



PARENT HANDBOOK

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PHILOSOPHY

Battle Creek Christian Early Learning Center

- Is designed to meet the developmental needs of infants, toddlers, young children and school age children.
- Provides a safe, healthy, Christian environment
- Provides experiences that enrich and enhance each child's cognitive, language, social, emotional, physical, creative and spiritual development.
- Uses Christian principles to guide our daily activities.
- Staff serve as positive role models and provide care that is supportive, warm, nurturing and responsive to each child's individual needs.
- Respects families as the primary and most important providers of care and nurturing. We believe parents and caregivers are partners in children's care and education.

PROGRAMS

Infant/Toddler: For children ages birth through 2 years. This program offers a loving and caring atmosphere. They will be provided with an environment that will promote physical, mental, social, and emotional growth.

Preschool: For children ages 3-5. Full day and part day available; Great Start Readiness Program (GSRP). Choose from year round program or September-May. All preschool programs include bible lessons, literacy, early math and science, social and cognitive experiences. High Scope Curriculum is implemented.

Before and After School: Offers supervised care for children kindergarten through 12 years old with games, crafts, homework help and free choice play. Busing is available to and from Pennfield Schools.

Summer School-Age Program: Designed for children kindergarten to 12 years old. Each week includes a fun theme, Bible time, sports, and field trips.

PERSONNEL

Battle Creek Christian Early Learning Center is a ministry of Calvary Baptist Church under the direction of the BCCELC board. The center has the following qualified staff: a director, lead teachers, assistant teachers and kitchen personnel to fulfill the general responsibilities of program planning and implementation, building and maintaining effective relationships with children and families, continuing personal and professional education, as well as, other criteria sited through licensing. All staff members are trained in first aide and CPR. All employees are required to have comprehensive background checks completed by the FBI.

VOLUNTEERS

We welcome and encourage anyone who wishes to volunteer in our program. Volunteers must provide the center with documentation from the Department of Human Services that he or she has not been named in a central registry case as the perpetrator of child abuse or child neglect before having unsupervised contact with a child in care.

Volunteers will work under the supervision of a staff member at all times.

CONFIDENTIALITY

Child health/medical records, income eligibility and other identifying information is kept confidential. Please be assured that information you share with the teacher will be kept in the strictest confidence. Occasionally, information such as allergies, IEP goals, behavior plans, demographics, etc. may need to be shared with individuals working with the child.

ADMISSION

Enrollment is open to any child from birth through twelve years of age as space allows. Equal treatment and service will be available to each child with out regard to race, gender, national origin or religion. We reserve the right to give priority to current BCCELC families first.

The following items need to be turned in before your child attends the center:

- Completed Child Information Record
- Health Appraisal Form with up-to-date immunizations (infants, toddlers and preschool only)
- Signed statement of good health and up-to-date immunizations (school age only)
- Signed consent form for visiting surrounding area (walking paths and parks)
- Infant food sign-off (if applicable)
- Photograph release
- Signed contract
- Registration Form with \$50.00 non-refundable registration fee
- Deposit equal to one week's tuition (applied to last week of tuition or forfeited if you choose not to begin care).
- GSRP must complete Birth to Five Services application, birth certificate, income verification and be accepted into program.

HEALTH RECORD & IMMUNIZATIONS

A physical, signed by a licensed physician, is required within 30 days of initial attendance for infants/toddlers and preschoolers. For infants/toddlers it must be performed within the preceding 3 months and updated yearly. For preschoolers it may be based on a checkup dating back twelve months and must be updated every two years.

Upon initial attendance and annually thereafter (more frequent with infants) a copy of up-to-date immunizations is required as specified by the Department of Community Health.

Upon enrollment and annually thereafter, school age children, need a signed statement that they are in good health, with activity restrictions noted, and that their immunizations are up-to-date and on file with their respective school.

Required Immunizations for Michigan Child Care/Preschool Attendance

This table represents the minimum required immunizations for child care centers.

	Birth-1 m.	2 mo.-3 mo.	4 mo.-5 mo.	6 mo.-15 mo.	16 mo.-18 mo.	19 mo.-4 yrs	5 yrs
Diphtheria, tetanus & pertussis (DTaP)	none	1 dose	2 doses	3 doses		4 doses	
Pneumococcal Conjugate	none	1 dose	2 doses	3 doses	4 doses OR age appropriate complete series	1 dose on or after 24 mo. OR age appropriate complete series	none
H. Influenzas type B (Hib)	none	1 dose	2 doses		1 dose on or after 15 mo. OR age appropriate complete series		none
Polio	none	1 dose	2 doses		2 doses	3 doses	
Measles, Mumps, Rubella	none				1 dose on or after 12 months		
Hepatitis B	none	1 dose	2 doses		2 doses	3 doses	
Varicella (Chicken pox)	none				1 dose on or after 12 months OR current lab immunity OR reliable history of disease		

- Measles, mumps, rubella, hepatitis B, varicella: current laboratory evidence is acceptable instead of immunization with that antigen.
- Hepatitis B may be administered as early as birth.

Recommended Immunizations

	Birth	1 mo.	2 mo.	3 mo.	4 mo.	6 mo.	12 mo.	15 mo.	19-23 mo.	2-3 yrs	4-6 yrs.
Rotavirus	None		1 dose	1 dose	1 dose						
Influenza	None					Yearly					
Hepatitis A	None						2 doses			Additional doses for high risk groups	
Menigococcal	None										For high risk groups

* All doses of vaccines must be given with appropriate spacing between doses and at appropriate ages to be considered valid.

