ROCKWELL PRESCHOOL
HOLWAY CHILD STUDY CENTER

HEALTH CARE POLICY
and
EMERGENCY INFORMATION

Edition 2018-19
Our Address:
Holway Child Study Center /Rockwell
70 Studio Road
Newton, MA 02466
(617) 243-2355/2335

EMERGENCY CONTACT NUMBERS:
Campus Security: 2279
Newton Police: 617/552-7240
Fire: 911
Ambulance: 911
Poison Control Center: 800-682-9211
Environmental Services: 2325

HEALTH CARE CONSULTANT:
Dr. Brenda Pring, 19 Rowe St., Newton, MA,
617- 859-5470

HOSPITAL USED FOR EMERGENCY:
Newton-Wellesley Hospital
2000 Washington St.
Newton, MA 02462
Main # 617/243-6000
Emergency Room: 617/243-6193

DESIGNATED ADULT OUTSIDE OF THE CENTER:
Campus Security 2279

FIRST AID KITS:
There is a First Aid Kit located in the pantry on the first floor, in the classroom bathroom on the second floor, and in the white mailbox attached to the tree in the center of the lower playground.

EMERGENCY PROCEDURES

Onsite Emergency Procedures

Minor Injuries: A staff member (all staff members are trained in First Aid) will evaluate and treat the injured child. The staff member who treated the injured child must fill out an Injury Report that will be given to the parent. Head injuries will be reported to the parent along with the time the injury took place. Based on the severity of the injury, the staff member may also call and notify the parents of the accident.

Serious Injuries: A staff member who is trained in CPR/First Aid will evaluate and treat the injured child with the appropriate treatment. In situations of injuries with excessive blood loss, possible broken bones, or other life threatening injuries, a second staff member will call 911 for transportation to Newton-Wellesley Hospital. A staff member will accompany the child to the hospital and stay with the child until the parent(s) arrive. The Director or director designee will notify the parents or the emergency contact person to inform them of the injury.
All Injuries: All injuries, which result in a bump, bruise, abrasion, welt, and all head injuries must receive an Injury Report. A teacher will fill out the report and record the incident on the Log Sheet. The parent(s) must sign the original so it may be placed in the child’s file. The parents will also receive a copy for their records. The Director monitors the log monthly and takes notice of injuries that recur or are caused by a certain area or piece of equipment.

Off-Site Emergency Procedures

In the case of any injuries while the children are off of Lasell College property, the above procedures will be followed. The staff is equipped with a travel first aid kit, emergency contacts, allergy medications (if applicable), and a cell phone. If a serious injury occurs, the Director will be notified and will determine the most expedient way to assist the Teacher(s).

Serious Injuries: Follow above emergency procedures. In addition, contact center (617-243-2355) for back up support. All other children and remaining staff will stay at the site until additional help arrives or return to the center. If enough adults are present to safely walk or transport the children, the class may return on their own.

Missing Child: If a child is missing on a field trip or at school the following steps will be taken:

- Call 911
- Retrace steps and look in all possible locations
- Call Parents

Emergency Contacts

In an emergency, all attempts will be made to contact the parents immediately. If for some reason the parents are unreachable, we must call the person/people on the emergency contact list. The list will be followed in the order in which the contacts are listed. If we are unable to reach a contact person, the child will be transported to the hospital and treated accordingly. At this time the Director, or appointed person, will continue to try to contact the parents and emergency contacts.

First Aid Equipment

In the Center there are two First Aid kits, one on the first floor and one on the second floor. There is also one on the playground. The kits are located in the pantry on the first floor, and in the classroom bathroom on the second floor. Any staff that has received first aid/CPR training may administer first aid/CPR. First Aid does not include cutting of the skin or any surgical procedures. A staff person may remove splinters, but only if it does not include the use of a needle or cutting the skin.

