



School-Age Programs

Parent Handbook 2009/2010

CARLISLE KIDS' HOUSE, SCHOOL - AGE PROGRAMS HANDBOOK

PARENTS' HANDBOOK

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Welcome to Carlisle Kids' House School-Age Programs! We are excited to have you as part of our family. At Carlisle Kids' House, every child is important. Our programs are academically rich and designed to promote you child's growth and development.

GENERAL INFORMATION

FACILITIES / HOURS

The Carlisle Kids' House School-Age Programs are housed at 142 East Street in a building owned and operated by the program. A grassy yard, a hardtop area and a large field area are available for outdoor play.

Hours

Morning program:	7:30 - 9:00 AM
Kindergarten program:	12:00 - 3:00 or 12:00 - 6:15 PM
After school program:	2:15/3:00 - 6:15 PM
Early Release days:	11:45/12:30 - 6:15 PM
Professional Days	7:30 AM – 6:15PM
Vacation Days:	7:30AM-6:15PM
Selected Holidays:	7:30AM-6:15PM
Unscheduled School Closings	8:00AM-6:15PM

Children in the fifth grade and up arrive at 2:15 PM on regular school days and at 11:45 AM on Early Release Days.

Program Address

142 East Street
Carlisle, MA. 01741

Email Address

Director/child related issues: Carexdirector@comcast.net
Billing/financial issues: CKHOffice@yahoo.com

Telephone Number

978-369-5558

Tax I.D. Number

042744181

STATEMENT OF OWNERSHIP

The Carlisle Kids House is a non-profit, parent-owned corporation. The Officers of the Corporation for the 2009/2010 school year are:

President: Desa Facey
Vice-President: Jennifer Derkazarian
Treasurer: Robert Kuftinec
Secretary: Cynara Wu

The Board of Directors is composed of the Officers, and several Members at Large.

STAFF

The Carlisle Kids' House School-Age Programs staff are highly qualified; meeting at minimum, all criteria established by the Office of Early Education and Care. All staff members have successfully completed a criminal background check conducted by the state of Massachusetts (CORI) and (SORI) prior to being hired. Within three months of being hired all staff members become first aid and CPR certified by the American Red Cross. Staff are required to renew their certifications yearly.

PURPOSE

The Carlisle Kids' House School - Age Programs are designed to meet the developmental needs of school-age children. It provides experiences that enrich and enhance each child's cognitive, language, social emotional, physical, and creative development. Within the center's daily schedule, each child has opportunities to create, explore the environment, learn problem solving and personal interaction skills, and learn new concepts through first-hand experiences. Children develop a positive self-concept through a balance of self-and teacher facilitated activities. Opportunities for solitary play as well as group activities are provided. Staff serve as positive role models and provide care that is supportive, nurturing, warm and responsive to each child's individual needs.

PHILOSOPHY

The philosophy of the program is to provide a warm, supportive, and safe environment for those children needing care before and/or after the school day as well as for families looking for socialization opportunities for their children. The Director and staff create a stimulating environment that includes a variety of learning experiences, both indoors and outdoors to enhance your child's social, emotional, physical and intellectual development.

NON-DISCRIMINATION

The Carlisle Kids' House School-Age Program does not discriminate in providing service to children and their families on the basis of race, religion, cultural heritage, political beliefs, national origin, disability, marital status or sexual orientation. Children with special needs are considered for enrollment on an individual basis. An enrollment decision is based upon the recommendations of the child's teachers, social workers, psychiatrists, and upon an interview with both parents and child.

ENROLLMENT AND ATTENDANCE POLICIES

ADMISSION

Prospective children and their parents are invited to visit the program and meet the staff at any time. A telephone call or email is appreciated in order to guarantee that the staff will be available for questions.

Before admittance, children and their parents must meet with the Program Director or designee. A walk through time is set aside for this purpose. Upon enrollment, parents will be given a copy of the Parents' Handbook, which contains the Program's policies and procedures.

If a child is admitted mid-year, a parent and the child must visit The Carlisle Kids' House School-Age Programs to discuss the transition for the child into the Program.

ENROLLMENT

Registration and re-registration take place each spring for the following academic year. To enroll or re-enroll in the program, a registration packet must be completed and submitted, along with the first month tuition. All registration forms must be completed and returned before a child may attend the program.

Current families are given priority over any new enrollees until a pre-determined cut-off date. Ample notice of this date is given in writing, and is also included in the re-registration packet mailed to each family. To secure your child's place for the following year, the enrollment form and registration fee must be submitted prior to the cut off date, otherwise your child will be considered along with new families on a first come first served basis.

The half-day kindergarten program ends promptly at 3:15p.m. This is the time at which the grade school program begins, and the student/teacher ratios established by the State must be maintained. If your child needs to stay beyond 3:15 PM on a regular basis, s/he must enroll in the full day kindergarten program.

All children under the age of six must have documentation on file at the School that he has been screened for lead poisoning before he can attend the Program. This must be so noted on the child's The Carlisle Kids' House School-Age Programs Registration Form.

FEES

Deposit

A deposit of one month's tuition is due upon registration. This is considered your first month's tuition and you will not be billed until the following month.

