program (CACFP).

Children are served the required minimum portion size of each menu item. If a child completes their entire meal, they are allowed to ask for a second serving of one or all components of the meal so long as sufficient time remains in the meal period.

If a child refuses to eat we will offer the meal or snack again two more times. If they still refuse to eat, they may be asked to remain seated at the table until meal service is complete (depending on the meal). Please understand, we will not force children to eat! We will, however, indicate on your child's daily report how much of each meal and snack your child ate.

Menus

Menus are on display in the front lobby. Copies are available upon request or can be downloaded from our website. Please keep in mind that we revise our menus annually and occasionally have to make substitutions due to market availability. A separate summer menu cycle runs mid-June through the end of August.

Our facility is "Nut Free." We do not serve any products that contain peanuts or tree nuts and try our best to exclude the purchase and use of food that may be processed at a facility where the equipment may have been used to process nut products. We also ask that no outside food is brought into our Center without our Center administration's and/or cook's prior approval to limit other accidental exposures.

Outside Food and Drink

Some children in our care have highly sensitive food allergies and even the mere contact with a surface that has touched a particular food item can cause an anaphylactic reaction. Any outside food or drink will be discarded immediately unless it has been prearranged with our Center administration and/or cook.

Food Allergies

If your child has been determined by a doctor to be disabled, and the disability would prevent your child from eating the regular meals at the Center, you must have your child's doctor complete a CACFP Medical Disability Statement that describes the disability and prescribes the alternative foods needed, verifying that special meal components are needed due to a disability. We will then work with clients on a case-by-case basis to make sure their child is receiving nutritionally balanced meals while in our care.

Children's food allergies will be posted in locations where food is prepared and served.

Milk and Milk Substitutions

Children who are 12-24 months old will be served unflavored whole milk. Children two years of age and older will be served unflavored low-fat (1%) or fat-free milk.* Breastmilk is considered an allowable fluid milk of any age.

*Low-fat (1%) or fat-free flavored milk may occasionally be served to children six years of age and older during special events such as field trips.

If your child cannot drink cow's milk due to medical or other special dietary needs but does not have a diagnosed medical disability, you may complete a Request for Fluid Milk Substitution form. Our Center currently provides a USDA approved soymilk alternative that is nutritionally equivalent to cow's milk. Families may provide other USDA approved lactose-free options at their own expense.

Food and Nutrition

Opting Out of Center Meals (WAC 110-300-0190)

If, for whatever reason, families are required to (or desire to) opt out of our Center's food program and provide their own meals, they can do so with the understanding that all meals, snacks, and beverages must still comply with all current USDA CACFP guidelines, meal patterns, and serving sizes. See below.

BREAKFAST Serve Milk, Vegetables and/or Fruits, Grains*

Component	Ages 1-2	Ages 3-5	Ages 6-18	Adults
Milk	1/2 cup	3/4 cup	1 cup	1 cup
Vegetables, Fruits or Both	1/4 cup	1/2 cup	1/2 cup	1/2 cup
Grains*	1/2 oz eq	1/2 oz eq	1 oz eq	2 oz eq

^{*} Meats and meat alternates may be served in place of the entire grains component at breakfast a maximum of three times per week.

LUNCH/SUPPER Serve All Five Meal Components

Component	Ages 1-2	Ages 3-5	Ages 6-18	Adults
Milk	1/2 cup	3/4 cup	1 cup	1 cup*
Vegetables	1/8 cup	1/4 cup	1/2 cup	1/2 cup
Fruits	1/8 cup	1/4 cup	1/4 cup	1/2 cup
Meats/Meat Alternates	1 oz eq	1 1/2 oz eq	2 oz eq	2 oz eq
Grains	1/2 oz eq	1/2 oz eq	1 oz eq	2 oz eq

^{*} A serving of milk is not required at supper meals for adults.

SNACK Select Two of the Five Meal Components

Component	Ages 1-2	Ages 3-5	Ages 6-18	Adults
Milk	1/2 cup	1/2 cup	1 cup	1 cup
Vegetables	1/2 cup	1/2 cup	3/4 cup	1/2 cup
Fruits	1/2 cup	1/2 cup	3/4 cup	1/2 cup
Meats/Meat Alternates	1/2 oz eq	1/2 oz eq	1 oz eq	1 oz eq
Grains	1/2 oz eq	1/2 oz eq	1 oz eq	1 oz eq

Families will need to complete a form "opting out" of ALL Center provided meals and agree to the following terms:

- Our Center is a NUT FREE facility, therefore all meals, snacks, and beverages provided must be NUT FREE.
- All items must be labeled with your child's first and last name.
- Commercially prepared items must be served by the expiration/use by date.
- Teachers are not allowed to microwave food. All items must be able to be served cold or at room temperature.
- At least one snack per day must include a fruit or vegetable (WAC 110-300-0185).

Families should note that per WAC 110-300-0190, our Center must supplement any meal that does not satisfy USDA CACFP guidelines. Since our Center does not receive any USDA funding for supplementing meals of nonparticipants, families will be required to enroll their child in the CACFP if there are ongoing or repeated issues of missing components.

Our Teaching Staff

About Our Teachers

Every one of our teachers goes through the same rigorous hiring process to ensure their dedication and passion and their ability to meet the developmental and emotional needs of your child. We confirm all professional references and conduct national criminal background screenings. Each member of our staff meets or exceeds the qualification requirements set by state law. Staff also complete a full orientation and attend a comprehensive training program.

Teacher Qualifications (WAC 170-295-1010 thru 1120)

All lead teachers are required to complete 30 hours of training through the Washington State Training and Registry System (STARS) in their first three months of becoming a teacher and ten hours every year thereafter. We encourage our teachers to take college courses in Early Childhood Education and/or Child Development.

All of our teachers are required to have:

- A cleared federal criminal history background check
- · State driver's license or other photo identification
- basic first aid training
- infant/child and adult CPR training
- blood borne pathogens / HIV training
- · food and beverage service worker's permit
- a negative tuberculosis skin test
- proof of MMR and COVID vaccines (or legal exemption status)

Professional Development

Every year, we set aside time for developing and elevating our employees' professional skills. We strongly believe training allows our teachers to better assist you and your child. This continued commitment to our own education lets us provide outstanding quality care in our Center. Additionally, the time we spend on our professional development lets us meet the states' child care licensing regulations for ongoing training.

Don't forget! Check our Center Events Calendar to see when training days are scheduled, so you can make alternate child care arrangements.

Consistency/Continuity of Care

Consistency/Continuity of care is a term used to describe programming and policies that ensure children are consistently engaged in high-quality early learning experiences with consistent caregivers who are sensitive and responsive to a young child's signals and needs. It is our Center's policy to assign teachers to work with a consistent group of children whenever possible with a goal of building long-term, trusting relationships.

Our Center believes that for young children to grow and thrive, they need to form stable relationships with caring adults who are invested in their healthy social, cognitive, physical and language development. This begins with the immediate family and extends to other family members, neighbors, early care and education providers, health-care providers, and other community members. When caregivers foster relationships with young children that are nurturing, individualized, responsive, and predictable, they are supporting the development of healthy brain architecture that provides a strong foundation for the child's immediate and future learning, behavior, and health.

Child Abuse Reporting Requirements

Robyn's Nest staff are mandated reporters. We are required by law to report any signs of neglect, exploitation or abuse of any child in our care. We also required to report individuals who arrive at this Center under the influence of alcohol or drugs to the authorities.

Family Partnerships in Learning

Honoring Diversity

Every child care center includes a diverse group of children. Even when all the children seem to come from similar family structures and backgrounds, the children will all have individual capabilities, interests, needs, skill levels, and physical characteristics. At Robyn's Nest, diversity is valued and celebrated. Our Center believes that each child is a unique individual and that all children deserve to be nurtured, loved, and provided equal opportunities to learn.

Inclusive Practices and Equity Statement

Every child is different. Some children have disabilities that are identified at birth; other children have disabilities that are not identified until later. It is important to remember that children learn at different rates and in different ways and that the benefits of inclusion extend beyond just benefiting children with disabilities.

Our philosophy of inclusion involves the careful assessment of the needs of each child and the application of measures that will meet those needs. Our Center believes all children deserve to be in a high-quality and developmentally appropriate child care program. We recognize that each child is an individual and that each child must be allowed to develop at his or her own pace. We believe it is our responsibility to provide (and modify) the classroom environment and curriculum to meet the individual needs of all the children in our care.

We are committed to providing equitable access and inclusive learning opportunities for all children. Teachers adapt materials, routines, and environments to support participation of children with diverse abilities and cultural backgrounds. Staff receive annual training in culturally responsive practices and collaborate with specialists when needed to support individual developmental goals.