SCHEDULE OF OPERATIONS

Battle Creek Christian Early Learning Center is open Monday through Friday from 6:30am-6:00pm.

We are open year round, with the exception of the following:

- New Years Day
- Good Friday
- Memorial Day
- Fourth of July
- Labor Day
- Thanksgiving and the Friday after
- Christmas Eve
- Christmas Day
- New Years Eve

No charges will be billed for school age & GSRP children who do not attend on winter and spring break (unless they are signed up to attend. Charges will apply for all other no school days, planned and unplanned.

We are open Christmas break and Spring Break. Children attending GSRP will not have class over Christmas break and spring break. A schedule will be available upon the start of the school year.

We reserve the right to close at other times but will give advance notice for unstated closures.

EMERGENCY CLOSINGS

The administration reserves the right to cancel preschool or close the center for administrative reasons, such as building repair or hazardous weather conditions. In such an event, parents will be notified in advance, whenever possible. Emergency closings due to weather will be announced on the center's Facebook page, mass text, WWMT Channel 3 and email, if possible. The center may have a 2 hour delay depending on the severity of the weather.

You will not be billed or billed at a prorated rate when the center closes for circumstances beyond our control (i.e. weather or building problems). If we do not open there will be no charges. If we are open for a total of 50% (5.75 hours) of our operating hours charges will remain as normal. Anything less than that will be billed at a prorated rate, to be determined.

TUITION

Registration Fee.....\$50.00 (non-refundable)

Annual Registration Fee..\$25.00 (billed Oct. 1)

Deposit.....Weekly tuition total (non-refundable; applied to last week's tuition).

Rates:	Infants 0-12 mo. (or until moved to toddler room)	Toddlers 1-2 yrs.	Preschool 3-5 yrs.	School Age 5-12 yrs. Breaks (Winter/ Spring/ Summer)	School Age School Year (No Breaks)
5 days	\$40.50	\$38	\$35	\$30	
4 days	\$42.50	\$40	\$37	\$32	
3 days	\$44.50	\$42	\$39	\$34	
2 days	\$46.50	\$44	\$41	\$36	
1 day	\$48	\$46	\$43	\$38	
5-1/2 days	N/A	N/A	\$19.50	\$19.50	
4-1/2 days	N/A	N/A	\$21.50	\$21.50	
3-1/2 days	N/A	N/A	\$23.50	\$23.50	
2-1/2 days	N/A	N/A	\$25.50	\$25.50	
1-1/2 day	N/A	N/A	\$27.50	\$27.50	
Before School			GSRP: \$8		\$8
After School			GSRP: \$10		\$10
Before & After (M-F)			GSRP: \$85/wk		\$85/wk
Full day					\$30
1/2 day					\$19.50

A family discount is available to those families who have 2 or more children enrolled full time (5 full days per week). The discount is as follows: 15% for second child and each child thereafter. The discount is taken off of the oldest child(ren).

Field trips may include additional fees. The prices vary and are charged to your account. Some fees are collected in advance.

DHS Childcare Assistance Accepted

- Parents are responsible for filing paper work
- Child cannot start attending until the following: Parent or guardian is responsible for bill until BCCELC starts receiving payments from DHS; Child is in DHS system under BCCELC; Parent obtains letter from case worker stating that they have been granted DHS child care assistance and that their child will be put into the system.
- Parents are responsible for paying all "fees" including registration, deposit, field trips and late pick-up fees. DHS pays up to \$65/annually.
- Parents are responsible for any remaining balance DHS does not cover.

PAYMENT

Statements are sent out weekly via email. The statement reflects the previous week's charges (and any past due amounts). Payment is expected by the end of each week. We do understand some families are paid bi-weekly, so we will accept bi-weekly payments with prearrangement (paying for the previous week and current week or in advance). We accept the following forms of payment:

- check (made payable to BCCELC)
- cash (put in envelope with your child's name)
- money order
- credit/debit card (may set up a reoccurring payment) **additional fee applies
- ACH (pulled directly from a savings or checking account)

A \$5 charge will be added to bills with nonpayment each week. Failure to pay bill could result in your child being removed from the center, account being sent to collections and/or small claims court.

DROPPING OFF AND PICKING UP YOUR CHILD

For the safety and security of our students, we ask that all parents come into the center and sign their child(ren) in and out each day. Children will be released only to the parent or authorized person(s) designated on the Child Information Record unless we are given advance notice of any changes. Identification may be requested before a child is released.

Children attending morning preschool only or GSRP should be dropped off no earlier than 7:50. Children are expected to be picked-up promptly after class (morning preschool at 11:00; GSRP at 3:20). Early drop-offs and late pick-ups are subject to charges.

IMPORTANT: The center closes at 6:00 PM (5:30 at Purdy location). A late fee of \$1.00 per minute will be charged for leaving your child past 6:00 PM. This fee will be added to your bill.

BUILDING SECURITY

The building will be locked at all times during operation. Families will be issued one key fob with registration that will be used to gain access to the building through the front doors during hours of operation. Additional key fobs may be purchased for \$10 each. There is a doorbell at the main entrance for those needing to gain access to the building and do not have a key fob. We understand that this may be inconvenient and we ask for your patience and understanding as we continue with our intent to prioritize your child's safety and well being.