The Lead Teachers review First Aid kits monthly on each floor. Any items that are missing or are in low supply are reported to the Director and will be replaced.
Contents of the First Aid Kits

Cold Pack
Antibiotic Ointment
Band Aids (small and large)
Antiseptic Wipes
First Aid Tape
Scissors
Sterile Pads

Thermometer
Gauze Pads (small and large)
Protector for mouth to mouth resuscitation
Rolled Gauze
Tweezers
Gloves

EMERGENCY EVACUATION PLANS

Separate evacuation plans are posted in each classroom. All staff must familiarize themselves with the plans.

The individual written plan is attached to the floor plan in each location. Each new staff person is to be shown and given each plan.

The Director or director designee will check for any children left behind by walking through the center once it seems apparent that everyone is out. The meeting points are noted on the plan. The Director or designee is to visit all points until all children are accounted for.

The Lead Teacher takes the attendance sheets from the classroom to ensure that all children and staff are out of the building and to report to campus police.

EVACUATION OF BUILDING

Natural Disaster
If children are unable to be evacuated (i.e. Snowstorm); they will remain within the center as long as heat, electricity and running water are available.

Should the center be uninhabitable the children will be evacuated (on foot) to the Rockwell Dormitory next door. Teachers will bring with them those items necessary to maintain daily routines (i.e. water, food, books, first aid kits, medications...), as well as the emergency contact information for all the children. The director or director designee will be responsible for contacting college security and/or local authorities by land line or cell phone if the children are evacuated. The attendance sheets will be utilized to designate which children were taken home.

Parents will be notified by the director or teachers of the exact room and the number where they can reach the center once children have been moved. Center phones will be forwarded to the new number. Should phone service be lost, the center will contact parents via cell phone.
**Power Outage**
In case of power outage children will remain at the center as long as fire and safety systems are working, and heat, water and daily functions are not affected. If the center loses its phone system it will remain open, but use a cellular phone in conjunction with the College Security Department to communicate with parents and outside agencies.

**Loss of Water**
Should the center experience the loss of water we will notify parents that children need to be picked up and close when all children have gone home. Bottled water is always available.

**Loss of Heat**
In event of the loss of heat the Center will notify parents as soon as possible to allow ample time for pick up. Children will remain in the center as long as the temperature remains above 65 ° F. Should the temperature drop to 65 ° F parents will be notified that the children are being evacuated to the lower level of the Rockwell Dormitory. Phones will be forwarded to this location. All necessary supplies will be taken with the children as designated under the planned evacuation plan.

**Planned Evacuation Procedures**
In case of a planned evacuation, teachers will organize items to be transported to the new location on the table in their classroom (i.e. toys, books, lunches....). The Director or designee will notify security and the college operator of the move and if assistance is needed. Children will be dressed in their outerwear and will take any necessary personal possessions with them. Teachers will collect their attendance sheet, outerwear, and any necessary personal possessions and will escort the children to the Rockwell Dormitory. Before leaving the center and upon arrival at the dorm, teachers will take attendance to account for all children. The Director or Director designee will confirm the count. The Director or designee is responsible for obtaining and transporting a cellular phone. Upon arrival, the Director or designee will immediately notify the college operator and security of the movement of the center and at which extension the center can be reached. After all children are accounted for the staff will check the room for safety hazards. Staff will then be appointed to return to the center to collect items needed and to secure the center. The Center phones will then be forwarded to the dorm. One staff member will be assigned to answer in-coming phone calls and the cellphone. A staff person will also be designated to call parents to notify them of the Center evacuation. The attendance sheets will be utilized to designate children who have been picked up and by whom.

**Unplanned Evacuation Procedures** (In event of a fire or other emergency all security personnel report to the area to help evacuate.)
In event of an unplanned evacuation, teachers will collect their attendance sheets, first aid kits, and all emergency contact information, and evacuate children to the designated area according to the exit used. The director or designee will do a final sweep through the center to make sure all children are with their class. She will then check the evacuation location (the bottom of the lower playground) at which time attendance will be taken and confirmed.
Once the evacuation location has been checked, staff will be notified if they may return to the building or if children will be moved to the evacuation location (Rockwell Dormitory). Should the Center need to be moved to the dorm, the staff will be notified to follow the planned evacuation procedure as mentioned earlier. In the event of an unplanned evacuation where the staff is unable to return to the center, the director or designee will arrange with the cafeteria, and Housekeeping services for needed supplies to be delivered to the dorm. (i.e. food, blankets...).