Family Engagement and Collaboration

At our Center, we consider families to be vital partners in every aspect of their child's educational journey. Each year, we work collaboratively with families to establish a family engagement goal and develop a corresponding action plan. This plan is directly informed by family input, ensuring that their perspectives and priorities are at the forefront of our efforts. By gathering and incorporating feedback, we foster a culture of collaboration that encourages meaningful participation and shared responsibility for children's learning and growth.

Opportunities for Participation

Families are encouraged to take an active role in classroom activities, off-site events, and Center-wide celebrations. Family members are also invited to share their cultures, talents, and traditions with our classrooms. Through such engagement, families help build a strong sense of community and create occasions to honor and celebrate the diverse backgrounds and traditions represented within our Center. This inclusive approach strengthens connections among children, families, and staff.

Our Center provides many opportunities throughout the year for families to participate and connect. We try our best to vary the days and times of these events to allow for greater participation. If you are interested in attending or volunteering, please let us know.

PLEASE NOTE: Volunteers are not allowed to have unsupervised access to a child that is a non-family member.

Ongoing Support and Resource Sharing

Our staff are committed to supporting families in their caregiving roles by regularly sharing valuable parenting resources, community information, and referrals as needed. This support extends beyond the classroom, recognizing the important role that families play in the overall development and well-being of their children.

Continuous Improvement Through Feedback

We actively welcome and value feedback from families, recognizing that their insights are essential to our ongoing efforts to enhance the quality of our programs. By maintaining open lines of communication and working in partnership, we strive to create a nurturing and effective learning environment for every child in our care.

Communication with Families

Daily Communication (Procare Parent Engagement App)

We use the Procare Parent Engagement app for all family communication. Parents are required to download and use Procare to receive messages, photos, billing updates, attendance alerts, and announcements. Daily reports are shared through the app, and it serves as our primary communication platform between home and school. Other information, such as diaper changes and toileting, meal consumption, medication administration, behavioral incidents, and accident/injury reports are also tracked. This app is a great way for families and teachers to quickly communicate throughout the day.

Information on how to access the Procare Parent Engagement app will be provided upon enrollment. Families can opt to adjust the settings to receive notifications and updates as they occur or as an end-of-day summary. The app also notifies families of any minor behavioral incidents or injuries that may have occurred while in care. These reports become part of your child's permanent file. Hard copies are available to families upon request.

Monthly Newsletters

Our Center provides a monthly newsletter to keep families informed of upcoming events and new and changing policies. Monthly newsletters are posted on the Procare Parent Engagement app, our Center's website, Facebook page, and throughout the center. Hard copies are also available in the main lobby. Need one? Just ask!

Questions and Concerns

From time-to-time families may have a question or concern regarding their child's care, development, behavior or some other classroom matter. Please feel free to speak to your child's teacher. They spend the most time with your child and are dedicated to providing the best child care experience possible for your child. If they are unable to help you, or you are still concerned or unsatisfied, don't hesitate to speak to Center Administration.

Please understand: We know that emotions run high in matters that involve the care and treatment of your children. We promise to try our best to answer your questions to the best of our ability and to work with you to come up with a solution that works for everyone involved. However, threats, profane language, rude or aggressive behavior, or inappropriate physical contact with staff or the children in our care will not be tolerated. Any such actions will result in the immediate termination of service and be reported to the proper authorities.

Center Website

We recommend that all families frequently visit our Center's website (www.robynsnestspokane.com) to keep up to date on current Center policies, newsletters, and events.

Social Media

Our Center uses Facebook and other social media to share photos, updates and other information with our families and the community. We recommend that enrolled families follow us so that they stay informed throughout the day.

Conflict of Interest

We love to stay in touch, however, in an effort to maintain the professional status of Center staff and prevent any potential conflict of interest, babysitting and communication done outside of the Center (ie: texting, Facebook, Instagram, etc..) between staff members and clients is not permitted. Please feel free to contact staff in person or in any of the ways listed below:

> Phone: 509.928.4034 Fax: 509.928.0559

Email: admin@robynsnestspokane.com Website: www.robynsnestspokane.com Facebook: facebook@robyns.nest.playcare

Screeners, Assessments, and Family Conferences

Developmental Screenings

Developmental screeners are used to help identify children at risk for cognitive, motor, communication, or socialemotional delays. Developmental screening is important because it can help us celebrate when your child meets his or her developmental milestones. It is also important because it can help us to determine if your child needs additional support. Earlier support can lead to better outcomes as your child grows and develops.

The screener our center uses is the Ages and Stages Questionnaire (ASQ). ASQs are a parent/guardiancompleted tool used to monitor children's growth and development. Research shows that parents'/guardians' observations of their children are excellent predictors of developmental delays. By completing these screeners, families make the most of their in-depth knowledge of their children and become active partners in the screening process. ASQs are included in each child's enrollment packet. Families are asked to complete and return these forms prior to their child's first day in care and annually thereafter at the beginning of each school year.

Families are asked to indicate their preferred language for communication when they enroll. Families will receive the ASQ questionnaire in their home language whenever possible and are asked to return it within 10 days. We make every effort to conduct screenings and share results in each family's home language using one or more of the following methods:

- A bilingual staff member who can assist with translation (if available).
- Use of a translation app on a digital device such as cell phone or tablet.
- Professional interpretation services.
- Written translation of screening summaries.

Our teachers will conduct separate screenings on children within 45 calendar days of enrollment, with screenings repeated annually. The combined data from both parents and teachers ensures a comprehensive understanding of each child's developmental progress and needs, as each has their own observations and insights. Teachers will review completed ASQs, score the results, and upload the findings into each child's individual portfolio in Procare and provide suggestions for supporting development at home.

Sharing Screening Results with Families

Families will receive a notification on the Procare app when their child's screening has been completed along with an invitation to schedule a private conference to discuss the findings. During these discussions, teachers will help families understand the meaning of the results and explain how they relate to each child's individualized learning plan. Screening results will be communicated to families in a manner that is respectful, clear, and culturally responsive. Teachers will provide families with summaries of their child's screening outcomes in the family's preferred language whenever possible. If an interpreter is present for the meeting, our staff will review and reinforce confidentiality expectations with the interpreter prior to sharing any information.

Follow-Up Procedures for Developmental Concerns

If screenings reveal potential developmental concerns, staff work collaboratively with families to determine the next appropriate steps. This may include referrals to community resources such as early intervention programs, the local school district, or healthcare providers. This collaborative approach helps ensure that children receive timely and appropriate support, and that families are fully involved in decision-making regarding their child's next steps.

Continuous Improvement Based on Screening Data

Staff utilize screening data to guide individualized instruction and make adjustments to classroom environments as needed. Additionally, screening results may highlight areas where further staff training would be beneficial. This ongoing, reflective practice ensures that every child receives tailored support to foster their growth and development.

Screeners, Assessments, and Family Conferences

Informal and Formal Assessments

Child assessments serve as a vital tool for understanding and supporting each child's learning and development. Rather than functioning as formal tests, assessments are a practice of ongoing observation and information gathering. By regularly collecting data on every child's progress and needs, our center can effectively plan and deliver individualized instruction that fosters optimal growth and development.

At Robyn's Nest, we have developed a unique assessment tool specifically designed to align with the Washington State WaKIDS (Washington Kindergarten Inventory of Developing Skills) guidelines. WaKIDS serves as the state's kindergarten entry assessment, establishing a framework for evaluating children's development as they begin their school journey.

Our Commitment to Whole Child Assessment

Robyn's Nest is deeply committed to assessing the "whole child." This approach centers on providing children with opportunities to demonstrate their skills, knowledge, and abilities in natural and authentic ways. As children participate in daily routines and interact with their environment and peers, they are able to showcase their unique strengths and development. Teachers play a crucial role in this process by continually observing these interactions. Through these ongoing observations, educators gather valuable insights that guide both lesson planning and individualized instruction tailored to each child's needs, as well as the group as a whole.

Comprehensive Methods for Gathering Insights

To collect a thorough understanding of each child's progress, our dedicated teachers employ a variety of assessment methods. These include directly observing children as they move through their daily routines, capturing photographs that highlight significant moments of learning and growth, and collecting work samples that reflect development across multiple domains. By using these diverse strategies, Robyn's Nest ensures that assessments provide an accurate and holistic view of every child's abilities, strengths, and areas for further growth.

Initial Assessment

When a child first joins our center, an initial assessment is conducted within the first 30 days of attendance. This process helps us identify both the strengths of the child and any areas that may benefit from additional support.