Purdy location: Please use the doorbell when dropping and picking up your child.

ABSENCES/VACATIONS

If at any time a child is going to be absent, the center should be notified in advance or as soon as possible. Fees and tuition are figured on a flat rate basis, and are not adjusted due to absences (i.e.; sickness or no show). Rate policy for absence due to long-term illness will be reviewed on a per case basis.

VACATIONS

All non-school age children will be eligible for vacation days throughout the calendar year (January-December). We offer two weeks (10 days) to children who are enrolled Monday through Friday. The amount of days will be prorated for children who attend a lesser amount of days per week. For example, if your child attends three days per week then they will be eligible for a total of 6 days for the year. The days may be taken all at once or broken up into lesser increments.

School age children enrolled for the school year will not be eligible for vacation time, however, they will be not be billed for winter and spring break, if they are not attending and not signed up. School age children enrolled for the summer will not be eligible for vacation time, however, we will have a registration form where you will only be signing up for the days/weeks you need in advance. A deadline will be announced each year. You may add days/weeks if space allows, however, cancellations will still result in regular charges.

WITHDRAWALS

VOLUNTARY

A written two week notice is to be given when withdrawing from the center. Your bill must be paid in full on your last day to avoid late fees. The registration fee is charged each time a child's enrollment is terminated and then reinstated.

INVOLUNTARY

The center may terminate at will.

We reserve the right to dismiss a child from our center:

- When staff and program cannot meet a child's developmental needs
- When the behavior of a child is extremely disruptive or harmful to others
- When physicals and immunizations are not current
- When a child has not been in attendance 30 days or more
- When parents are behind in their payments

Every effort will be made to help both parents and children to remain in the center.

When being dismissed payment must be made within one week to avoid late fees.

ILLNESS

In our attempt to keep our children in a healthy childcare and preschool environment please adhere to the following illness policies. If all families follow these guidelines, we will be better able to keep all the children and staff healthier, and should reduce contagious illnesses.

GUIDELINES FOR EXCLUDING SICK CHILDREN

- A temperature of 101 degrees or higher (100 if taken under the arm)
- Diarrhea (after two times of diarrhea within a two hour period)
- Vomiting (after one time of vomiting)
- A rash of unknown causes
- Eye discharge with the white of the eye pink or red in color
- Head Lice

WHEN CAN A CHILD RETURN

Usually a child can return to group care when:

- The child's temperature has returned to normal for 24 hours without medication to reduce the fever.
- The child has been diagnosed as having a bacterial infection and has been on medication for 24 hours.
- It has been 12 hours since the last episode of diarrhea.
- It has been 24 hours since the last episode of vomiting.
- The nasal discharge is not thick, yellow or green.
- Eyes are no longer discharging, or the condition has been treated with an antibiotic for 24 hours or one full day's dose of drops.
- The rash subsides or the physician has determined the rash is not contagious. For some rashes and viruses you can cover them completely and your child may be able to return. Please consult with the director for this exception. A doctor's note is required to be able to return to the center.
- Hair is completely nit and bug free. Your child's hair will be checked their first day back before being allowed to stay at the center.

If your child becomes ill while at BCCELC, you will be notified to pick your child up. Parents will be notified as soon as possible either by phone or a message through Brightwheel and/or KidReports app. We strongly suggest that you have an alternate plan to cover these situations. Please notify us if your child contracts something contagious so that we may notify other parents that the illness is present. We must also report communicable diseases to the health department each week.

MEDICATION

If your child requires medication while at the center, the following criteria must be met:

- The parent must supply any medication the child receives.
- Parent's must complete and sign the Medication Administration Form.
- Prescription medication must be in the original container with a pharmacy label that contains the child's name, dosage amount and administration times.
- Non-prescription medication must be in original container labeled with child's name. The medication will not be administered after the expiration date on the bottle. Non-prescription medication shall be administered in accordance with the product label directions on the container. Medication that states "consult your doctor" needs to have a note from the doctor stating the dosage before medication can be administered.
- Because medications poses an extra burden on staff and having medication in the facility is a safety hazard, parents/guardians should check with the child's health care provider to see if a dose schedule can be arranged that does not involve the hours the child is in care by this center. You may want to suggest to the pharmacist to divide medications into two bottles, one for home and one for the center.
- Parents/guardians may come to administer medication to their own child during the day.
- If liquid oral medication is to be administered at the center, the parent/guardian must provide the administration device with clearly marked measurements.
- All medication containers and dispensers will be stored out of reach of children.
- When no longer needed by the child or expired, all medications should be returned to the child's parent/guardian or disposed of after an attempt to reach parent/guardian.
- The instructions from the child's parent/guardian shall not conflict with the label directions as prescribed by the child's health care provider or product label directions on the container.
- Staff will keep a records of time and date medication is given or applied and by whom.

Medication permission forms are three different colors.

- Red is for emergency only meds, i.e. EPI pen. Those medication forms are good for one year.
- Orange is for all topical medication, i.e. diaper cream. Those medication forms are good for up to one year.
- Light blue are for all other oral medication, i.e. Tylenol, Advil, Motrin. Those medication forms are good for only 14 days. You will need to fill a new one out every two weeks if the medication is an ongoing medication.