**Lock-Down Procedure:**
In the event of a dangerous situation on campus and the Director of Public Safety determines that a lock-down is necessary, all faculty and staff will be notified via computer and/or text message. Rockwell staff will:

- Close and lock all windows and doors
- Turn out all lights in the classrooms, and draw shades
- Close all classroom doors
- Gather together in a predetermined location within the classroom

All faculty and staff will be notified again via computer and/or text message when all is clear, and lock-down can be lifted.

**Fire Drills** are conducted every month throughout the school year. Exact dates are noted in the fire drill log in the office. Drills are held at various times throughout the morning.

**Fire Extinguishers:** There are five fire extinguishers in the center. On the second floor there is one in the office and one at the top of the main stairway. There is one in the kitchen and one at the bottom of the main stairway on the first floor. There is also one in the basement.

**INJURY PREVENTION PLAN**

The Teachers in each classroom are responsible for periodically checking the classroom and removing any broken equipment and placing it in the Director's office. The Director is responsible for arranging for repair or disposal and replacement of the piece.

The Injury Log has been described above. The injury/accident form is attached to this policy. This form provides a space for a description of the accident, the witnesses, the date and time of the accident and a signature of the witnesses and Teacher in charge at the time of the accident.

When the Director arrives in the morning, part of his/her responsibilities in each room is to attend to the immediate repair or removal of any unsafe equipment.
HEALTH POLICY

Our health policy is based on preventative care. The staff is instructed to be meticulous about hand washing before handling food and throughout the day. Universal precautions are taken by staff when working with children to minimize the spread of infection and contagious diseases. Any bodily secretions from children are handled as potentially infectious.

Gloves are used regularly when changing clothing, wiping noses or in the event of an accident with blood. Washing tables with soap and water then bleach and water solutions after snacks, play time, and lunch is performed as a further precaution. When spills of body fluids occur, staff cleans them up immediately with detergent followed by water rinsing. After cleaning, staff sanitizes nonporous surfaces. Carpeting and rugs will be spot cleaning with detergent-disinfectant, and housekeeper will shampoo or steam clean at the end of the day. Diapers, pull-ups or contaminated materials are secured in plastic bag and placed in a closed container.

Rest-time mats may be covered with a sheet provided by the parent(s). Each child has his/her own mat. All used mats are cleaned weekly.

Sick children are separated from the group and parents are called to take their child home. It is the parents’ responsibility to report contagious illnesses to us immediately. This will allow us to make other families aware of any serious illnesses and to be on the lookout for specific symptoms. While we may post certain information, there will be confidentiality for the child and family who exposed other children to a particular illness.

Children who are not feeling well should stay home. We encourage you to give your child time to rest and recuperate so that she/he may regain strength in order to participate in all classroom activities upon his/her return to school.

In January 2010, EEC issued new regulations for child care programs that include a requirement that educators assist children with brushing their teeth if children are in care for more than four hours or if children have a meal while in care. As an EEC licensed program, we must comply with this regulation. However, parents may choose that their child not participate in tooth brushing while present at the child care program and can do so by filling out the appropriate form.

All families MUST provide proof of a medical examination for each of their enrolled children dated within the year and signed by their child’s pediatrician. NO CHILD IS ALLOWED TO START SCHOOL WITHOUT A CURRENT MEDICAL RECORD ON FILE. Be sure to update your child’s medical records during the year by providing documentation of subsequent check-ups.