Tuition

Tuition is calculated and amortized for the entire year, taking into consideration all holidays, and early release days. For the 2009-2010 academic year, the rates are as summarized below:

Kindergarten Program	Full-time (2 full days, 3 half days)	\$866.00 per month
Kindergarten Program	Half day (2 days 12:15-3:15)	\$255.00 per month
Grades 1 & up	Full-time	\$570.00 per month
Before school	Full-time	\$211.00 per month
Additional hours	Mornings	\$11.75 per morning
Additional hours	Afternoons	\$11.75 per hour

Tuition is pro-rated based on reduced number of days attended as is presented below:

Kindergarten, full time (12:00-6:15):

Schedule	Monthly	Annual
1 day/week	\$270	\$2,700
2 days/week	\$484	\$4,840

Kindergarten, part time (12:15-3:15) and Grades 1+ 3:15-6:15:

Schedule

Monthly

Annual

Sibling Discount

Families who have more than one child in our program will be required to pay the full amount of the highest tuition, you will then receive a 5% discount off of the remaining lesser tuition(s). This policy is in effect for those families using both our Preschool, and The Carlisle Kids' House School-Age Programs. Sibling discounts apply towards all dates registered for in advance including Summer Programs, Professional Days, etc.... Sibling Discounts do not apply towards drop-ins, unscheduled school closings and enrichment programs.

Billing

Tuition is due on or before the first day of each month. Payments received after the 5th of the month will be considered delinquent and a late fee of \$30 will be assessed. Invoices will be placed in mailboxes in the Director's office by the 25th of the month.

Payment, in the form of a check or money order, may be mailed to the Program, 142 East Street Carlisle, left with the Program Director, or put in the mail box in the front hallway. PLEASE DO NOT PUT a check on one of the administrator's desks or leave it with a CKH teacher.

Late Fee

If full payment is not received by the fifth of each month, a \$30.00 late fee will be assessed on your next invoice.

Returned Checks

Any charges incurred by the Program, as the result of a returned check will be billed to the family whose check was returned.

Arrears

Arrears are handled in the following manner:

- Any family with a balance greater than 30 days will be brought to the attention of the program director and will receive a letter from the program director asking that payment be made or payment plan be established.
- Any family with a balance greater than 60 days will be brought to the attention of the BOD and will be given a letter from the board giving the family 30 days from the date of the letter to pay their balance in full or establish a written payment plan signed by both parties. If payment is not received or payment plan is not established, the child(ren) will not be allowed into the program.
- If a payment plan has been established and payment is not received according to the plan, the BOD will be notified, a letter from the director and board will be sent out giving the family two weeks from the date of the letter to make the required payment. If payment is not received, the child(ren) will not be allowed into the program.

- Any family with an outstanding balance going into the new school year or who wishes to participate in additional programs and/or activities will not be able to register their children until the balance is paid in full.

FINANCIAL AID ASSISTANCE

CKH receives an annual grant from the Concord-Carlisle Community foundation to help our families with their tuition needs during times of financial hardship. CKH also has several fundraising events throughout the year that adds to the amount we are awarded by the CCC grant. Families who wish to be considered for tuition assistance can pick up an application in the business office. The completed application along with a copy of your last year's tax return will be reviewed by the financial aid committee. Decisions are made by the end of August year each and then reassessed again in January of the same school year. Tuition assistance is based on your monthly tuition and can be between ten to twenty-five percent of such.

Late pick-up fee

Children must be picked up before or promptly at 3:15 PM for half-day enrollment and at or before 6:15 PM for full day enrollment. Late arrival during the first five minutes will result in a late fee of \$5.00, with an additional charge of \$15.00 for each block of 15 minutes thereafter. For instance, if you pick up your child at 6:25, a late fee of \$15 will be assessed. These fees will be in effect for the first three times in which a family is late during the school year. After that, families will be charged \$5 for the first five minutes, and \$5 a minute thereafter for each late offense. This charge will appear on your next invoice; prior to that, written notification of the charge will be placed in the family mail pouch at CKH. This policy is strictly enforced. The Program is neither licensed nor staffed for coverage beyond 6:15. *A continuing pattern of lateness at pick up time may be considered grounds for dismissal from the Program.*

Drop-In

Requests for hours in addition to your child's regularly scheduled hours are accepted for both the morning and the afternoon programs. Requests are granted based on availability. Please notify us by phone or email no later than the morning of the day you are requesting to have your child(ren) come to the program. Rates for the current year are published above in the Tuition Section. Drop-in space is intended to be used by families needing our services on an occasional basis. Families needing consistent availability on specific days of the week will be required to register their child(ren) into our regular The Carlisle Kids' House School-Age Programs.

If you have requested additional hours and then decide not to use them, you must notify the Program by 2:00 PM of the day requested. This will insure the safety of your own child as well as eliminate the staff's efforts to locate a child expected to attend the Program. If this procedure is not followed, you will be charged for the additional time requested.

DAILY SIGN-OUT/IN PROCEDURES

The parent, guardian, or designee does not need to sign the child in/out; a staff member will do this by noting on the daily attendance register with their initials and the time of drop-off and pick-up.

Children are released only to a parent, guardian, or person designated on the Child Information Form on file. Any other changes in pick-up must be made in writing to the Director. A phone call

or message from the parent or guardian may also serve as acceptable forms of consent. A note will be made by the staff member as to who picked the child up.

A Special Note about Pick-ups

Please remember that your child is invested in his/her friendships and activities at CKHP. S/he may have difficulty leaving as soon as you arrive. Allowing them a few minutes to wind-up the day; i.e. finish the project, say good-bye to friends, and gather their belongings; can ease this transition tremendously. If you are having trouble getting your child to leave, please feel free to ask a teacher for assistance. If you have an appointment and must leave at a specific time, please call ahead, and we will make every attempt to have your child ready to go. If you know at drop-off time that you will be picking up your child earlier than usual we will so note this on the sign-in sheet and help to prepare your child in the dismissal transition.

ABSENCES

When your child will be absent from the program for any reason, please call us at 978-369-5546. This message assures the staff that your child is safe and allows them to plan the day more efficiently. There is no refund for absence and sickness.

SCHEDULE CHANGES

Permanent Schedule Changes

All changes take effect on the first day of any given month.