PARENT INVOLVEMENT

Parents are welcome visitors at all times and should be encouraged to participate with their child's activities. When parents are in the room as a helper, it is the teacher's responsibility to direct the parent's work. Parents and volunteers are never to be left alone with a group of children or any child who is not their own. All volunteers must adhere to our screening policy, if applicable.

PARENT COMMUNICATION

Parents are always encouraged to express questions or concerns to their child's teacher or the director. Each room has its own email. Should you have an Apple phone or tablet you may text the room as well (using the email addresses below). The following is a list of email addresses:

frogroom@bcchristian.org
turtleroom@bcchristian.org
bumblebeeroom@bcchristian.org
monkeyroom@bcchristian.org
owlroom@bcchristian.org
koalaroom@bcchristian.org
pandaroom@bcchristian.org
bearroom@bcchristian.org
cheetahroom@bcchristian.org
girafferoom@bcchristian.org
tigerroom@bcchristian.org
zebraroom@bcchristian.org

Information from both the teacher and director to you as the parent will take place in the following manner:

- Newsletters
- Classroom notices
- Parent bulletin board/white board
- Brightwheel or KidReports app (messages may be sent back and forth)
- Email
- Ongoing informal interaction with staff
- Conferences

Conferences for all age groups (with the exception of school age) are held twice a year, once in fall and once in the spring. You are welcome to contact your child's teacher to schedule conferences as needed. We welcome your feedback and input at anytime, and encourage you to inform us of suggestions, concerns or questions.

GRIEVANCE PROCEDURE

- 1 The family talks directly with the person involved in an effort to resolve the issue informally.
- 2 If the complaint has not been resolved, the family may contact the Director to assist in resolving the grievance.
- 3 If you are still dissatisfied, you may file a written complaint to Battle Creek Christian Early Learning Center Board.
- 4 Appropriate administrative action will be taken with all valid complaints. The board will render a a decision in a timely manner after receiving the appeal.

PARENT NOTIFICATION PLAN

Reason for contact:	Who will contact:	How they will contact:	When will they contact:
Field Trips	Caregiver; office personnel; program director	newsletter; message board in lobby; message board outside room; email; flyer	prior to the field trip; at enrollment (for summer program)
Illnesses	Caregiver	Message in Brightwheel and/or phone call	As soon as possible while continuing to care for child
Changes in child's health (crying or complaining for extended period; extremely clingy or tired, etc.)	Caregiver	Message in Brightwheel and/or phone call	When change in behavior is recognized
Behavioral incidents	Caregiver (preferably lead)	written report; phone call and/or face to face	At or before pick-up
Minor Injuries (small bumps, scraps, or cuts with minimal bleeding)	Caregiver	Written report and/or added to Brightwheel / Kid Reports app	Parent will receive written report at pick-up. If incident is added to app parent will receive as soon as it is entered.
Less serious injuries (may or may not require medical attention)	Caregiver or office personnel	Phone call	As soon as possible while continuing to care for injured child
Serious injuries (requiring immediate medical attention)	Program director or office personnel	Phone call	Immediately after 911 is called
Head Injuries	Caregiver	Phone call	As soon as possible while continuing to monitor and/or care for injured child
Lost/unsupervised child	Program director	Phone call or face to face (unsupervised incident)	If lost-immediately If unsupervised-after director gets details surrounding the incident (by end of day-before or at pick-up)
Inappropriate physical discipline	Program director	Phone call	Immediately after situation is under control (adult separated from child) and details obtained (what lead to discipline)
Inappropriate contact child/child	Program director	Phone call	Immediately after situation is under control (children separated and details obtained by children and staff)
Inappropriate contact child/adult	Program director	Phone call	Immediately after situation is under control (adult separated from all children) and police called
Emergencies and closings	Program director (may enlist help of office personnel and classroom staff)	Mass email & text, if available; Facebook message; WWMT Channel 3 Brightwheel/Kid Report Message	As soon as children and staff relocate to designated meeting site or relocation site OR if closing is decided

PARENT NOTIFICATION OF THE LICENSING NOTEBOOK

All centers must maintain a licensing notebook which includes all licensing inspection reports, special investigation reports and all related corrective action plans (CAP). The notebook must include all reports issued and CAPs developed on and after May 27, 2010 until the license is closed.

- This center maintains a licensing notebook of all licensing inspection reports, special investigation reports and all related corrective action plans.
- The notebook will be available to parents for review during regular business hours.
- Licensing inspection and special investigation reports from at least the past two years are available on the Bureau of Children and Adult Licensing website at www.michigan.gov/michildcare.

PEST MANAGEMENT NOTIFICATION

As required by Licensing Rule R400.5940 Battle Creek Christian Early Learning Center will notify parents annually of the following pest management:

- Notification will be provided to parents or guardians informing them that they will receive advance notice of pesticide applications.
- Advance notice (minimum 48 hours) will be provided by posting a notice at both entrances and through center's newsletter and/or email.
- An advance notice shall contain information about the pesticide, including the target pest or purpose, approximate location, date of the application, contact information at the center and a toll-free number for a national pesticide information center recognized by the Michigan Department of Agriculture.
- Classrooms will be unoccupied by children for at least 4 hours or longer if required by the pesticide label, following the use of liquid spray or aerosol insecticide application.