Children with chronic conditions, such as asthma or epilepsy must have an Individual Health Care Plan in his records and for the classroom. In collaboration with the child’s physician, the plan must state the child’s symptoms, the treatment, the possible side effects, and the consequences of failure to treat. At the start of the school year, parents will train staff in the child’s IHCP.
### Immunization Schedule

<table>
<thead>
<tr>
<th>Age</th>
<th>Birth</th>
<th>1 mon.</th>
<th>2 mon.</th>
<th>4 mon.</th>
<th>6 mon.</th>
<th>12 mon.</th>
<th>15 mon.</th>
<th>18 mon.</th>
<th>24 mon.</th>
<th>3-4 yrs</th>
<th>4-6 yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccine</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>1 Hep B</td>
<td>2 Hep B</td>
<td>3 Hep B</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diphtheria</td>
<td></td>
<td>1 DTaP</td>
<td>2 DTaP</td>
<td>3 DTaP</td>
<td>4 DTaP</td>
<td>5 DTaP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tetanus</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pertussis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>H.influenzae Type b</td>
<td>1 Hib</td>
<td>2 Hib</td>
<td>3 Hib</td>
<td>4 Hib</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td>1 IPV</td>
<td>2 IPV</td>
<td>3 IPV</td>
<td></td>
<td>4 IPV</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MMR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1 MMR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varicella (Chickenpox)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1 Var</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2 Var</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Hep A</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lead Test</td>
<td>Annually</td>
<td>Annually</td>
<td>Annually</td>
<td>Annually</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### SPECIFIC HEALTH RESTRICTIONS

- These restrictions were created keeping in mind the Massachusetts Department of Health Guidelines.

**Runny Nose:** If a child has a runny nose with clear discharge and is able to participate in all daily activities (including going outside), then he/she may attend school. A child who has had thick yellow or greenish discharge from the nose for more than 5 days must be checked by a doctor. If your child presents these symptoms, we may ask for a note from your child’s doctor regarding their health.

**Fever:**

- **Normal Readings**
  - Axillary - 97.6
  - Oral - 98.6
  - Rectal - 99.6

When a child has a temperature two degrees or more above normal, for any reason, he/she must stay home until the fever has been normal for 24 hours without the assistance of medication. If a fever develops at school, we will contact you to pick up your child within the hour.
<table>
<thead>
<tr>
<th>Condition</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vomiting:</td>
<td>Do not send your child to school if he/she has vomited during the night or before coming to school. If your child vomits during school hours, you will be called to pick up your child within the hour. A child who has been sent home for vomiting may not return to school until they are able to eat normally and hold down their food.</td>
</tr>
<tr>
<td>Diarrhea:</td>
<td>Do not send your child to school if she/he has watery stools. If your child has two or more episodes, you will be called to pick up your child within the hour. A child who has been sent home with diarrhea may not return to school until they have had at least one normal bowel movement. If the child has not had a bowel movement they must remain home until they do so. Children who have had diarrhea for more than 5 days may be required to return to school with a doctor’s note stating that they are healthy and have had a normal bowel movement.</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>Conjunctivitis is very contagious. Your child may have one or more of the following symptoms: white or yellow discharge, the white’s of his/her eyes may be pink, eye pain, redness of the eyelids or skin around the eye and itchiness. This must be treated with an antibiotic and the child should remain home for 24 hours and three doses after treatment has begun. If your child shows these symptoms at school, you will be called to pick up your child within the hour.</td>
</tr>
<tr>
<td>Strep Throat:</td>
<td>A child with strep throat must stay home for 24 hours after treatment has begun and has had a normal temperature for 24 hours. If your child continually complains of a sore throat, you will be called and asked to have your child seen by his/her pediatrician to test for strep.</td>
</tr>
<tr>
<td>Head Lice:</td>
<td>Lice are not a sign of unhealthy or unsanitary conditions. If you discover that your child or any siblings have lice please notify us immediately. A child with head lice may return to school 24 hours after treatment has begun and all nits have been removed. If your child contracts lice during school, you will be called to pick up your child within the hour. If a child is sent home with head lice all of their extra clothing and nap items must be taken home and washed with hot water and bleach.</td>
</tr>
<tr>
<td>Impetigo &amp; Pinworm:</td>
<td>A child with impetigo or pinworm should remain home for 24 hours after treatment began. If either illness occurs on your child at school, you will be called to have your child seen by his/her pediatrician to give a diagnosis.</td>
</tr>
<tr>
<td>Ringworm:</td>
<td>A child with ringworm will be excluded from school for 48-72 hours after treatment has been given. If this illness occurs at school, you will be called to have your child seen by her/his pediatrician to give a diagnosis.</td>
</tr>
</tbody>
</table>
**Scabies:**
A child with scabies should remain home until treatment has been completed. If this illness occurs while your child is at school, you will be called to have your child seen by his/her pediatrician to give a diagnosis.