Children are released only to a parent, guardian, or person designated on the Child Information Form on file. Any other changes in pick-up must be made in writing to the Director. A phone call, message or email from the parent or guardian may also serve as acceptable forms of consent.

The parent, guardian, or designee must sign the child out by noting on the daily attendance register their initials and the time of pick-up. For children attending the morning program, the parent or designee must sign their child in using the same procedure. The attendance register is always with one of the teachers.

A Special Note about Pick-ups

Please remember that your child is invested in his/her friendships and activities at Extended Carlisle Kids House. S/he may have difficulty leaving as soon as you arrive. Allowing them a few minutes to clean up an activity or project they may be working on, say good-bye to friends, and gather their belongings; can ease this transition tremendously. If you are having trouble getting your child to leave, please feel free to ask a teacher for assistance. If you have an appointment and must leave at a specific time, please call ahead, and we will make every attempt to have your child ready to go.

ABSENCES

It is the responsibility of the parent to notify the staff of any exceptions to their enrollment schedule. When your child will be absent from the Program for any reason, including sickness, please call or email the program before 2:00P.M. This message assures the staff that your child is safe and allows them to plan the day more efficiently. In an effort to cut down on the number of calls needing to be made by our staff during a critical time in the program, parent's will now be charged a \$10 missing child fee if they fail to show up to the program. There will be a grace period of three "no shows" prior to the parent being charged this fee. There is no refund for absence and sickness.

SCHEDULE CHANGES

Permanent Schedule Changes.

Dropping Hours

If a permanent drop in scheduled hours is required, the Program must be notified in writing by the 15th of the month prior to the scheduled change. This means that in order to drop a day in November that you must have notified CKH in writing of the change no later than October 15th. You may do so by filling out a Schedule Request Form found in the entry way or otherwise notify the Director or Business Manager in writing. Failure to do so will mean you are responsible for your original payment until the Program is so notified.

Adding Hours

We will be as accommodating as possible, however we request when adding hours to your child's schedule on a permanent basis, whenever possible that you notify the program in writing by the 15th of the month prior to the scheduled change.

NOTE: Please inform the school office and your child's teacher of any change in your child's schedule.

Temporary Schedule Changes

Temporary schedule changes are not permitted due to fixed expenses and staffing levels. If you have a specific situation you may discuss it with the Director or a member of the Board of Directors, who will refer it to the Board for consideration.

EXTRA CURRICULAR ACTIVITIES

Carlisle Kids' House will transport children to activities in Carlisle and the surrounding town such as sports, Scouts, Carlisle Rec. activities, etc., providing that an Authorization and Consent Form for the activity is on file. Parents are responsible for the child when s/he has left the Program.

Below you will find the fee schedule in the order in which transportation to and from activities will be considered a priority.

Carlisle Center: \$3.00/run

In Carlisle: \$ 5.00/run

Bedford/Acton: \$7/run

Concord: \$10/run

These charges will be added to your monthly invoices.

Once you have chosen an activity you would like your child(ren) to participate in please request usage of the transportation service in writing PRIOR to signing your child up for the activity. In most cases, you will be notified immediately as to whether or not we will be able to accommodate your request. Once we have agreed that your child will be using our transportation service, please fill out a "Leave The Program Form," found in the entry way.

Regretfully, the Program is unable to accommodate a temporary change in enrollment and monthly fee due to attendance in such a program.

CARLISLE SCHOOLS CALENDAR

Holidays/Vacations/Snow Days

The Carlisle Kids' House School-Age Program tries to be open whenever the Carlisle Public Schools are closed including: Professional Days, Vacations, the Holiday Break, all snow days and delayed openings. This year we will also be open on the following holidays: Columbus Day, Veterans Day, President's Day and Patriot's Day. These days are **NOT** included in your monthly tuition.

Children need to be registered separately for each of these programs. Payment is due at the time of registration. A month before the day of the event flyers will be sent home informing you of the activities and events scheduled for these days. In order to ensure proper staffing, make reservations, and have all of our necessary materials, children need to be registered for these programs no later than 2 weeks prior to the date. Late registration will take place based on availability of space. A late fee of \$30 will be assessed for late registration.

Delayed Opening

In response to inclement weather, Carlisle Public Schools may choose to delay the opening of school. Depending on the forecast, there may be a 90-minute delay in the opening time of school; grades 5 - 8 would start at 9:30 AM, and grades 1 - 3 at 10:30 AM. Kindergarten would be canceled for the day.

In such events, The Carlisle Kids' House School-Age Programs would be open at 7:30AM. Children registered for the morning program that day would be able to come and stay until 8:30AM. After 8:30AM parents would be charged the drop-in rate for the remainder of the delay. During a delay, children not registered for the morning program will be taken on a drop-in basis, space permitting.

Morning Kindergarten Cancellation

In the event that a delayed opening results in the cancellation of morning kindergarten, CKH will be open for children at 7:30AM. Children already registered for the morning program, will be charged the drop-in rate after 8:30AM. Children not enrolled in the morning program will be charged the drop-in rate from the time of drop-off. If your child is already scheduled to come to CKH at 12:15pm on the day of a Kindergarten Cancellation, you will not be charged the drop-in rate past that time. **On these days children will need to bring their own lunches**, we will provide snacks and fun activities.

Unscheduled School Closings

In the event that Carlisle Public School is unexpectedly closed for the day, Carlisle The Carlisle Kids' House School-Age Programs WILL be open from 7:30AM-6:15PM. During the registration process in the fall or as a new family coming into the program later in the year, you will be given the chance to pre-register for this program. Pre-registration guarantees your child(ren) a space in our program should school be closed unexpectedly, fees for this program are \$80/day,per child/day.