Currently, there are no pesticides being used at BCCELC.

NUTRITION PLAN

We participate in the Michigan Child and Adult Care Food Program (CACFP), a federal program providing financial assistance and nutritional training and provide nutritious and balanced meals following the guidelines they have established. Families that receive food stamps, DHS assistance or financially qualify by the guidelines set up by the State of MI are asked to fill out an income eligibility statement so that the center can be reimbursed through the program. Information is given to each family at the time of enrollment and they are updated annually. If your circumstances change parents are required to inform the center.

We provide breakfast, a morning snack, lunch and an afternoon snack for children who are at the center during meal hours. Please see the daily schedule for times. Menus are planned in advanced, dated and posted on parent board. Any food brought into the center must have the child's name and date on the container or bag.

Children with special dietary needs must have a form filled out by the child's physician concerning food substitutions. The center will provide some substitutions, however, parents may be asked to bring in some alternatives.

The CACFP meal patterns ensure children have access to healthy, balanced meals throughout the day. The meal patterns are based on the Dietary Guidelines for Americans, scientific recommendations from the National Academy of Medicine, and stakeholder input.

Breakfast Meal Patterns

	Ages 1-2	Ages 3-5	Ages 6-12
Milk	1/3 cup	3/4 cup	1 cup
Vegetables, fruit, or both	1/4 cup	1/2 cup	1/2 cup
Grains	1/2 oz eq	1/2 oz eq	1/2 oz eq

* Meat and meat alternates may be used to substitute the entire grains component a maximum of three times per week.

Lunch Meal Pattern

	Ages 1-2	Ages 3-5	Ages 6-12
Milk	1/2 cup	3/4 cup	1 cup
Meat & meat alternatives	1 oz	1.5 oz	2 oz
Vegetables	1/8 cup	1/4 cup	1/2 cup
Fruits	1/8 cup	1/4 cup	1/2 cup
Grains	1/2 oz eq	1/2 oz eq	1/2 oz eq

Snack Meal Pattern

2 of the 5 components served	Ages 1-2	Ages 3-5	Ages 6-12
Milk	1/2 cup	1/2 cup	1 cup
Meat & meat alternatives	1/2 oz	1/2 oz	1 oz
Vegetables	1/2 cup	1/2 cup	3/4 cup
Fruits	1/2 cup	1/2 cup	3/4 cup
Grains	1/2 oz eq	1/2 oz eq	1 oz eq

Unflavored whole milk must be served to 1 year olds; unflavored low-fat or fat-free milk must be served to children 2 through 5 years old; and unflavored low-fat, flavored fat-free, or flavored fat-free milk must be served to children 6 years old and older. Non-dairy milk substitutes that are nutritionally equivalent to milk may be served in place of milk to children with medical or special dietary needs.

Please note:

- * Juice is 100% and limited to once per day.
- * At least one serving of grains per day must be whole grain-rich. We do not serve grain-based desserts.
- * Yogurt must contain no more than 23 grams of sugar per 6 ounces
- * Breakfast cereals must contain no more than 6 grams of sugar per dry ounce.

INFANT MEAL PATTERN

BREAKFAST AND LUNCH	
BIRTH THROUGH 5 MONTHS	6 THROUGH 11 MONTHS
4-6 fluid ounces breastmilk or formula	6-8 fluid ounces breastmilk or formula; AND 0-4 tablespoons infant cereal, meat, fish, poultry, whole egg, cooked dry beans, or cooked dry peas; OR 0-2 ounces of cheese; OR 0-4 ounces (volume) of cottage cheese; OR 0-4 ounces or 1/2 cup of yogurt; OR a combination of the above; AND 0-2 tablespoons vegetable or fruit or a combination of both
SNACK	
BIRTH THROUGH 5 MONTHS	6 THROUGH 11 MONTHS
4-6 fluid ounces breastmilk or formula	2-4 fluid ounces breastmilk or formula; AND 0-1/2 slice of bread; OR 0-2 crackers, OR 0-4 tablespoons infant cereal or ready-to-eat breakfast cereal; AND 0-2 tablespoons vegetable or fruit or a combination of both
<p>* Breastmilk or formula, or portions of both, must be served; however, it is recommended that breastmilk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breastmilk per feeding, a serving of less than the minimum amount of breastmilk may be offered, with additional breastmilk offered at a later time if the infant will consume more.</p> <p>* Infant formula and dry infant cereal must be iron-fortified.</p> <p>* A serving of these components are required when the infant is developmentally ready to accept it.</p> <p>* Fruit and vegetable juices must not be served.</p>	

CURRICULUM

Battle Creek Christian Early Learning Center uses the HighScope curriculum in all of our classrooms. HighScope is a curriculum that is based on 40 years of extensive research. HighScope has been adapted by many programs in the state of Michigan, as well as, across the country. The research has shown that children learn best when they are actively involved with people and things.

Central to HighScope curriculum is the Plan/Do/Review process (preschool). Through this process your child will make plans, carry them out and reflect on his/her actions. Plan/Do/Review helps children become better thinkers and decision makers. Our infant and toddler rooms have Choice time and will implement the Plan/Do/Review process as they get older. The daily routine in a HighScope classroom includes time for child initiated and adult guided activities. The routine is consistent so that children can feel secure.