**Chicken pox & Measles, Shingles**
A child who has the chicken pox or measles should remain home for 5 days or until all lesions have dried and crusted. If a child shows symptoms during school, you will be called to pick up your child within the hour.

**Mumps:**
A child with the mumps must stay home for 9 days after the onset of gland swelling. If symptoms occur during school, you will be called to pick up your child within the hour.

**Coxsackie (Hand, foot and mouth disease)**
A child with Coxsackie can attend school once he/she has been fever free for 24 hours without the assistance of medication. The blisters, which occur after the fever, are not contagious.

**Roseola**
A child with Roseola can attend school once he/she has been fever free for 24 hours without the assistance of medication. The lacy rash, which occurs after the fever, is not contagious.

**PARENTS CAN HELP OUR STAFF BY FOLLOWING OUR HEALTH POLICY**

1. A parent’s first responsibility is to see that her/his child is physically well enough to come to school. If your child is not feeling well PLEASE keep him/her home to allow for a full recovery.

2. The Department of Early Education and Care (DEEC) mandates daily outdoor playground time weather permitting. A child, who is well enough to attend school, should be able to participate in all daily activities, including outdoor play.

3. Parents must provide the program with an Individual Health Care Plan for a child with a chronic medical condition that was diagnosed by a licensed health care practitioner.

4. The Holway Child Study Center reserves the right to not accept a child or to send a child home if he/she is not well enough to attend school. The classroom Teachers will make this decision with guidance from the Director and Health Care Consultant, if necessary.

5. If a child arrives at the Center with an unexplained rash or other markings on the skin, or exhibits other symptoms of abnormal behavior such as vomiting or bleeding, fever or runny eyes, the Teacher in charge is responsible for assessing the situation. If he/she is unable to diagnose the symptoms they will call the Director, or the Health Care Consultant.
6. Following our health policy allows your sick child to get the attention he/she needs when he/she is sick and may prevent other children from getting sick.

7. Parents are notified and while the child waits to be picked up, he/she can rest in a quiet area or in the Director's office. Parents need to pick up their children within one hour of being called. If the Center is unable to reach the parent or the parent does not arrive the Teacher will then call the next person on the parents emergency contact list.

8. The Center reserves the right to request either in writing or orally a statement certifying the fitness of a child to attend the Center by the child's Physician. Upon a clean bill of health the child may be admitted back into the Center.

MEDICATIONS

Oral Medications

- Parents must complete an Authorization for Medication form before prescription medication can be dispensed at school.

- Prescription medications must be handed to the classroom Teacher by the parent upon arrival. Prescriptions must be in a current prescription container that is child safe. The prescription container must reflect the following information:
  - Child's name
  - Physician's name
  - Name of medication
  - Dosage instructions
  - Length of course
  - Possible side effects

- Children who are on medication must bring their medication to the center daily until their prescription is completed. The center reserves the right to refuse a child's attendance if they arrive without their medication.