Should you choose not to pre-register your child(ren) for this service drop-in space will be available on a first come first serve basis at a daily rate of \$90/day per child. If you would like your children to come to the program on a day in which school is closed unexpectedly please call

as early as 7AM the morning in which school is closed to inform us that your child(ren) will be coming and verify availability of space.

Sibling discounts do not apply.

Professional Days

There are three Professional Days when the Carlisle Public School will be closed in order to provide professional development for the school faculty. On such days, The Carlisle Kids' House School-Age Programs will be open from 7:30AM AM to 6:15 PM, providing a minimum number of children sign up. These days will be filled with off site field trips, in-house presenters.

There will be additional costs for these days.

Early Release Days

As indicated on your current public school calendar, the children are released early from school once a month. Occasionally, a month has an additional Early Release day, or there is a switch in the day to accommodate a coming holiday or vacation. If your child normally attends The Carlisle Kids' House School-Age Programs on that day, s/he is automatically registered for the Early Release Day at no additional cost. Drop-in Space is available at a rate of 11.75/day plus the cost of the field trip.

Early Dismissal from School

Early dismissal from school occurs when the Carlisle School is in session but decides to close early due to snow or another emergency situation. In the event of an early school dismissal that occurs during regular Program hours (noon until 6:15 P.M.), your child will be sent to The Carlisle Kids' House School-Age Programs if s/he is scheduled to attend the program on that day and you so indicated on the School's Emergency Bus Form.

PARENT PARTICIPATION

PARENT INVOLVEMENT

The Carlisle Kids' House School-Age Programs is a non-profit, parent-owned corporation. The director and staff are responsible for program development and direct care of the children. The operation of the entire organization requires the involvement and participation of all program parents. Volunteering as part of the organization provides an opportunity to meet other parents, and to participate in the success of the Program.

A "Parent Involvement" form is included in your enrollment package. There are many opportunities to become involved, with options to fit different styles. Choose what works best for you. Working together will make the load lighter for all and you may even have fun.

PARENT COMMUNICATION

On-going communications between parents and staff is available on a daily basis by telephone or at pick-up time. As the staffs' primary function is the care of your children, lengthy conversations are held by telephone or in conference, and not at pick-up.

The staff or Director will be available for individual conferences upon request. In turn, the staff may request that the parents come for a conference to discuss a particular issue or concern. This meeting will take place at the convenience of the involved persons.

Suggestions and comments regarding the Program and its policies are always welcome. They may be given in either written or verbal form to the Director or any Board member.

The Board of Directors is available to discuss any specific concerns you may have with the Program. The Board meets monthly. All parents in the Program are welcome to attend Board Meetings. A notice of meetings is posted at The Carlisle Kids' House School-Age Programs. Minutes are summarized are available upon request.

Newsletters are either sent home via mail or in your parent cubby. Included are classroom activities and other information about the program. Financial statements are available upon request.

All parents are encouraged to visit the Program to observe the routine activities.

PROGRAMS

PROGRAM PLAN / KINDERGARTEN PROGRAM PLAN

The Program provides activities and experiences to promote the individual child's physical, mental and social well being and growth. Our program incorporates many choices for children and includes both structured and non-structured activities. Staff members participate with; as well as, supervise children in their indoor and outdoor activities.

To meet the needs of all the children, the program uses a Multiple Intelligence approach to curriculum planning. This is based on the theory by Howard Gardner that there are at least 7 different ways to demonstrate intellectual ability.

For older children, the development of independence, responsibility, and respect are stressed. Children are encouraged to meet their needs for individual privacy, while honoring the needs of the group. Older children have the opportunity to earn special privileges, such as assisting with the younger children.

The Kindergarten Program also emphasizes the individual child's growth and development. A particular emphasis is placed on providing a caring, supportive, and nurturing environment, with ample opportunity for small group and one-to-one interaction. The child/teacher ratio is no greater than 8:1 during the Kindergarten program, and 10:1 during mixed age groups.

Independence is fostered through the provision of choices and non-directed activities. Staff also promote self-help skills, such as shoe-tying. Open-ended activities encourage creativity and free expression.

Detailed information on the program's activities is available upon request.

BEHAVIOR MANAGEMENT

All staff members are trained in the areas of positive discipline. The goal of the staff is to help the children learn through their experiences. Each classroom has clear and consistent limits for behavior. These limits are posted in the classroom in writing and are reviewed frequently. Mistakes are not treated as failures, but as valuable learning experiences. Children learn how to fix their mistakes and avoid them in the future. When children are behaving in an inappropriate manner, they are redirected to a different activity or group of friends. Our staff understand how

important it is for children to be heard. Their emotions, concerns, frustrations and fears are treated with respect and understanding. When limits are forgotten teachers are there to gently remind and re-direct.

No child shall be subjected to abuse or neglect; including: but not limited to any type of physical or verbal abuse.

Inappropriate behavior must be corrected in order to protect the welfare of all the children. Teachers will inform parents of on-going issues of concern and will document the associated behaviors. The staff may request to confer with the child's school teacher(s). Our policy is that The Carlisle Kids' House School-Age Programs staff will first discuss issues and concerns regarding a child with his/her parents or guardians. If, upon discussion, it is agreed that it would be helpful, the parents may give permission to The Carlisle Kids' House School-Age Programs Staff to discuss their child with the Carlisle Public School teachers or other professionals working with the child.

If this behavior continues to cause concern and is consistent, the Director will request a conference with the parents. At this time, the Director may refer the parents to an outside agency on behalf of the child. If the situation warrants, a behavioral contract between parents, staff and child may be put into place as a tool to correct the inappropriate behavior.

If a child's behavior is of extreme hazard or may endanger him/her or the other children, s/he will be immediately asked to leave the Program.