The learning environment in a HighScope classroom is carefully planned to allow your child to make choices and to use interesting and stimulating materials. Defined interest areas provide a variety of learning experiences. The classroom is labeled: this helps your child connect the printed word to real materials.

Adult-Child interactions are very important in a HighScope program. Teachers and children share control: children will be in control of “child sized” decisions while teachers take care of adult responsibilities. Teachers use encouragement with children by making specific comments about their efforts and putting them in control of judging their own work. Teachers develop genuine, respectful relationships with children.

HighScope programs use a problem solving approach to social conflict. Your child will be taught how to negotiate, communicate and compromise. These skills will help them throughout their lives.

HighScope has a strong focus on developing and supporting early reading, writing, science and math. Group times are planned by the teacher to focus on these content areas. The HighScope Curriculum goals are called Key Developmental Indicators (KDIs). These KDIs cover all the important ways children learn.

For more information on HighScope, and how it can help your child develop to his/her fullest abilities please see www.highscope.org or talk to your classroom teacher.

ASSESSMENTS/SCREENINGS

All the children are screened within the first 30 days of enrollment and then again in the fall and the spring. We use the Ages & Stages Questionnaires, which helps track where a child is developmentally for their age and identifies any delays. The same questionnaire is given to parents to administer to their child as well. Any concerns regarding development will be discussed as soon as possible or at conferences. A referral to an outside agency, such as, Early On, may be made or other resources provided to the family.

All the children are assessed twice a year (fall and spring) using COR Advantage. A report is shared with parents at conferences. This gives shows us where each child has shown growth and where they may need additional focus. The assessment is aligned with state standards.

DAILY SCHEDULE FOR INFANTS & TODDLERS

Infants (birth to 12 months):

Battle Creek Christian Early Learning Center seeks to fulfill the physical, emotional, and intellectual needs of your child. The ratio of staff is 1 to 3 in order to allow for more interaction and consistent care giving. Our staff help your child experience the world through developing a new set of skills (sitting, crawling, standing, and walking) as well as expanding their language skills and independence. Each child will form a deep and lasting attachment to the people who care for him/her in a program that is structured to meet his/her needs.

*** Fine Motor Development**

Grasping, Turning, Tracking, Cause & Effect, Pounding, Throwing

*** Gross Motor Development**

Reaching, Pushing, Pulling, Crawling, Cruising, Rolling, Climbing

*** Language Development**

Face to face talking, Sound Mimicry, Listening, Looking

*** Sensory Activities**

Touching, Feely Books, Textures

*** Music Activities**

Moving to Rhythms, Listening to Music, Singing, Dancing

*** Outside Time**

Balls, Push/Pull Toys, Strollers, Infant Swings

Children will eat and sleep on a demand basis and as specified within each infant's daily plan. Diaper changes are as needed or at least every two hours. Daily records of your child's day will be provided to the parents throughout the day via the Brightwheel app, which may be accessed on your mobile device, tablet or desktop computer.

What you should supply for your child:

ALL ITEMS CLEARLY LABELED WITH FIRST AND LAST NAME

- 1 receiving type blanket-will not be left in crib with child per licensing
- 1 sleep sack
- weekly supply of diapers, wipes, creams (labeled plus a medication form for all creams and ointments)
- at least 5 changes of clothing
- daily supply of prepared formula or breast milk bottles with child's name and date the bottle was prepared
- daily supply of baby food (spoons and sippy cups provided)
- pacifier (with a fastener if possible)
- appropriate clothing for outdoor stroller rides in all seasons
- photo of family

Toddlers (12 months to 36 months):

Once a child has become more vocal and more mobile, the teacher's job becomes more active. Even though time is still set aside to hug and rock, most toddlers are ready to get up and go. Since toddlers learn through play and hands-on exploration of their space and materials, it is important that a quality toddler program focus on repetition and self help skills. Children will be able to refine their hand-eye coordination and motor development as their natural curiosity about their world emerges in a safe, independent, and age appropriate room. Communication is more than just words, and the careful observer will know how often to help and how often to sit back and clap when a new skill is mastered.

*** Fine Motor Development**

Puzzles, Table Toys, Small Blocks, Lacing

*** Gross Motor Development**

Climbing, Two-handed throwing, Balls, Balancing

*** Language Development**

Talking, Reading books, songs, finger plays

*** Art and Nature Activities**

Painting, coloring, collecting leaves, sand & water play

*** Music Activities**

Singing, Moving to Rhythms, Using Instruments, Dancing

*** Outside Time**

Balls, Trikes, Climbing, Running, Wagons, Swings

Diaper changes are as needed (at least every 2 hours). Breakfast, morning snack, lunch and after snack are provided. Some children under 18 months may still need to eat and sleep on demand. The ratio of this age group is 1:4, however, is run at 1:3 when possible.