Families are asked to indicate their preferred language when they enroll. To accurately assess a child's ongoing progress, it is important they are assessed in the language they use. If a child's home language is not English, we will make every effort to assess language skills in English and in the child's home language, to assess both the child's progress in the home language and in English language acquisition. Teachers will conduct screenings and assessments for domains other than language skills in the language that best captures the child's development and skills in the specific domain.

Assessment Frequency and Staff Development

Assessments are completed three times throughout the school year: once each in the fall, winter, and spring. The data gathered not only guides instructional planning for individual children and groups but also informs staff reflection and professional development, supporting ongoing improvements in learning outcomes across the program.

Sharing Assessment Information with Families

Assessment results will be uploaded into each child's individual portfolio on Procare. Families will receive a notification when their child's assessment has been completed along with an invitation to schedule a private conference to discuss the findings. Results will be shared in each family's home language whenever possible.

Kindergarten Transition

As children prepare to transition to kindergarten, families receive a comprehensive summary of assessment results, aligned with WaKIDS standards. This ensures that families and future educators have a clear understanding of the child's developmental progress and areas of achievement.

Screeners, Assessments, and Family Conferences

Family Conferences

Family involvement is extremely important to the success of children enrolled at our Center. As such, families will be offered the opportunity to have individual Family-Teacher conferences at least three times per year with our staff either on-site or over the phone. These conferences will generally coincide with the completion of individual screeners and assessments in the fall, winter, and spring and are an excellent opportunity for families to review the contents of their child's portfolio including observations, developmental checklists, and recent samples of their child's daily work. It is also a great time to address any questions and/or concerns that families or staff may have and confirm that the information in your child's file, such as emergency contact numbers and medical/immunization history, is accurate.

Record Keeping

A permanent record is maintained for all screeners and assessments conducted throughout each child's enrollment at our center. To ensure a thorough account of each child's developmental journey, individual portfolios are preserved for a minimum of eight years following the last date of enrollment. This practice guarantees a comprehensive record that supports ongoing evaluation and reflection on each child's progress.

Procare is used to monitor every instance in which screener, assessment, and conference information is shared with families. The system also tracks when parents review these documents, providing accurate data on family engagement in the child's development process.

If a parent declines or is unable to review their child's progress, the center records all efforts made to communicate with the family in the child's digital record. This approach ensures transparency and accountability, while maintaining open lines of communication regarding each child's developmental progress.

All screening and assessment information is confidential and stored securely.

Responsibilities

Teachers and administrative staff will ensure language preference is documented and followed.

The Director will ensure resources are available for translation and interpretation and provide training to staff.

Policy Review

Our center's screening and assessment process will be reviewed annually and updated as needed to ensure equitable family engagement.

Transitions

Transitioning To Our Center

The process of transitioning new students into our center is a collaborative effort that involves both parents and caregivers. To help children become comfortable in their new environment, we require at least one introductory visit to the center prior to enrollment. This will provide the opportunity for children to meet their caregivers and peers, which can ease the adjustment period.

In the initial days, it may be beneficial to begin with shorter attendance periods. This approach helps ensure that the child has a positive experience and minimizes any stress associated with the transition. We kindly ask parents to remain flexible during this period to support a smooth adjustment for their child

Daily Transitions

Trust is the foundation of our approach at Robyn's Nest. Each day, we invite parents to spend a few moments with their children at arrival, helping them to settle in comfortably. We discourage sneaking away without saying goodbye, as this can heighten a child's anxiety and uncertainty. Instead, we support open and honest farewells.

Parents and teachers collaborate to establish comforting routines—these might include placing the child's belongings in their cubby, assisting them with handwashing, and sharing a short book, a quick game, or a wave at the window before leaving. Our teachers are always present to provide comfort if a child becomes tearful. Parents are encouraged to call or message for updates; in many cases, children calm quickly once their parents are out of sight.

Separation Anxiety

Separation can be challenging for both children and their families, and it is perfectly normal to experience some anxiety during this time. Leaving behind familiar faces and entering a new environment is a significant change for anyone. It is important to remember that children learn through consistent experience that each goodbye, no matter how difficult, is followed by a happy reunion. Most children adapt to their new surroundings quickly, but families are always welcome to call for updates. Our teachers are more than happy to keep you informed about your child's progress.

Transitioning Between Classroom ("Bumping Up")

During their time at our Center, most children will experience several transitions—or "bumps"—as they move from one classroom to the next. While many children adapt quickly to a new room, especially when it is within the same facility with familiar teachers and friends, others may face more difficulty. Transitioning and adapting to change can take time for both children and adults. It is important to remember that these transition times offer valuable learning opportunities for everyone involved, and becoming comfortable in a new classroom is an ongoing process. Our experienced teachers are committed to gently guiding families through each step of this journey.

Transitioning to Kindergarten

A successful transition into kindergarten is best achieved when the child care facility, school, and family work together. By coordinating efforts, preschool and elementary programs help ensure that children maintain and build upon the gains made in preschool.

At Robyn's Nest, our preschool teachers prepare an individual portfolio for each child. Families may choose to share these portfolios with their child's new kindergarten teacher. The contents of each portfolio will depend on the length of the child's time at our Center, but generally include samples of daily classwork, artwork, and recent assessments. We recommend bringing the portfolio to your child's kindergarten evaluation before the new school year begins.

Each spring, the Center provides families with information about the kindergarten enrollment process. At that time, we ask families to confirm which school their child will attend and whether they plan to continue child care in our Super Stars program in the fall. We are committed to making the transition to kindergarten as seamless as possible for both children and their families.

Behavioral Guidance and Discipline

Philosophy of Guidance

At Robyn's Nest, our primary objective is to nurture children's ability to develop self-control, empathy, and respect for others. We employ positive guidance techniques designed to teach problem-solving skills and foster emotional growth. Our teachers consistently model appropriate behaviors, encourage thoughtful reflection, and guide children toward fair and respectful solutions. It is our policy never to use physical punishment, harsh language, or shaming under any circumstances.

Steps for Discipline and Guidance

When discipline is required, our staff follows a series of steps to ensure that guidance remains consistent, developmentally appropriate, and respectful of each child's individuality:

- Reminder of Expectations: Staff begin by reminding the child of the appropriate behavior and the expectations within our environment.
- Redirection: If necessary, the child is redirected to a new activity or learning opportunity that encourages self-regulation and positive engagement.
- Facilitate Problem-Solving: Teachers help children express their feelings, listen to one another, and work collaboratively toward a fair solution.
- Empathy and Support: Any child who may have been hurt or affected by another's behavior receives support, with teachers modeling empathy and conflict resolution skills.
- Emotional Regulation: Staff assist the child who demonstrated challenging behavior in regaining control of their emotions before allowing them to rejoin play or group activities.
- Removal from Situation: If necessary for safety or to provide time for calming down, the child is removed from the situation under staff supervision and guidance.
- Family Collaboration: If challenging behaviors persist, we collaborate with families to create a behavior support plan. This plan includes consistent strategies for use at home and school, ensuring a unified approach to supporting the child's success.

Addressing Serious Behavioral Concerns

In situations where a child's behavior poses a serious risk to themselves, others, or property, staff will immediately secure the safety of all children by clearing the area and providing one-on-one support to the child involved. Families will be notified promptly, and an incident report will be completed and filed.

If the child's behavior does not improve or prevents us from being able to properly care for the other children, families will be called to pick up their child from care, and they will be excluded for the remainder of the day. Depending on the nature of the behavior or if behavior becomes an on-going issue, we will schedule a parent-teacher conference to review the concerns, discuss effective strategies, and, if necessary, develop a written behavior support plan.

Prohibited Behaviors (WAC 110-300-0331)

In accordance with WAC 110-300-0331, our teaching staff must supervise and protect children from the harmful acts of other children. We must immediately intervene when teachers become aware that a child or children are teasing, fighting, bullying, intimidating, or becoming physically aggressive.

Our Center will not tolerate:

- Profanity, obscene language, "put downs", or cultural or racial slurs.
- · Angry or hostile interactions.
- Threats of physical harm or inappropriate physical contact such as spanking, biting, jerking, kicking, hitting, slapping, grabbing, shaking, pulling hair, pushing, or shoving.
- Throwing objects at others with the intent to cause damage or harm.
- · Spitting.

Behavioral Guidance and Discipline

Damage and Destruction of Property

Our classrooms are filled with high-quality materials, toys, and equipment which children are encouraged to play with and explore. When new toys and materials are introduced to the classroom, teaching staff will demonstrate appropriate ways to use the items. The idea is to teach the children the concept of respecting the materials, not to limit creative ways of using the materials. We expect there to be a certain amount of wear and tear and know that even well-loved toys can break during normal play and accidental misuse.