- Over the counter oral medications (Tylenol, Cold medicine) will only be administered if your child's pediatrician has filled out an Authorization for Medication form. There should be a separate form for each medication, which is valid for one year. Each form should be legible and thoroughly completed, taking care that the medication name and dosage measurements match the authorization form (i.e. ml's verses cc's). The form should also be very clear as to when the medication should be given. Parents are responsible for supplying their child’s medication and making sure they update their child’s dosage over the course of the year.

- The Program will not administer the first dose except under extraordinary circumstances and only with parental permission.

- Parents will be contacted before any non-prescription oral medication is administered. If the Teacher is unable to reach the parent, they will administer the medication and note the inability to reach the parent.
• **NEVER SEND MEDICATION TO SCHOOL UNSUPERVISED IN A LUNCH CONTAINER, OR MIX MEDICATIONS IN DRINKS OR FOOD.**

• The person administering the medication will be a Teacher certified staff member and familiar to the child. They will always: (1) verify that the right child receives the (2) right medication (3) in the right dose (4) at the right time (5) by the right method with documentation of each time the medication is given. Each person who administers medication is trained in the administration of medication before being authorized to do so by the director.

• The staff member who administered the medication signs documentation of items (1) through (5). Once the medication form is finished, it is put in the child’s file.

• When possible, all unused, discontinued, or outdated medications will be returned to the parent and return shall be documented in the child’s record.

**Topical Medications/Ointments**

• Parents must fill out a *Topical Permission Form* in order for us to apply items such as sunscreen, lip balm, Calamine lotion, Cortisone etc…

• In the summer, parents are asked to apply the first application of sunscreen before sending their child to school, so that it is effective.

• The program will only apply insect repellant on children based on the recommendations from the Health Department.

• Parents are responsible for sending their child with their own supplies, which should be clearly labeled in permanent marker with the child’s name. Expired products will not be used on your child and will be disposed of.

**ALLERGIES**

Please inform the school of any allergies your child may have to foods, insects, animals or medications. We can best help your child avoid reactions if we are aware of any problems. Any allergies your child may have should be documented on your child’s annual physical form by their pediatrician.

**NOTIFYING PARENTS**

All parents whose children have been exposed to a child with an infectious illness will be informed by the Teacher, via email, or by a notice posted on the classroom doors.

**MINIMIZING THE SPREAD OF DISEASE**

Children are required to have an annual physical examination from their pediatrician. This exam must include lead screening and immunization records.

All staff members are required to have on file a physical examination including immunization records. Examinations are to be up dated every two years.
SURFACES AND OTHER ITEMS

Before and after snacks and meals, the tables are to be washed with soap and water and then the bleach and water solution (or equivalent). The chairs are to be washed once a week.

HAND WASHING PROCEDURES ARE POSTED AT EACH SINK.

CARE OF SICK CHILDREN

Parents are notified and while the child waits to be picked up, he/she can rest in a quiet area or in the Director's office with the director or other staff person. A parent needs to pick up their child within one hour of being called.

The Center reserves the right to request either in writing or orally a statement certifying the fitness of a child to attend the Center by the child's Physician. Upon a clean bill of health the child may be admitted back into the Center.

REPORTING SUSPECTED CHILD ABUSE OR NEGLECT

Staff members are required to report suspected child abuse to the Director or Asst. Director in charge at the time. The Director and staff member will meet, and if it is agreed that abuse or neglect is suspected, then the parent is asked to attend a conference. If it seems to be more than just a possibility and does not need clarification from the parent, then Social Services should be contacted immediately. There should be no time delay in reporting the 51A. All meetings between the child, staff and parent shall be documented, noting the date, subject and outcome of the meeting. All information shall be held in strict confidence with those persons involved.

OBSERVATIONS AND RECOGNITION OF CHILD ABUSE

"Child Abuse" is the non-accidental commission of any act by a caretaker, which causes or creates a substantial risk of harm to a child's physical and emotional well being, including sexual abuse.

"Child Neglect" is the failure by a caretaker, either deliberately or through negligence, to take those actions necessary to provide a child with minimally adequate food, safety, clothing, shelter, medical care, supervision, or other essential care.