What you should supply for your child:

ALL ITEMS CLEARLY LABELED WITH FIRST AND LAST NAME

- 1 blanket, 1 favorite stuffed animal
- weekly supply of diapers, wipes, creams (labeled plus medication form for all creams and ointments)
- toilet training supplies (please let staff know about progress at home so we can assist you and your child while at the center). Toilet Learning Procedure available in classroom.
- 5 changes of clothing (extra underwear for toilet training)
- pacifier (with fastener if possible)
- appropriate clothing for daily outside time in all seasons
- photo of family

Toddler Daily Schedule Sample

6:30-8:00	Arrivals; Free choice (clean up 7:45)
8:00-8:30	Hand washing followed by breakfast
8:30-9:00	Clean up; toilet use/diapers; prepare for outside
9:00-9:30	Outside/Gym
9:30-9:50	Hand washing followed by snack
9:50-10:05	Large Group Activity
10:05-10:30	Small Group Activity
10:30-11:00	Choice Time
11:00-11:15	Bible Lesson
11:15-11:30	Diapers/toilet use;Hand washing
11:30-12:00	Lunch <ul style="list-style-type: none">• Children may leave table when finished and clean-up, toilet use/ diapering, get ready for rest time• Listen soft music or recorded stories
12:00-2:30	Rest Time <ul style="list-style-type: none">• Non-nappers/early risers may do quiet teacher directed activities• Diapers/toilet use as they wake up
2:30-2:50	Hand washing followed by Snack
2:50-3:30	Outside/Gym
3:30-3:45	Diapers/toilet use
3:45-4:15	Small Group Activity
4:15-6:00	Choice Time; prepare for home; diapers/toilet use; teacher directed activity <ul style="list-style-type: none">• Teacher directed activities include: sensory activities; arts & crafts; early math; early science; early literacy• Toilet use/diapering will be done throughout the day at additional times as needed

*All times and events are approximate and flexible according to the children's needs.

TRANSITIONS

Our goal is to move children as they are developmentally and socially ready. The following is a basic guideline for moving children from one room to another. These guidelines are dependent on each child's individual development and the availability of space in the classroom. We group the following ages as follows:

- Infants (birth-approximately 12-15 mo.)
- Toddlers (12 mo.-2 years)
- Preschool (3-5 years; 1 yr from kindergarten start; 2 yrs from kindergarten start; 3 yrs from kindergarten start)

When promoting infants to toddler rooms we expect children at approximately the age of 12-15 months to be able to:

- walk unassisted
- hold a cup of milk/formula and try to use a spoon-No bottles during the day
- be on table food

As we see children are developmentally ready for these transitions, we will discuss these factors with each family and use the following schedule to ensure a smooth transition process for both you and your child.

Week #1

Monday Spend 2 hours in the morning in new room

Tuesday Spend 2 hours in the morning in new room

Wednesday Spend 2 hours in the afternoon in new room

Thursday Spend 2 hours in the morning in new room

Friday Spend 2 hours in the afternoon in new room

Week #2

Monday Spend morning and lunch in new room

Tuesday Drop off in new room, spend morning and lunch in new room, go in for nap with old room, spend the rest of day in old room

Wednesday Drop off in new room, spend morning, lunch and nap in new room

Thursday Spend lunch, nap, and afternoon in new room, pick-up in new room

Friday Drop off in new room; spend the whole day in new room, pick-up in new room

**This schedule may vary depending on child's schedule at the center.

PRESCHOOL

(GSRP families see GSRP CISD Family Handbook)

The morning schedule in an early learning center incorporates consistency with variety. Children function best in a predictable environment, yet they also need the challenge that change provides. The preschool classes follow a schedule that includes, but is not limited to:

- Work time with choices of activities
- group time (small and large)
- snack time
- outdoor play

The afternoon schedule (for children here all day) will include lunch and rest time as well as continuations of the above activities.

Work Time:

During the work time of the day, children choose the activities that are of interest to them. Centers such as blocks, dramatic play, books, music, science and discovery, and art activities, are available to the children and are located in appropriate locations throughout their rooms. During this time, the children are encouraged to move freely from one activity to another. The teacher uses this time to direct the art activity or cooking experience and relate on a one-to-one basis with the children. As the teacher observes and records individual children during play she/he may suggest ideas to stretch creative play.

Small and Large Group Times:

Group time is a shared experience. The children learn to interact with one another and wait their turn to talk. They begin to value the ideas and contributions of their friends as well as learn from the stories, poems, games, and other activities planned by the teacher. The length of group time depends on the age of the children and their maturity. Young children have a short attention span. As they get older this increases. Each child will have a different level of interest and the teacher will have to plan activities, stories, finger plays, and other activities to provide variety and interest. A theme for group time may be followed, with flexibility to include the interest of the children on a particular morning. For instance, if the theme for the week centers around shapes and a child brings in a moth and empty cocoon, the alert teacher will gather the resources about cocoons and moths and plan the morning session to include this magnificent discovery. Planning is very important, but equally important is being sensitive to the children and adapting to their needs and interests.

Outside Play:

An important part of the morning includes outside play. Unless it is very cold or raining, a considerable block of outside play is healthy and desirable. Running, climbing, peddling, and throwing and catching balls help to develop large muscles and coordination skills that are essential to healthy growth and development. Appropriate shoes need to be worn at all times when playing outside, tennis shoes or sneakers are best. Appropriate clothing for the different seasons is needed and will be provided in a parent newsletter each season. Children will go to the gym if the weather prohibits outside play.

Lunch and Rest Time:

For children who are in our all day program, lunch and rest time are essential components of the day. Our lunchtime is unhurried and well supervised. Children will learn valuable self-help skills as well as simple table manners. After a good lunch, children prepare for a quiet time of relaxation on their own cot, with blanket, pillow, and perhaps a stuffed animal from home. The room is quiet and calm with a feeling of security and love. The busyness and hurry give way to quiet and calm and much-needed rest. In order for children to fall asleep they need to feel secure and safe. This may take several days for a new child. Trust of the teacher and the new environment must be built.