However, intentional damage of items or the facility past two and a half years of age is not appropriate. When children intentionally break or mistreat items resulting in damage to materials, toys, equipment, and/or facility, families will be expected to reimburse the Center for repairs and/or replacement costs. These charges will be added to the family's next billing cycle.

Physical Removal of Children (WAC 110-300-0331)

If a child continues to be disruptive after teaching staff have exhausted the strategies outlined in our Discipline Procedures, we may decide to separate the child from the other children so that they may regain control of him or herself. Physical removal will be determined by that child's ability to walk. If the child is willing and able to walk, teaching staff may hold the child's hand and walk them to the Office. If the child is not willing or able to walk, teaching staff will pick up the child and carry them to the Office.

Use of Physical Restraint (WAC 110-300-0335, 0450, 0490)

In emergency situations, teaching staff may use limited physical restraint when: protecting a child from injuring themselves or others, obtaining possession of a weapon or other dangerous object, or protecting property from serious damage. All incidents of physical restraint will be documented. The report will note the date, time, staff involved, duration, and what happened before, during, and after the child was restrained. If necessary, a written plan will be developed to address underlying issues and reduce need for further physical restraint. A copy of this plan will be forwarded to DCYF (WAC 110-300-0355).

Use of Corporal Punishment (WAC 110-300-0450)

Corporal punishment is when a person in authority uses physical force with the intention of causing pain for disciplinary purposes. The use of corporal punishment is not permitted in our Center.

Collaboration and Additional Support

When appropriate, our staff consults with Early Learning Professionals, behavior specialists, or mental health consultants to access additional guidance and resources. If all reasonable interventions have been exhausted and behavior concerns continue, we will work with families to identify alternative placement options that best meet the child's needs.

Expulsion Policy (WAC 110-300-0340, 0486)

On rare occasions, our discipline strategies may be ineffective in addressing some children's behavioral issues. Regrettably, in these instances, our Center may find it necessary to expel a child from care. In these instances, families will be notified about the circumstances and reasons for expulsion in writing and, when possible, at a faceto-face meeting with center administration.

Instances that may result in expulsion include:

- The child exhibits behavior that presents a serious safety concern for that child or others.
- The Center is not able to reduce or eliminate the safety concern through reasonable modifications.
- The Center is not able to meet the child's current emotional and/or developmental needs without additional staff.

In the event of expulsion, center administration will provide families with information on community-based resources that might benefit the child.

Transportation

About Our Bus

Transporting little passengers is a big job and we take it very seriously. Our Center's 2019, 14-passenger activity bus's construction standards represent the very best in safety, quality, and dependability. Safety features include individual adjustable seatbelts, rear view reverse cameras, emergency exits, and a "no child left behind" safety notification system. The vehicle is insured, routinely inspected by staff for safety concerns, and receives thorough professional maintenance inspections quarterly.

Cell Phone Usage

Our bus driver carries a cell phone for navigation and emergency purposes only. We do not allow them to make calls or text while driving.

Transportation to Local Schools

We currently transport to Broadway and Progress Elementary and Summit School using our Center's activity bus. Central Valley School District provides transportation to Opportunity Elementary from a bus stop located directly in front of our Center. Children will be supervised by our teaching staff until they are released into the custody of a bus driver or duty officer.

If we are transporting your child to school, please make sure they are here by the posted bus schedule.

If your child is not in attendance in the morning, we will assume that we are not picking them up from school unless families notify us otherwise.

If we are not picking up your child, regardless of reason, it is extremely important that we are notified prior to 2:30pm. Failure to do so can cause delays, frustrating both the duty officers at the schools and our driver, as we cannot leave until every child is accounted for.

Off-Site Experiences (Field Trips)

Our Center believes that learning should not be confined to within the four walls of our facility. Therefore, children ages three and up may frequently visit the library or participate in other off-site activities. Depending on the weather and site location, staff may opt to walk or transport children using our activity bus. Families will be notified in advance and will be required to sign a written consent form.

Emergency Evacuations

In the event of an emergency evacuation, we will consult with local authorities to determine the safest means of transportation to evacuate all the children to a safe location. Once the safety of the children has been assured, families will be notified of the evacuation site location and the procedure for getting their child.

Administrative Notices, Postings and Policies

Child Care and Business Licenses

Our Center's child care and business licenses are posted in the main office.

Harmless Agreement and Liability Coverage

Our Center does its best to provide a safe and supervised environment. However, accidents and injuries do happen. Families are required to agree not to hold JD Willits, Inc./Robyn's Nest owners, employees, and agents liable for accidents, injuries, or damages that occur while on the premises or during off-site activities when they enroll.

State law requires our Center to hold a current liability insurance policy. Our Center drivers and vehicle are insured as well.

Inspection Reports and Compliance Agreements

Our center is subject to inspection by state and local health, fire, licensing and building agencies. Regulations and inspections pertain to staff qualifications, the facility and playground, nutrition, health and safety matters, recordkeeping, and child-to-staff ratios. Copies of inspection reports, and any corresponding corrective action reports, are available to view upon request.

Smoking, Vaping, and Cannabis Policy

While we understand that smoking cannabis and tobacco products are legal in Washington State, it can generate an odor that is offensive to others. We ask that consumers be considerate of those around them, especially individuals who have allergies and breathing issues, and refrain from smoking or vaping on our premises and directly prior to entering our facility.

Animal Policy

Having a pet in the classroom can be an educational as well as a fun experience. An animal friend in the classroom can help children learn compassion, responsibility, and many scientific concepts. All our classrooms typically have a pet fish, hermit crab, or other small animal (hamster, gerbil, etc..) as classroom pets. From time-to-time Ms. Robyn, our owner, may also bring in her (hypoallergenic) Goldendoodle, Yeti, to visit our Center or attend an off-site field trip as part of his service dog training. While other times, we may schedule a field trip to an animal shelter, such as S.C.R.A.P.S. or the Humane Society, visit a pet store, or have a petting zoo on-site.

Any time there is contact with animals, children are educated on animal safety, such as appropriate touch and proper hand washing procedures. While our goal is to provide a positive interaction between children and animals, families need to understand that just like children, animals may occasionally misbehave by scratching, biting, or knocking down their playmates. When children have contact with animals:

- appropriate safety precautions or alternate activities will be observed for children who have an Individual Care Plan (ICP) on file for specific animal allergies/interactions.
- · we will organize children into small supervised groups
- animals will not be allowed in food preparation areas
- · children will wash their hands after handling animals; and
- vaccination records, including proof of current rabies shots, will be kept on file at the Center.

In addition, no animal showing signs of illness will be brought into the facility. Unfortunately, due to DCYF regulations, animals will not be allowed in direct contact with children under 30 months of age without a parent present.

Administrative Notices, Postings and Policies

Animal Policy (continued...)

PLEASE NOTE: If your child has animal allergies or if you do not wish to accept the potential risks of having your child participate in activities that involve animals, you must complete an ICP to be kept in your child's file and classroom. Those children with an ICP on file will be given an alternate activity during those times.

Pesticide Policy

It is the preference of the owners of this facility to use only organic, non-toxic lawn care products on our play areas and front courtyard where children may potentially come in contact with them. Unfortunately, like most child care Centers we deal with the combination of children and food, therefore we sometimes have problems with bees and sugar ants. We have contracted with Crosstown Pest Control to spray around the exterior of our facility and put out non-toxic traps when these insects become a nuisance.

Spraying will be done so that there is at least 48-hours between the application and children returning to the site (ie: Friday evening after hours). A notice containing the following information will be placed at the Center entrance least 24-hours prior to product application:

- · product name of the pesticide being used
- · date and time of application
- · location where the pesticide will be applied
- · pest to be controlled
- name and number of a contact person at the facility if you have a question.

In addition, to notify people that a pesticide has been used, a marker will be placed at each primary point of entry to the Center grounds. This marker will be:

- a minimum of four inches by five inches
- · printed in colors contrasting to the background; and
- left in place for at least twenty-four hours following the pesticide application or longer if a longer restricted period is stated on the label.

This marker will also include:

- a headline that states "This landscape has recently been sprayed or treated with pesticides"
- · who has treated the landscape; and
- · who to call for more information.

If your child is sensitive to pesticides or is prone to allergic reactions to chemicals, please note this on the Health Care Information section of your child's enrollment package and notify the Center Administration so that we may take the necessary precautions.

Emergency Phone Numbers

The following emergency phone numbers will be posted by the telephone in the main office.