Signs of abuse or neglect can be seen most easily by physical symptoms: bruises, sores, broken bones. However, violent or severely repressed behavior, crying or withdrawal, and fearful body language in the presence of the abuser are all signs of problems. Malnutrition, nervousness, nail biting, inappropriate language, touching of one owns genitals or those of other children, lack of communication, anxiety, wetting or dirtying clothing beyond the child's normal behavior are all signs that the child may be in an abnormal situation and unable to control it. A clear sign of abuse is violent behavior or language by the parent or other adult in charge of the child. The Lead Teacher and the Director must investigate.
If DSS is contacted, a 51A report will be required. The officials in the DSS office will guide the reporter through the requirements of the State for filing the report. A copy of this report will be placed in the child's file.

**Procedures for Staff**

Whoever has reasonable cause to believe that a staff member may have been abusive or neglectful toward a child shall immediately notify his or her supervisor and the Director.

The Director and the VP for Academic Affairs will assess the situation and report the suspected or alleged incident to the Department of Social Services and the Department of Early Education and Care as needed.

The suspected or alleged employee shall immediately be removed from working directly with children and may be suspended with or without pay until a DSS investigation has been completed.

Any form of blatant abuse or neglect towards a child will not be tolerated and will result in immediate dismissal from employment.

**TOXIC SUBSTANCES**

All cleaning materials and any other toxic substances are stored on high shelves out of reach of children in either the kitchen or the bathroom.

Medications are stored in the medication box located in the kitchen or the refrigerator. All other hazardous items are stored in the basement and used only by the staff and housekeeping people. The Director is responsible for checking that the door is locked.

If it is suspected that a child has ingested a poisonous substance the Teacher will contact Poison Control at 1-800-682-9211 immediately and give them as much information as possible: Child’s age, weight, substance ingested or exposed to, amount of substance received, length of time since the exposure. The Teacher will then follow Poison Controls instructions. While this is occurring the other Teachers in the room will contact the parent and the Director or Asst. Director to inform them of the situation.

All items brought into the classroom must be checked for potential poisonous substances. This includes plants, art supplies, and personal items. A list of poisonous substances and plants may be found in the Directors office in the *Health in Child Care Book*. All personal medications, lotions (sunscreens, hand lotions…), etc. are to be kept in a secure area out of the reach of all children.
CONTROL OF INFECTION

Staff and Children must wash their hands with liquid soap (provided in the soap dispensers) and running water-using friction (rubbing of hands). The towel dispensers at each sink location provide ample towels so that there should not be sharing of towels. Hand washing should take place at the following times:

1. On Arrival for the day
2. Before and after eating or handling food
3. After toileting or changing
4. After coming into contact with body fluids and discharges
5. After handling Center animals or their equipment (if applicable)
6. After cleaning
7. Before and after using the water table
8. Before and after administering medication

The following equipment must be washed with soap and water and then the bleach solution using the following schedule:

1. after each use:
   a. Tables, countertops and/or food preparation area.
   a. Mops used for cleaning bodily fluids
   b. Thermometers

2. at least daily:
   a. Toilets and toilet seats
   b. Sinks and sink faucets
   c. Water table and water play equipment
   d. Play tables
   e. Smooth surfaced non-porous floors
   f. Mops used for cleaning
   g. Washcloths and towels
   h. Door and cabinet handles

3. at least weekly or more frequently as needed to maintain cleanliness, when wet or soiled, and before use by another child:
   a. Resting mats or other approved sleeping equipment
   b. Dress up clothes

The disinfectant solution shall be a school-made solution of an appropriate mixture of bleach and water, or similar commercial product. Bleach and water solution is to be made up daily and stored in a capped container which is clearly labeled and which is kept out of the reach of children.

MONITORING OF WASHING

This shall be done on a regular basis by the Director and Lead Teachers at unannounced times. New staff will be given instruction about procedures as they are hired, and the Director will be responsible for making sure all staff receives this instruction.