If property damage is incurred during the program hours, the families of any children involved will be held responsible.

HOMEWORK

Every afternoon between 4:45PM and 5:30PM there is a mandatory quiet time at the program. During this time children are encouraged do to their homework. If a child does not have homework that day, he/she is required to participate in a quiet activity such as: reading, writing or drawing. It is important to the director and staff to support both children and parents in their efforts to have homework assignments completed. If you wish your child to do homework at CKH, please make that expectation known to both your child and the staff. Our classrooms are equipped with most materials that your children would need in order to complete their assignments, and our staff are available to offer academic assistance. Your children's academic success is of utmost importance to us, please let us know if we may be of any assistance in this manner.

NUTRITION

Lunch

Lunch is scheduled between 12:15 - 1:00 daily. Each Kindergarten child brings his own lunch and drink from home daily.

On Early Release Days, all children attending must have a lunch and a drink.

Snack

Snack time is between 3:15 and 3:45 daily. Children bring their snack from home and the program provides water each day. It is our recommendation that you pack your child's snack separately from those s/he are expected to eat at school. For children who typically are picked up

later in the day we find it helpful if they are packed an extra snack for later in the day, after they have been actively involved in the program.

CLOTHING

Please send your child to The Carlisle Kids' House School-Age Programs dressed appropriately for the weather. We go outside daily, weather permitting. All children are expected to participate in outdoor play.

For winter, the children will need boots, hat, mittens (extra ones suggested), snow pants/extra pants, and a warm coat. Children without snow pants/extra pants and boots will not be allowed to play in the snow, as they are then wet and cold for the remainder of the afternoon.

We recommend that a complete change of clothing be kept in your child's cubby. This is especially helpful for the younger ones, although even the older children occasionally fall into mud puddles or get wet. Labeling these items will help everyone keep track of them.

It will be our assumption that children in the third grade and up are old enough to take responsibility for putting on their outdoor clothing. We therefore, will not check after them for mittens, hat, etc. However; they will be expected to accept the consequences for their decisions; i.e., being cold, not being able to play in the snow, etc. Please communicate to your child your expectations of how to dress for outdoor activities. Feel free to speak to one of the teachers if this is of particular concern to you.

TRANSPORTATION

To and From the Program

Children arrive at the program either by parent transportation or school bus. *PLEASE NOTE: The Carlisle Kids' House School-Age Programs is not responsible for children prior to their arrival at the program.*

To ensure that children arrive safely at The Carlisle Kids' House School-Age Programs morning program, a parent or other adult must walk each child in. Children are bused from The Carlisle Kids' House School-Age Programs morning program to the school.

In the afternoon, children are bused to the program from the school. The Carlisle Kids' House School-Age Programs teachers meet the children at the bus stop (top of the driveway) and walk them into the program.

Children are picked up from the program by their parent, guardian or designee, unless the program is otherwise notified in the form of a phone call, message or written note. This should include the person's name, relationship to the child and a phone number where they can be reached.

In an Emergency

In an emergency, the Carlisle ambulance will transport the child to Emerson Hospital.

Field Trips

Field trips are arranged throughout the school year during early release days, vacation weeks, professional days, and often during the regular program hours. Children must have prior written parental consent to participate.

Occasionally children will walk to and from the destination, however for the most part, children will be transported in a bus provided for this purpose or by cars driven by parents in the Program. Staff will accompany children on all field trips.

NOTE: It is the policy of The Carlisle Kids' House School-Age Programs that all children who attend the program on a given day will go on a field trip offered on that day.

HEALTH AND SAFETY

ILLNESS

In all cases we follow the Department of Public Health recommendations regarding when a child is ill and needs to be picked up as well as when it is safe for the child to return to Carlisle Kids' House. Attached please find the *The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health Fall 2009 Influenza Guidelines for Early Childhood Programs*. More information on the Department of Health recommendations can be found at www.mass.gov.

Children who become mildly ill at The Carlisle Kids' House School-Age Programs will be provided with a quiet place to rest. The staff may contact the parent.

Parents will be contacted to pick up the child if any of the following conditions exist:

- (1) Temperature; taken orally 2 times, ½ hour apart; of 99 degrees or higher
- (2) Abdominal pain, breathing difficulty, or other pain, which is persistent, lasting 30 minutes
- (3) Indication of contagious disease
- (4) Other symptoms (i.e. vomiting, diarrhea, and rash) which the staff feels warrant such action.
- (5) Head Lice has been found.

Parents will be requested to keep their child out of the program if any of the following conditions exist:

- (1) Any of the above
- (2) Child too ill to attend school that day

Children may return to the Program under the following conditions:

- (1) Temperature is normal for 24 hours-**with out assistance of fever reducing medications.**
- (2) Results of a throat culture are known
- (3) Antibiotic treatment for strep throat has been given for 24 hours
- (4) Lesions (Chicken Pox) have dried and crusted
- (5) Minimum Period of isolation for contagious diseases according to Massachusetts Public Health regulations, has been met
- (6) Child able to participate in regular program activities

A notice will be posted to alert parents in case of any communicable disease, such as mumps, measles, or chicken pox. Please notify the Director if your child has a contagious disease, so we may notify the other parents as soon as possible.

EMERGENCIES

In the event of an injury or sudden illness requiring emergency care beyond ordinary first aid, the staff immediately contacts 911 when necessary and then the parent. If appropriate, trained staff promptly administers first aid. If the injury or illness in any way appears to impair the child's breathing or circulation, the Carlisle ambulance is called for transport to Emerson Hospital. Otherwise, the staff immediately contacts the child's physician, or Pediatric & Adolescent Health Associates (PAHA); and follows the doctor's instructions.

If you cannot be located, staff will follow the above procedures calling the emergency contacts listed on the child's information form.