Emergency/Police/Fire: 9-1-1 Poison Prevention Center: (800) 222-1222 Health Specialist: Kate Quinn (509) 363-3305 Spokane Regional Health District (509) 324-1511 Communicable Disease Reporting (509) 869-3133 DCYF Licensor: Karen Cole (509) 789-3828 (509) 328-1488 Nurse Consultant: Katrina Munro, RN Child Protective Services: (509) 363-3333 Daytime

(800) 562-5624 Evenings/Weekends

Hospitals:

Sacred Heart Medical Center (509) 474-3344 Valley Hospital and Medical Center (509) 924-6650

Emergency Procedures

Minor Emergencies and Basic First Aid

When children are in our care, staff with current training in Cardio-Pulmonary Resuscitation (CPR) and First Aid are with each group or classroom. Documentation of staff training is kept in personnel files.

When an injury/Incident occurs, staff trained in first aid will take the appropriate steps:

- Gloves will be used if any body fluids are present.
- · Staff will refer to the child's emergency form and call parents/guardians, emergency contacts or health care provider as necessary.
- · Staff will record the incident on an Accident/Injury Report, which will be kept in each classroom. The form will include the date, time, place and cause of the illness or injury, if known. A copy will be offered to the parent/guardian the same day and another copy placed in the child's file. The original will be placed in the Accident/Injury Log, which will be located in the main office.
- · Incident/Injury reports will be reviewed daily by Center Administration. The Center Director will be notified if the logs indicate any trends. Corrective action will be taken to prevent further injury or illness. All reports are considered confidential.

First Aid kits are inaccessible to children and are located in the main office, Center vehicles, and field trip backpacks when traveling off-site.

Our First Aid Kits contain the following:

First Aid Guide Sterile gauze pads Small scissors Adhesive tape

Band-Aids (different sizes)

Roller bandages

Large triangular bandage

Gloves

Tweezers for surface splinters, and a

CPR mouth barrier

All first aid kits will be checked by Center Administration and restocked each month, or sooner if necessary.

Emergency Procedures

Life-Threatening Emergencies

- If more than one staff person: one staff person will stay with the injured/ill child and send another staff person to call 911. If only one staff person: person will check for breathing and circulation, administer CPR for one minute if necessary, and then call 911.
- Staff will provide first aid as needed. Gloves will be worn if any body fluids are present.
- A staff person will contact the parent/guardian(s) or the child's alternate emergency contact person.
- A staff person will stay with the injured/ill child, including transport to a hospital if necessary, until a parent, guardian or emergency contact arrives.
- The incident will be recorded on an Incident/Injury Report and Log as described in "Minor Emergencies".
- Serious injuries/illnesses, which require medical attention, will be reported to the licensor immediately, or as soon as reasonably possible.

Care of Children with Special Needs (ICPs)

Children with special needs will be required to have a written Individual Care Plan (ICP) to be followed in emergency situations. This would include chronic conditions (such as asthma and allergies) or other health concerns, especially those that require the use of rescue medications such as inhalers, nebulizers or EpiPens. ICPs must provide the lists symptoms or conditions under which the medication will be given.

Families who indicate health care concerns on their child's enrollment forms may be required to provide an Individual Care Plan. ICPs must be completed and signed by a Health Care Provider and the parent/guardian and must be renewed annually or as indicated by the Health Care Provider (this time will vary with the age of the child and how long the child has been on the medication).

Consent for Emergency Medical Treatment

Families are required to give consent for emergency medical treatment as part of the enrollment process.

Policy and Procedures for Excluding III Children

When Children must be Excluded from Care

Staff will check children daily for signs of illness. Children with any of the following symptoms will not be permitted to remain in care:

Fever of at least 100°F and who also have one or more of the following:

- · Diarrhea or vomiting
- Earache
- Headache
- Signs of irritability or confusion
- · Sore throat
- Rash
- · Fatigue that limits participation in daily activities

Policy and Procedures for Excluding III Children (continued...)

Children with any of the following symptoms will not be permitted to remain in care:

- Vomiting within the past 24 hours
- Diarrhea: 3 or more watery stools within a 24-hour period or any bloody stool
- Rash, especially with fever or itching
- Open or oozing sores, unless properly covered and 24 hours has passed since starting antibiotic treatment, if treatment is necessary (Does not include HFMD. See below.)
- · Head lice or nits.
- Scabies. May return 24 hours after treatment.
- Severe Coughing
- · Green or heavy mucus coming from nose
- Sick appearance, not feeling well and/or not able to keep up with program activities

If a Child Becomes Sick While in Care

Children with the above signs and symptoms will be separated from the group and cared for in front office area. Parent/guardian or emergency contact will be notified and will be expected to have an authorized individual pick up your child within 30 minutes. A staff member will fill out an illness form that states why the child was sent home and when he/she can return. If your child should become ill during the day, you will be notified.

Exclusion/Readmission of III Children and Staff

We have a minimum 24-hour "illness free" policy. This means that if your child is sent home during the day, they will not be allowed to come back the next day even if they are on medication!

Children with head lice or nits will be initially excluded for 72 hours. Children must be nit and lice free in order to return to care!!!

Children with hand, foot, and mouth disease (HFMD) will be excluded for a minimum of 3-5 days depending on the severity of the rash. HFMD is highly contagious. Open and oozing sores pose a risk to infection to other children and staff. Since sores on the hands, face, diaper area, and mouth cannot be properly covered, children cannot attend until sores have scabbed over or healed.

Staff Health

Staff and volunteers must provide documentation of a negative tuberculin skin test (Mantoux method) before their employment begins. It must be dated within the past 12 months prior to being hired.

Staff members do not need to be retested for tuberculosis unless they have an exposure. Our Center will comply with all recommendations from the local health jurisdiction (TB is a reportable disease).

Staff must provide proof of having received MMR and COVID vaccinations (or legal exemption status).

Staff who have a communicable disease are expected to remain at home until the period of communicability has passed.

Staff members will follow the same illness exclusion criteria as children.

Communicable Disease Reporting

Families will be notified when children have been exposed to a communicable disease. Licensed child care facilities are required to report communicable diseases to their local health department (WAC 110-300-0500).

Immunizations

To protect all children in our care and our staff, and to meet state health requirements, we only accept children fully immunized for their age*. We are required to keep a current Certificate of Immunization Status (CIS) on file to show the Department of Health and the Department of Children, Youth and Families (DCYF) or other government health agencies, as needed. The state also requires our Center to file an annual Immunization Status Report to verify that we are in compliance with State immunization requirements.

Immunization records will be reviewed and updated quarterly by Center Administration.

Children need to be immunized for the following:

- DTaP (Diphtheria, Tetanus, Pertussis)
- IPV (Polio)
- PCV
- MMR (Measles, Mumps, Rubella)
- · Hepatitis B
- · HIB (Hemophilus Influenza Type B)
- Varicella (Chicken Pox)

*Children may attend child care without an immunization when the parent/guardian and health care provider complete Certificate of Exemption. Children who are not immunized will not be accepted for care during an outbreak for diseases which can be prevented by immunization. This is for the un-immunized child's protection and to reduce the spread of the disease. Examples are a measles, chickenpox, or mumps outbreak.

Contact or Exposure to Body Fluids

Even healthy people can spread infection through direct contact with body fluids. Body fluids include blood, urine, stool (feces), drool (saliva), vomit, drainage from sores/rashes (pus), etc. Gloves will always be used when blood is present. When anyone has been in contact with body fluids, or is at risk for being in contact with body fluids, the following precautions will be taken:

- Any open cuts or sores on children or staff will be kept covered.
- Whenever a child or staff comes into contact with any body fluids, the area (hands, etc.) will be washed immediately with soap and warm water and dried with paper towels.
- · All surfaces in contact with body fluids will be cleaned immediately with soap, water and disinfected with an agent such as bleach in the concentration used for disinfecting body fluids (1/4 cup bleach per gallon of water or 1 Tbsp/quart).
- · Gloves and cleaning material used to wipe up body fluids will be put in a plastic bag, closed with a tie, and placed in a covered waste container.

Handwashing Practices

Staff will wash hands:

- Upon arrival at the site
- · Before and after handling foods, cooking activities, eating or serving food
- · After toileting self, children or diaper changing
- · After handling or coming in contact with body fluids such as mucus, blood, saliva or urine
- · Before and after giving medication
- · After attending to an ill child
- · After smoking
- · After being outdoors
- After feeding, cleaning or touching pets or animals
- · As needed

Children will be assisted or supervised in hand washing:

- · Upon arrival at the site
- Before and after meals or cooking activities (in separate sink from the food preparation sink)
- After toileting or diapering
- After handling or coming in contact with body fluids such as mucus, blood, saliva or urine
- After outdoor play
- · After touching animals
- · Before and after water table play

Hand washing procedures are posted at each sink and include the following:

- Soap, warm water (between 85° and 120°F) and individual towels will be available for staff and children at all hand washing sinks, at all times
- Turn on water and adjust temperature
- · Wet hands and apply a liberal amount of soap
- Rub hands in a wringing motion from wrists to fingertips for a period of not less than 10 seconds
- Rinse hands thoroughly
- Dry hands, using an individual paper towel
- Use hand-drying towel to turn off water faucet(s)

Cleaning, Disinfecting and Sanitizing Practices

Cleaning will consist of washing surfaces with soap and water and rinsing with clean water.

Disinfecting/Sanitizing will consist of using a 8.25% bleach/water solution as follows:

Disinfecting:Amount of Bleach:Amount of Water:Diapering areas, body fluids,1 ½ teaspoons1 quartbathrooms and bathroom equipment.2 Tablespoons1 gallon

Sanitizing: Amount of Bleach: Amount of Water:

Table tops, dishes, toys, mats, etc. 1/4 teaspoon 1 quart 1 teaspoon 1 gallon

Cleaning, Disinfecting and Sanitizing Schedule

- **Tables** used for food serving will be cleaned with soap and water, rinsed, and then **sanitized** with bleach solution before and after each meal or snack.
- **Kitchen** will be cleaned daily and more often if necessary. Sinks, counters, and floors will be cleaned and **sanitized** daily. Refrigerator will be cleaned and **sanitized** monthly or more often as needed.
- **Bathroom(s)** will be cleaned and **disinfected** daily or more often if necessary. Bathroom sinks, counters, toilets and floors will be cleaned and **disinfected** at least daily.
- Furniture, rugs and carpeting in all areas will be vacuumed daily. This includes carpeting that may be on walls or other surfaces than the floor. Carpets will be cleaned monthly in infant areas and every three months in other areas (or more frequently as needed).
- Hard floors will be swept, mopped, and sanitized daily.
- **Utility mops** will be washed, rinsed and **sanitized**, and then air dried in an area with ventilation to the outside.
- Toilet seats will be cleaned and disinfected daily and when needed.
- Mouthed toys, or toys otherwise contaminated by body secretion or excretion, including machine washable toys and cloth books, will be washed with soap and water, rinsed and sanitized in between use by different children. A system for ongoing rotation of mouthed toys will be implemented in infant and young toddler rooms. Only washable toys will be used.
- Toys (that are not mouthed toys) will be washed, rinsed, sanitized and air-dried weekly.
- Cloth toys and dress up materials will be laundered monthly or more often when needed. If they cannot be washed in the washing machine, they will be hand washed in hot soapy water, rinsed and then dipped into a solution of 1 Tablespoon of bleach per gallon of water for 1 minute and allowed to air dry.
- **Bedding:** sheets will be washed after each use, blankets will be washed weekly or more frequently when needed, at a temperature of at least 140°F, or with **disinfectant** in the rinse cycle. Mats will be cleaned and **disinfected** after each use. Bedding will be stored in a way that one child's bedding does not touch another child's bedding.
- Children's belongings will be stored separately to prevent the spread of diseases or parasites.
- Laundry will be washed as needed at a temperature of at least 140 degrees or with added disinfecting agent such as bleach.
- Water tables will be emptied and sanitized after each activity period or more often as needed. Children will wash hands before and after play and be closely supervised.

Cleaning, Disinfecting and Sanitizing Schedule (continued...)

- General cleaning of the entire Center will be done as needed. Wastebaskets (with disposable liners) will be available to children and staff and will be emptied daily or when full. Door handles and faucets are cleaned and sanitized at least daily and more often when children/staff are ill.
- Vacuuming and mopping of the Center will be done daily or more often as needed.

Cleaning Supply and Chemical Storage

Cleaning supplies and other potentially hazardous chemicals are stored in the original containers, inaccessible to children and separate from food and food area. Our cleaning supplies are stored in the hall janitorial supply closet or in locked cabinets in classroom bathrooms which are ventilated to the outside.

Nap Equipment (WAC 110-300-0265)

Sheets will be washed after each use. Blankets will be washed weekly or more frequently when needed, at a temperature of at least 140°F, or with disinfectant in the rinse cycle. Mats will be cleaned and disinfected after each use. Bedding will be stored in a way that one child's bedding does not touch another child's bedding.

Medication Management

General Practice

For the health and safety of all children in our care all medications, including diaper creams and ointments, must be checked in through the front office.

State law indicates that medication, even non-prescription, cannot be given to a child in a child care program without PRIOR written consent from the child's parent/legal guardian. If your child should require the administration of medication during child care hours you will need to fill out a Medication Authorization form which will be kept in your child's permanent file.

This form will include the child's name, the name of the medication, reason for the medication, dosage, method of administration, frequency (can NOT be given "as needed"), duration (start and stop dates), special storage requirements, and any possible side effects (use package insert or pharmacist's written information).

Parent/Guardian Consent

A parent/legal guardian will be the sole consent to medication being given, without the consent of a health care provider, **if and only if** the medication meets all of the following criteria:

- The medication is over-the-counter and is one of the following:
 - > Antihistamines
 - > Non-aspirin pain relievers
 - > Non-narcotic cough suppressants
 - > Decongestants
 - > Ointments or lotions intended to reduce or stop itching or dry skin
 - > Diaper ointments and non-talc powders, intended only for use in the diaper area
 - > Sun screen for children over six months of age
- The medication is in the original container and labeled with the child's name; and
- The medication has instructions and dosage recommendations for the child's age and weight; and
- The medication is not expired; and

Medication Management (continued...)

• The medication duration, dosage and amount to be given does not exceed label-specific recommendations for how often or how long to be given.

For sunscreen and diaper ointment, the written consent may cover an extended period of time up to 6 months.

For all other medications the written consent may only cover the course of the illness.

We will not dispense Acetaminophen or Ibuprofen (Tylenol or Motrin) for the sole purpose of lowering a child's temperature.

Health Care Provider Consent

A licensed Health Care Provider's consent, along with parent/legal guardian consent, will be required for prescription medications and all over-the-counter medications that do not meet the previous criteria (including vitamins, supplements, fluoride, and teething medications).

A Health Care Provider's written consent must also be obtained to add medication to food or liquid.

A licensed Health Care Provider's consent may be given in 3 different ways:

- The health care provider provides written instructions (along with the child's name, name of the medication, dosage, frequency (can NOT be given "as needed"), duration and expiration date); or
- The health care provider's name is on the original pharmacist's label (along with the child's name, name of the medication, dosage, frequency (can NOT be given "as needed"), duration and expiration date); or
- The health care provider signs a completed Medication Authorization Form.

Medications for Chronic Conditions

For chronic conditions (such as asthma), the parent/legal guardian written consent must be renewed on a regular basis (this will vary with the age of the child and how long the child has been on the medication). An individual care plan must be provided that lists symptoms or conditions under which the medication will be given.

Storage

All internal medications are kept in a locked cabinet in the Center Director's office. External medications, such as ointments and creams are stored out of reach in each child's classroom.

Emergency Supply of Medications for Chronic Illness

For medications taken at home, we ask for a three-day supply to be kept with our disaster kit in case of an earthquake or other disaster

Medication Administration Procedure

- Wash hands before preparing medications.
- Carefully read labels on medications, noting: child's name, medication name, amount to be given, time and dates to be given (can NOT be given "as needed"), how long to give, and how to give (e.g. by mouth, to diaper area, in ear, etc.)

Information on the label must be consistent with the Medication Authorization Form.

Medication Administration Procedure (continued...)

- Prepare medication on a clean surface away from diapering or toileting areas.
- Do not add medication to the child's drink or food (health care provider authorization required).
- For liquid medications, use clean medication spoons, syringes, droppers or medicine cups that have measurements on them (not table service spoons) provided by parent/legal guardian.
- For capsules/pills, medication is measured into a paper cup and dispensed as directed by the Health Care Provider/legal guardian.
- Wash hands after administering medication.

Self-Administration by Child

Our facility does not allow children to self-medicate by administering their own medications. All medications will be administered by Robyn's Nest staff.

Staff Documentation

All staff will be trained how to administer medications as part of their New Staff Orientation process by a lead teacher or Center Administration. A written record of training will be kept in staff's file.

Each time a medication is given staff will complete and sign a Medication Dispensed form with their full signature. This form will include the time, date and dosage of the medication given along with any side effects observed. This form will be scanned into the child's digital file and the information will be transferred to the child's Medication Log. The original will be sent home with the child's parent/guardian.

If, for some reason, staff is unable to dispense a medication, they will provide a written explanation why it was not given.