Emergency information (Child Information Form) must be kept up-to-date in order for the Program to be able to contact you. Please notify the Director in writing, if changes occur.

MEDICATION

The staff must have written parental authorization to administer medication, whether prescription or non-prescription. Additionally, any prescription medication shall be administered only with the written order of a physician, (which may include the label on the medication). All medication must be in the original pharmacy container, labeled with child's name, the name of the drug, and directions for its administration and storage. Medication may not be administered contrary to the directions on the original container unless so authorized by a written order of the physician. The parent or an adult designee must deliver medication to the program. Please do not send it to school with your child.

Each time the staff gives medication, it makes a record, which becomes part of the child's file. The record includes the child's name, medication, date, time, amount of dosage, and name of the staff member giving the dose.

With written parental permission, children may self-administer medication under the supervision of a staff member. Provided the Program has written parental consent as well as authorization of the physician, a child with Asthma may carry his own inhaler and use it as needed without the direct supervision of a staff member.

The staff stores all medications under proper conditions for sanitation, preservation, security and safety, and disposes of all unused medication or returns it to the parent.

REFERRAL PLAN

If a staff member is concerned about the medical services, including but not limited to dental check-up, vision or hearing screening; social or mental health; or educational needs of a child in the Program, it is his obligation to so notify the Director.

The Director, with input from the staff, must note the observations and concerns in the child's file. For a maximum of the next seven days that the child attends the Program, the senior staff or Director must make a notation in the file to support or deny the observation.

A meeting is then held between the Director and the appropriate Coordinator to compile the observations into a written statement to be presented to the parents. The statement will include the reason for recommending the referral, a brief summary of the Program's observations related to the referral and any efforts the Program may have made to accommodate the child's needs. A written record of the referral, the parent conference and the results is maintained in the child's file.

The Director must then arrange to meet with the child’s parents to discuss the observations and to offer help in making the referral. The prepared statement is given to the parents at that time. Written parental consent is required before the referral can be made.

The following services are available for referrals:

Social Needs	Concord Family Services or child’s doctor	978-369-4909
Mental Health	Concord Family Services or child’s doctor	978-369-4909
Medical Needs	Pediatric & Adolescent Health Associates or child’s doctor	978-369-6970
Educational Needs	Carlisle Public Schools	978-369-6550

PREVENTION OF ABUSE AND NEGLECT

All children in the care and custody of The Carlisle Kids’ House School-Age Programs shall be protected from abuse and neglect. If a staff member should suspect child abuse or neglect, the Program Director or board President must be immediately notified. The Department of Social Services (DSS) is then contacted. *All members of the staff are mandated reporters of suspected abuse or neglect.*

If a case of suspected abuse has allegedly occurred while the child was under the care of the Program, the Director will immediately notify the Department of Social Services and the Office of Early Education and Care.

The Carlisle Kids’ House School-Age Programs will cooperate in all investigations of abuse and neglect. Cooperation will include identifying parents of children currently or previously enrolled in the Program, disclosing information to the Office of Child Care Services and others persons or agencies specified by the OCCS as being necessary to the prompt investigation of allegations and the protection of the child.

Any staff member that is under investigation will immediately be removed from direct contact with children until the investigation is deemed complete under the requirements of DSS and the Program, and for such further time as the EEC requires.

NOTE: The contents of this handbook are presented as a matter of information only. Carlisle The Carlisle Kids’ House School-Age Programs, Inc. reserves the right to modify, suspend or terminate any or all plans, policies, or procedures described herein, in whole or in part, at any time, with or without notice. The language used in this handbook is not intended to create, nor is it to be construed to constitute, a contract between Carlisle The Carlisle Kids’ House School-Age Programs, Inc. and any other party.

*The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health*

Fall 2009 Influenza Guidance for Early Childhood Programs

September 18, 2009

As the fall begins, the Massachusetts Department of Public Health (DPH) and Department of Early Education and Care (EEC) are providing guidance for early childhood programs (referred to as “child care centers” throughout this document) concerning 2009 Pandemic H1N1 influenza, seasonal influenza, and influenza-like illness (ILI). “Child care centers” is used to describe center-based and home-based child care programs, Head Start programs, and other early childhood programs providing care for children in group settings (including preschools operating in public schools). DPH expects that both seasonal and H1N1 influenza will be circulating in the fall and is preparing for increased number of cases.

The information provided is based on the most recent guidance from the U.S. Centers for Disease Control and Prevention (CDC). **Our goal for the upcoming fall and winter is limiting transmission in child care centers in order to keep centers open and functioning as usual.**

Guidance is provided to child care centers in six areas:

1. Seasonal Influenza Vaccination
2. H1N1 Influenza Vaccination
3. Control and Surveillance Measures for ALL Child Care Centers
4. Prevention and Education
5. Planning for the Flu Season
6. Decisions about Dismissal or Closing

1. Seasonal Influenza Vaccination

As was the case last year, annual seasonal influenza vaccination is recommended for **all children age 6 months through 18 years**, as well as for anyone who might spread flu to someone at increased risk (like household members and caregivers of infants under six months of age). Child care centers should work closely with local boards of health, community vaccinators, parents, and healthcare providers to ensure that children are vaccinated. Seasonal influenza vaccine became available in Massachusetts communities in August of 2009. It is recommended that communities begin seasonal influenza vaccination as soon as possible after vaccine becomes available. For more information concerning seasonal influenza vaccination please go to mass.gov/flu and click on “Seasonal Flu.”