Injury Prevention

- The child care site will be inspected at least quarterly for safety hazards by Center Administration. Staff will review their rooms daily and remove any broken or damaged equipment.
- The playground will be inspected daily for broken equipment, environmental hazards, garbage, animal contamination, etc. and required depth of cushion material under and around equipment by classroom teachers.
- Toys will be age appropriate, safe, in good repair and not broken.

Our Address: 12103 East Valleyway Avenue

Spokane Valley, WA 99206

Nearest Cross Street(s): Pines and Valleway

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Our Phone: (509) 928-4034

In case of emergency: call 911

Together with the Washington State Department of Health, we have developed the following Emergency & Disaster Response Plan designated for response to fire, natural disasters, and other emergencies. Our plan addresses what we are going to do if there is a disaster, if a local emergency plan is in place, such as at a local school district, we will coordinate those procedures and actions in developing our own plan.

- Keep calm children take their cues from the adults around them.
- · Assess the situation.
- · Take action to ensure the safety of children and staff

PLEASE NOTE:

It is impossible to predict every type of emergency that may occur.

This plan has been designed to be a reference guide for staff responding to an incident.

Situations differ—staff are expected to use their best judgement.

Children with Special Needs

Be aware of any:

- · ALLERGIES to food items or environment
- MEDICATIONS that need are taken regularly or in the event of an emergency
- PHYSICAL disabilities or limitations (such as asthma)*
- MENTAL disabilities or limitations*

Review and follow Individual Care Plans

*These symptoms may increase in intensity under stressful circumstances

Earthquake

If indoors:

- Quickly move away from windows, unsecured tall furniture, and heavy appliances.
- Everyone DROP, COVER, & HOLD.
 - > **DROP** to floor
 - > COVER head and neck with arms; take cover under sturdy furniture or against internal wall
 - > HOLD on to furniture if under it and hold position until shaking stops
- · Keep talking to children in calm manner until safe to move.
- Do not attempt to run or attempt to leave building while earth is shaking.

If outdoors:

- Move to clear area, as far as possible from glass, brick, and power lines.
- DROP & COVER.

Earthquake (continued...)

After earthquake:

- · Account for all children, staff, and visitors.
- Check for injuries and administer first aid as necessary. Call 911 for life-threatening emergency.
- · Expect aftershocks.
- Determine if evacuation is necessary and if outside areas are safe. If so, EVACUATE building calmly and
- Escort children to designated meeting spot outside and account for all children, staff, and visitors.
- Shut off main gas valve if you smell gas or hear hissing sound.
- Monitor radio for information and emergency instructions.
- Stay off all phones (for 3-5 hours) unless someone has a life-threatening emergency.
- Remain outside of building until it has been inspected for re-entry.

Fire

- Activate fire alarm or otherwise alert staff that there is a fire (yell, whistle).
- EVACUATE the building quickly and calmly:
 - > If caught in smoke, have everyone drop to hands and knees and crawl to exit.
 - > Pull clothing over nose and mouth to use as a filter for breathing.
 - > If clothes catch fire, STOP, DROP, & ROLL until fire is out.
 - > Take attendance sheets and emergency forms, if immediately available.
 - > Have (designated) staff person check areas where children may be located or hiding before leaving buildina.
- Gather in meeting spot outside and account for all children, staff and visitors.
- · Call 911 from outside of building.
- Do not re-enter building until cleared by fire department.

Fire Evacuation Plans are posted in each classroom. Monthly fire drills are conducted monthly.

Severe Storm

• Be aware of any -

STORM WATCH: storm may affect area

STORM WARNING: storm will soon be in or already is in area

- · Determine if program should be closed.
- Notify parents/guardians to pick up or not drop off children if program is to be closed.
- Monitor radio for storm updates and emergency instructions.
- Use telephone for essential communication only.

Windstorm

If indoors:

- Move away from windows. Cover windows with shades or blinds, if available.
- · Consider moving to interior rooms/hall and lower floors.

If outdoors:

• Move indoors, avoiding any downed power lines or trees.

Lightning

If indoors:

- · Avoid use of telephone, electrical appliances, and plumbing as much as possible. (Wires and metal pipes can conduct electricity.)
- Move away from windows. Cover windows with shades or blinds, if available.

If outdoors:

Seek shelter inside and enclosed building.

Bomb Threat

- Move away from windows. Check caller ID if available. (Write "BOMB threat" on piece of paper, along with phone number on which call was received.)
- Before you hang up, get as much information from caller as possible.

Ask caller:

- > Where is the bomb?
- > When is it going to explode?
- > What will cause the bomb to explode?
- > What does the bomb look like?
- > What kind of bomb is it?
- > Why did you place the bomb?

Note the following:

- > Exact time of call
- > Exact words of caller
- > Caller's voice characteristics (tone, male/female, young/old, etc.)
- > Background noise
- Do not touch any suspicious packages or objects.
- Avoid running or anything that would cause vibrations in building.
- · Avoid use of cell phones and 2-way radios.
- Confer with police regarding evacuation. If evacuation is required, follow EVACUATION procedures.

Power Outage

Determine why power is out.

- If electrical problems are in building, take out flashlights and prepare to EVACUATE.
- · If severe weather caused outage:
 - > Take out flashlights. (Do not use candles or any alternate lighting source with a flame.)
 - > Account for all children, staff, and visitors.
 - > Report power outage to power company and hard-wired phone.
 - > Do not call 911, except to report an emergency.
 - > Turn off or disconnect any appliances, electrical equipment, or electronics that were in use.
 - > Leave one light on to indicate when power returns.
 - > Keep refrigerator and freezer doors closed.

If weather is cold:

- Ensure everyone is wearing several layers of warm, dry clothing.
- Have everyone move to generate heat. (Lead the class in physical activity or movement games.)
- · Never use oven as source of heat.
- Never burn charcoal for heating or cooking indoors.
- Only use an available generator outdoors and far from open windows and vents.

Power Outage (continued...)

If weather is hot:

- Move to lower floors, if possible.
- · Remove excess layers of clothing.
- · Ensure everyone drinks plenty of water.

Tsunami

Our Center is not located in a Tsunami hazard area.

Our Center is 2376 feet above sea level and 275 miles from the coast

But knowing basic information about tsunamis never hurt anyone. A tsunami is a series of waves that may continue for hours.

- Be aware of signs that a tsunami may be approaching:
 - > Noticeable rapid rise or fall in coastal waters.
 - > Strong earthquake lasting 20 seconds or more near the coast.
- In case of strong earthquake lasting 20 seconds or more near the coast:
 - > Drop, cover, and hold
 - > When shaking stops, **EVACUATE** quickly to higher ground away from coast

If you learn that an area has experienced large earthquake, even if you do not feel shaking, listen to local radio station or NOAA Weather Radio for information from the Tsunami Warning Centers.

TSUNAMI WARNING: Tsunami expected. Full evacuation suggested.

TSUNAMI WATCH: Danger level not yet known. Stay alert for more information and prepare to evacuate.

Volcano

- Monitor radio for information and emergency instructions.
- If there is ashfall in your area, be prepared to stay indoors.
- EVACUATE if advised to do so by authorities.

If indoors:

- · Close all windows and doors.
- Closely monitor anyone who has asthma or other respiratory difficulties follow care plan.
- Ensure that infants and those with respiratory difficulties avoid contact with ash.

If outside:

- Cover nose and mouth.
- Wear goggles to protect eyes.
- · Keep skin covered with clothing.
- Avoid driving in heavy ashfall driving will stip up ash and stall vehicles.
- Clear roofs of ashfall. (Do not allow accumulation of more than 4 inches.)

Be aware that volcanoes are often accompanied by:

Ashfall and acid rain Landslides and rockfalls Mudflows and flash floods Earthquakes **Tsunamis**

Landslide or Mudflow

LANDSLIDES are generally associated with heavy rainfall and rapid snowmelt.

MUDFLOWS are fast-moving landslides that usually begin on steep hillsides.

(Volcanic eruption may also cause mudflows.)

- · Recognize signs of slides:
 - > Unusual sounds outside, such as rumbling, trees cracking, or rocks colliding.
 - > New cracks appearing in building.
 - > Fences, poles, trees tilting or moving.
- EVACUATE, if possible. If too late to evacuate:

Indoors:

> Take cover under sturdy furniture.

Outside:

- > Get out of path of slide.
- > Run to high ground (uphill), away from slide.
- > If debris approaching, run for cover of trees or building.
- > If escape not possible, curl into ball and protect head.
- · Account for all children, staff, and visitors.
- · Check for injured or trapped persons near slide area, but stay clear of danger and await rescue personnel.
- Stay away from slide area additional slides may follow.
- · Be alert for flooding, which may follow slide.