2. H1N1 Influenza Vaccination

H1N1 vaccine is expected to be available in October. Child care centers will need to work closely with local boards of health, community vaccinators, parents, and healthcare providers to ensure that children are vaccinated. While vaccination is recommended for everyone, initial target groups are:

- pregnant women
- **household contacts and caregivers of infants less than 6 months of age**
- **persons age 6 months – 24 years old**
- persons age 25 – 64 years old with certain health problems that can put them at increased risk for complications (such as heart disease, asthma, diabetes, weakened immune systems, certain muscle and nerve disorders that can lead to breathing or swallowing problems)
- healthcare providers and emergency medical services staff

Most young children will need two doses, spaced approximately one month apart. The CDC and state health departments will be monitoring very closely for any signs that the H1N1 vaccine is causing unexpected adverse events, and the Vaccine Adverse Event Report System (VAERS) system is in place to report suspect events and investigate rapidly. More detailed information regarding target groups, allocation and administration of H1N1 vaccine will be distributed widely when the vaccine is available. Child care programs are encouraged to contact their local board of health to make sure they are included in planning for community vaccination programs. A federal law known as the PREP Act provides protection from liability for anyone involved in any part of a vaccination campaign against H1N1 flu.

3. Control and Surveillance Measures for ALL Child Care Centers

The following recommendations are designed to help prevent the spread of influenza-like illness (ILI) in child care centers and should be followed all the time, not only during a flu outbreak. *If the CDC or DPH determine that flu conditions are more severe than the spring 2009 outbreak, additional guidance will be issued.*

Conduct daily health checks: Child care staff conducting daily health checks should observe all children and staff and talk with each child’s parent or guardian and each child. He or she should look for changes in the child’s behavior, a report of illness or recent visit to a health care provider, and any signs or symptoms of illness. During the day, staff also should identify children and other staff who may be ill. Ill children and staff should be further screened by taking their temperature and inquiring about influenza symptoms. Use the attached “Daily Health Check” (see page 6) as a guide, and the “**Flu Symptom Check List.**”

Promptly isolate children and staff with flu-like illness in a separate room, if possible, until they can be sent home. The ill individuals should wear surgical masks, if possible, and those caring for them should wear masks too. Young children should be kept under close adult supervision.

All sick children and staff should stay home for at least 24 hours after they no longer have a fever. This fever-free period *must* be without the use of fever-reducing medicines, like Motrin (ibuprofen) or Tylenol (acetaminophen). They should stay home until at least 24 hours after they no longer have a fever even if they are taking antiviral medicines. Many people can expect to stay home for about 4 days: about 3 days with

fever and one more day with no fever and no fever reducing medicines. However, the fever with influenza can last 2-5 days or more, so children and staff should be prepared to stay home as long as it takes to become fever-free for 24 hours.

Make sure that sick children, teachers and staff stay home. Inform parents that they should assess children for symptoms of influenza before sending them to child care. Influenza-like illness (ILI) symptoms include fever plus cough and/or sore throat. It may also include other symptoms, such as vomiting or diarrhea. Distribute the *Flu Symptom Checklist* to families and ask that parents use it if they are unsure if their child is well enough to go to child care. Distribute it to staff as well. Keeping people with a fever at home will reduce the number of people who get infected.

Encourage early medical evaluation of high-risk children and staff who have conditions that put them at increased risk of complications from the flu (heart disease, asthma, diabetes, pregnancy, weakened immune systems, and certain muscle and nerve disorders that can lead to breathing or swallowing problems). Try to identify these individuals now, so they can be promptly referred if they become ill.

Monitor absenteeism in children and staff. Report higher than normal absenteeism or clusters due to influenza-like-illness to your local health department and to the DPH Immunization Program at 617-983-6800. An epidemiologist is available to provide further guidance on surveillance and outbreak control.

Otherwise healthy children and staff experiencing mild ILI do not need to seek medical care since this would place a difficult burden on the health care system. Therefore, if a child is out with ILI and has stayed home according to the guidelines above, they do **not** need a note from their doctor or to have had a flu test in order to return to the program.

A negative rapid influenza test result can occur even when someone does have influenza (a “false negative”). Rapid influenza tests, used in some medical offices and emergency rooms, can help in the diagnosis and management of patients with signs and symptoms of influenza. If they are positive, the likelihood that the patient has influenza is very high. However, if they are negative, the patient can still have influenza. Therefore, a negative rapid test can not be used to shorten the exclusion period.

A health care provider’s note recommending a child with ILI return to child care does not supersede the public health exclusion guidance.

Consider selective early childhood program closures. If flu transmission is high, some communities or early childhood programs may consider temporary closures with the goal of decreasing the spread of flu among children less than 5 years of age. See below, “Decisions about Child Care Center Dismissal or Closing.”

4. Prevention and Education

Child care centers can act as a point of spread of flu cases, and children can easily spread flu to other children and their families. The primary steps for prevention and decreasing transmission of flu cases are listed below:

Make sure all school age children are vaccinated against both types of flu.

Children (over six months of age) and staff can get a **seasonal flu shot** as soon as possible

Children (over six months of age) will be able to get an **H1N1 flu shot** in October.

The H1N1 flu shot is recommended for everyone, especially:

- pregnant women
- household contacts and caregivers of infants less than 6 months of age**
- people aged 6 months to 24 years old**
- persons aged 25 – 64 years old with certain health problems that can put them at increased risk for complications (such as heart disease, asthma, diabetes, weakened immune systems, certain muscle and nerve disorders that can lead to breathing or swallowing problems)
- healthcare providers and emergency medical services staff
- Emphasize and remind children and staff about the importance of frequent proper hand washing and cough etiquette in preventing the spread of diseases.**

Provide the time and supplies for children and staff to wash their hands when needed.

Place boxes of tissues in each room.

- When soap and running water are not available to clean hands, consider cleaning hands using alcohol-based hand sanitizer.** Young children should be supervised when using alcohol-based hand sanitizer. Also, store hand sanitizer out of children's reach. The alcohol it contains may be dangerous if swallowed.