Missing or Kidnapped Child

Missing Child

- Search program site, including all places a child may hide and nearby bodies of water.
- · Contact parent(s)/guardian(s) to determine if child is with family.
- Call 911 with:
 - > Child's name and age
 - > Address of program
 - > Physical description of child
 - > Description of child's clothing
 - > Medical condition of child, if appropriate
 - > Time and location child was last seen
 - > Person with whom child was last seen
- Have child's information, including photo, available for police when they arrive.
- · Continue to search in and around site for child.

Kidnapped Child

- Call 911 with:
 - > Child's name and age
 - > Address of program
 - > Description of child's clothing
 - > Medical condition of child, if appropriate
 - > Time and location child was last seen
 - > Person with whom child was last seen
- Have child's information, including photo, available for police when they arrive. Parent(s)/guardian(s) should be contacted by police to explain situation.

Missing or Kidnapped Child

Help to prevent kidnapping:

- Do not release child to anyone other than designated parent, guardian, or emergency contact.
- Call 911 if adults or children express concern about a person at or near program site.
- Encourage parents and guardians to make you aware of any custody disputes, which may put child at risk for kidnapping.

Flood

FLOOD WATCH: flooding may occur in your area. FLOOD WARNING: flooding will occur or is occurring in your area.

If flooding is in area:

- · Determine if program should be closed.
- Notify parents/guardians to pick up or to not drop off children if program is to be closed.
- Monitor radio for storm updates and any emergency instructions.

If facility is in (imminent) danger of being flooded:

- Escort children to designated meeting spot.
- Search all areas, including bathrooms, closets, playground structures, etc., to ensure that all have left the building.
- Account for all children, staff, and visitors.
- · Leave note at program site indicating where you are going.
- EVACUATE to safe location on higher ground, taking:
 - > Attendance sheets
 - > Emergency contact information
 - > First aid kit
 - > Critical & rescue medications (including asthma meds, EpiPens) and forms
 - > Cell phone
 - > Food, water, and diapers
 - > Battery-operated radio
- Do not try to walk or drive through flooded areas.
- Stay away from moving water and downed power lines.
- Once out of danger, contact parents/guardians or emergency contacts. If unable to get through, phone outof-area emergency contact 911 to let them know of your location.
- If you have come into contact with floodwaters, wash hands well with soap and water.
- Throw away food that has come into contact with floodwaters.

Consult with local health department regarding cleanup measures.

Heat Wave

- Limit outdoor play when heat index is at or above 90° Fahrenheit.
- Ensure everyone drinks plenty of water.
- · Remove excess layers of clothing. (Encourage parents/guardians to dress children in lightweight, lightcolored clothing.)
- · Keep movement to a minimum.

Heat Wave (continued...)

· Be alert for signs of:

HEAT EXHAUSTION:

cool, moist, pale, or flushed skin heavy sweating headache nausea dizziness exhaustion

normal or below normal body temperature

administer first aid take steps to cool person down and call for help, if necessary

HEAT STROKE:

very high body temperature (>102° F axillary) hot, red skin either dry or moist from exercise changes in consciousness weak rapid pulse rapid, shallow breathing vomiting

> Call 911 immediately and take steps to cool person down

Children may not adapt to extremes of temperature as effectively as adults because they produce more heat (relatively) than adults when exercising and have a lower sweating capacity.

Contagious Disease/Pandemic Flu

- · Wash hands well and often.
- · Remind parents/guardians that emergency contact information must be current and complete.
- Enforce exclusion policies for children and staff insist that sick children and staff stay home or go home.
- Have and follow a plan to keep ill children away from well children while they are waiting to go home.
- Keep an illness log of sick children and staff those sent home and those kept home.
- · Close rooms as necessary due to staff illness (to maintain safe ratios).
- · Reinforce teaching about good respiratory etiquette:
 - > Use a tissue (or a sleeve, in a pinch) to catch a sneeze or cough.
 - > Throw used tissues into a hands-free trash can.
 - > Wash your hands after using a tissue or helping a sick child.
- · Monitor local and state Public Health websites and other news media for current pandemic flu status information, recommendations, and instructions.

Lockdown

- Lock outside doors and windows.
- · Close and secure interior doors.
- Close any curtains or blinds.
- · Turn off lights.
- · Keep everyone away from doors and windows. Stay out of sight, preferably sitting on floor.
- Bring attendance sheets, first aid kits, pacifiers and other comforting items, and books to lockdown area, if possible.
- Maintain calm atmosphere in room by reading or talking quietly to children.
- If phone is available in classroom, call 911 to ensure emergency personnel have been notified.
- · Remain in lockdown until situation resolved.
- · Notify parents/guardians about any lockdown, whether practice or real.

Dangerous Person

If a person at or near your program site is making children or staff uncomfortable, monitor the situation carefully, communicate with other staff, and be ready to put your plan into action.

- Immediately let staff know of dangerous or potentially dangerous person.
- Initiate LOCKDOWN.
- Call 911 from a safe place.

If the person is in building:

- Try to isolate the person from children and staff.
- Do not try to physically restrain or block the person.
- Remain calm and polite; avoid direct confrontation.

If children are outside:

- And dangerous person is outside: quickly gather children, return to classrooms, and initiate lockdown procedures. If this is not possible, go to off-site evacuation location.
- · And dangerous person is in the building: quickly gather children and go to off-site evacuation location.

If children are inside:

Keep children in classrooms and initiate LOCKDOWN.

Chemical or Radiation Exposure

- If emergency is widespread, monitor radio for information and emergency instructions.
- Prepare to SHELTER-IN-PLACE or EVACUATE, as per instructions.
- If exposed to chemical or radiation outside:
 - > Remove outer clothing, place in a plastic bag, and seal. (Be sure to tell emergency responders about bag so it can be removed.)
 - > Take shelter indoors.
 - > If running water/shower is available, wash in cool to warm water with plenty of soap and water. Flush eyes with plenty of water.

Please see Public Health - Seattle & King County's Radiological Emergencies web site at: http://www.metrokc.gov/health/radiation/ for additional information on responding to a radiation emergency.

Shelter-In-Place

- Gather everyone inside.
- Shut down ventilation system, fans, clothes dryer.
- · Close doors and close and lock windows.
- Gather all children, staff, and visitors in room(s) with fewest doors and windows toward Center of building.
- Bring attendance sheets, first aid kits, and emergency supplies.
- · Account for all children, staff, and visitors.
- Close off non-essential rooms. Close as many interior doors as possible.
- · Seal off windows, doors, and vents as much as possible.
- Monitor radio for information and emergency instructions.
- Phone out-of-area emergency contact.

Evacuation

On-Site:

- · Escort children to designated meeting spot, taking:
 - > Attendance sheets
 - > Emergency contact information*
 - > First aid kit*
 - > Rescue medications (including EpiPens and asthma inhalers) and necessary paperwork*
 - > Cell phone
 - > Food, water, and diapers*.
- Search all areas, (bathrooms, closets, play structures, etc.), to ensure that all have left the building.
- · Account for all children, staff, and visitors.

Off-Site:

- · Escort children to designated meeting spot.
- Search all areas, including bathrooms, closets, playground structures, etc., to ensure that all have left the buildina.
- Account for all children, staff and visitors.
- · Leave note at program site indicating where you are going.
- EVACUATE to safe location, taking:
 - > Attendance sheets
 - > Emergency contact information*
 - > First aid kit*
 - > Critical and rescue* medications (including EpiPens and asthma inhalers) and necessary paperwork
 - > Cell phone
 - > Food, water, and diapers*
 - > Battery-operated radio.

Once out of danger, contact parents/guardians and/or emergency contacts. If unable to get through, phone out-ofarea emergency contact or 911 to let them know of your location.

Evacuation Locations

On-Site: Across street along white picket fence, 12104 East Valleyway Avenue

Off-Site: Spokane Valley Library, 22 N Herald Road or other site as determined by local authorities. Evacuation site will be posted at facility.

Staff Responsibilities

Center Administration:

- · Accounts for all children, staff, and visitors
- · Determines when or if evacuation is necessary
- · Maintains emergency contact information
- · Coordinates with local authorities
- Responsible for rescue medications and Individual Care Plans

Staff Responsibilities (continued...)

Teaching Staff:

- · Account for all children in classroom
- · First aid kit
- Flashlight
- · Other evacuation supplies, ie: clothing and diapers

Drivers:

• Transportation arrangements, if necessary

Cook:

· Emergency supply of food and water

Emergency Supplies on Hand ("Grab-and-Go Bag")

Keep adequate emergency supplies on hand, including:

- · 3-day supply of food and water for children and staff
- Battery-operated radio
- · First aid supplies
- · Cell phone
- Extra batteries (all sizes)
- Change of clothing for each child in care (provided by family)
- · Extra diapers