- Ask educators or child care health consultants to demonstrate and teach proper hand washing and cough etiquette in each class,** and to explain why it's important.

Educational materials, posters, etc., are available on the DPH website, www.mass.gov/flu. Send hand washing or other flu control educational materials home to parents and ask for their assistance in reinforcing these messages with their children.

- Clean surfaces and items that are more likely to have frequent hand contact (“high touch surfaces”) with your normal cleaning agents according to your routine schedule.** Once respiratory secretions containing the virus dry out, the virus is no longer effectively infectious. **Reassure parents and staff that there is no need for special disinfection or decontamination efforts** and that the main focus should be on hand washing and cough and respiratory etiquette.

5. Planning for the Flu Season

- Try to set up a separate room for care of sick children or staff until they can go home.
- Purchase personal protective equipment such as surgical masks for staff providing care for sick people at home and train staff about basic infection control.
- Update child and staff contact information as well as emergency contact lists.
- Identify and establish a point of contact with your local board of health.

- Develop a plan to cover key positions when staff stay home because they are sick.
- Review sick leave policies for barriers to staff staying home while ill or to care for a family member.

6. Decisions about Child Care Center Dismissal or Closing

In order to limit the spread of influenza, DPH has recommended a policy focused on keeping all children and staff with symptoms of influenza out of child care center and related activities during their period of illness and recuperation, when they are infectious to others. *The goal is to keep child care centers open and functioning as usual.*

However, DPH recognizes that, on a case-by-case basis, some facilities may need to consider the dismissal or closure of a facility if the extent of influenza-like illness has impaired their ability to meet regulations for staff-child ratios, or it is a facility where most of the children are medically fragile*. ***Child care center officials should discuss their situation with their local board of health and/or DPH prior to making this determination.*** Child care centers should prepare for the possibility of dismissal or closure before facing this decision. This includes asking teachers, parents, and officials in charge of critical programs (such as meal services) to make contingency plans.

* A medically fragile child is one who needs intensive life sustaining medical assistance with daily living, for example, a child who uses an oxygen tank, needs suctioning, is on a ventilator, is fed through a tube or has trouble moving.

Factors to consider in child care center closure decisions:

4. Inability to function due to high absenteeism among children and/or staff

- Absenteeism that is substantially higher than expected for the facility at this time of year

Confirmation that the absenteeism is due to influenza-like-illness , indication that the already high absenteeism is rising rather than falling

If a decision to dismiss or close a facility is made in consultation with the local board of health and/or DPH, the following should be considered:

- Cancellation of all child care center-related gatherings and discouraging parents and children from congregating outside of the child care center.
- Duration of closing: The duration of closings for childcare facilities should be for 5-7 days. *Child care center authorities should consult with their local board of health and DPH for guidance on reopening.*
- Steps to take after reopening: Keep in mind that flu will likely still be circulating, and there will be the potential for more cases when your facility re-opens. Be prepared to institute all of the necessary surveillance and control measures at that time.
- Reporting to DPH: If a decision is made to close a child care center, the facility should notify DPH by calling the Immunization Program at 617-983-6800 and ask to speak to an epidemiologist. The Department of Early Education and Care should also be notified.

□ The child care center should also submit a *School Closure Reporting Form* to the DPH Office of Integrated Surveillance and Informatics Services by fax at 617-983-6220. The form is available at: www.mass.gov/Eeohhs2/docs/dph/cdc/flu/swine_school_closure_form.pdf.

Additional Information and Resources

For the most up-to-date information concerning H1N1 and seasonal influenza, please check the DPH flu web site at www.mass.gov/flu.

CDC has developed *Preparing for the Flu: A Communication Toolkit for Child Care Facility and Early Childhood Programs* which contains helpful detailed information.

This Toolkit should be considered an additional resource for you and is available at:

<http://pandemicflu.gov/professional/school/childtoolkit.html>.

Daily Health Check at Child Care Centers

Do the daily health check when you greet each child and parent as they arrive. It usually takes less than a minute. Also observe the child throughout the day.

LISTEN: Greet the child and parent. Ask the child, "How are you today?" Ask the parent, "How are you doing? How's (name of child)?" "Was there anything different last night?" "How did he sleep?" "How was her appetite this morning?"

- Listen to what the child and parent tell you about how the child is feeling.
- If the child can talk, is he complaining of anything? Is he hoarse or wheezing?

LOOK: Get down to the child's level to see her clearly. Observe signs of health or illness.

General appearance (e.g., comfort, mood, behavior, and activity level)

- Is the child's behavior unusual for this time of day?
- Is the child clinging to the parent, acting cranky, crying, or fussing?
- Does she appear listless, in pain or have difficulty moving?
 - Breathing**
 - Is the child coughing, breathing fast, or having difficulty breathing?
 - Skin**
 - Does the child look pale or flushed?
 - Do you see a rash, sores, swelling, or bruising?
 - Is the child scratching her skin or scalp?
 - Eyes, Nose, Ears, Mouth**
 - Do the child's eyes look red, crusty, goopy, or watery?
 - Is there a runny nose?
 - Is he pulling at his ears?
 - Are there mouth sores, excessive drooling, or difficulty swallowing?

FEEL: Gently run the back of your hand over the child's cheek, forehead, or neck.

- Does the child feel unusually warm or cold and clammy?
- Does the skin feel bumpy?

SMELL: Be aware of unusual odors.

- Does the child's breath smell foul or fruity?
- Is there an unusual or foul smell to the child's stools?

Ill children and staff should be further screened by taking their temperature and inquiring about influenza symptoms – particularly cough and sore throat. See the "Flu Symptom Check List."