Children should be allowed to wake up unhurried. They may need assistance putting on and tying shoes. Snacks may be set up for the children to help themselves. Choosing activities after the snack will be at the child's own pace. If group activities are planned, they may be engaged in after everyone is ready. Rush and hurry are inappropriate. Children always need time for transitions, especially after a nap.

Late Afternoon:

The afternoon schedule will include outside play, if weather permits. Children need plenty of time to run and play. Other activities may include stories, a continuation of morning projects, child-selected activities from the centers set up, and special table or floor toys.

Field Trips:

Safety is always our first priority and we follow all licensing requirements. Several field trips are planned throughout the year as a regular part of the of the classroom curriculum. Each trip will be posted on the monthly calendar and a note about the activity will be posted and sent home several school days in advance of the activity. Parents are encouraged to join us on these trips. The costs of field trips vary and are in addition to your child's tuition.

Rest Room Policy:

Children are allowed to use the restroom throughout the day. Of course there are emergencies when a child cannot wait (illness, etc...) We do not wish to cause any child to wet his/her pants and certainly do not want them to remain in wet clothes should they have an accident. (However, we do wish to discourage them from getting up and down during rest time for the purpose of delaying nap.) In the event a child does have an accident, we will attempt to change his/her clothing. If the child does not have a change of clothing here, we will try to use some of the center's clothing, and the parent will be notified.

Our clothing supply is quite limited. Please help us by doing the following:

1. keep one or two changes of clothes in your child's cubby.
2. if your child goes home in clothes from BCCELC, please wash and return ASAP.
3. if you have extra clothing that your child has outgrown, please consider donating it to BCCELC.

Preschool Daily Schedule Sample

6:30-8:00	(Breakfast 7:30-8) Arrivals; Sign-in; Free Choice; Breakfast
8:00-8:30	Message Board/Bible
8:30-9:45	Plan-Do-Review (clean-up at 9:30)
9:45-10:00	Snack
10:00-10:15	Large Group
10:15-10:45	Small Group
10:45-11:30	Outside play (Gym on bad weather days)
11:30-12:15	Lunch • Children may leave table when finished and clean-up; go to bathroom; get ready for rest time; read books
12:15-2:15	Rest Time • Non-nappers/early risers may do quiet teacher directed activities
2:15-2:30	Snack
2:30-3:30	Plan-Do-Review (clean-up at 3:20)
3:30-4:45	Outside Play (Gym on bad weather)
4:45-6	Prepare for home; Free choice

*All times and events are approximate and flexible according to the children's needs.

SCHOOL-AGE
(Kindergarten-12 years)

What to expect in the classroom:

1. A variety of learning materials including books, toys, blocks, games, manipulatives, art and writing supplies.
2. Children moving freely from area to area with frequent shifts of activity.
3. Children participating in individual, small group, and whole group learning experiences.
4. Children partaking in numerous hands-on activities involving the five senses.
5. Some messy activities.
6. Children talking together, sometimes all at once, sometimes interrupting.
7. Children occasionally expressing strong emotions.
8. A predictable environment in which routines and expectations are defined.
9. Children are encouraged to do as much for themselves and each other as possible with assistance given only when truly needed.
10. Children's work displayed and appreciated.

What not to expect:

1. Silent classrooms
2. Children sitting at desks or assigned seats for extended periods of time.
3. All children doing the same thing all the time.
4. Adults directing all of the choices all the time.
5. The teacher only using one instructional approach.
6. Children automatically knowing how to share, take turns, or wait.
7. All children exhibiting the same abilities, knowledge and skills at the same time.
8. Immediate compliance by children.

School Age (School Year) Daily Schedule Sample (BCCELC location)

- | | |
|-----------|--|
| 6:30-8:00 | Morning drop off before school <ul style="list-style-type: none">• Greetings• Breakfast is provided, however, they may bring breakfast from home• Children may wish to rest• Quiet activities (cards, board games, puzzles, reading, listening to music with headphones, tablets, game systems) |
| 4:00-4:30 | Arrival after school <ul style="list-style-type: none">• Put belongings in cubby• Wash hands and use bathroom if needed• Snack provided |
| 4:30-6:00 | Outdoor play, gym time, indoor room actives and parent pick-up |

*All times and events are approximate and flexible according to the children's needs.

School Age (School Year) Daily Schedule (Pennfield location)

- 7:00-8:15 Before School
- Children arrive and parents sign their child in.
 - Games/Arts and crafts/etc.
- 7:45 Dunlap and North Penn shuttle bus departs
- 8:15 Purdy students dismissed to class
- 3:40-4:10 After School
- Children arrive from elementary schools and staff sign them in.
 - Free play
- 4:15-4:35 Snack
- 4:35-5:30 Educational component, group activities, craft, cooperative play, etc.

***Summer program daily schedule posted in classroom upon start of program.

FIELD TRIPS

Safety is always our first priority and we follow all licensing requirements. During the school year, field trips are limited to the days that the children are not attending school. Field trips are an important part of our summer program and are scheduled as much as possible. Teachers and children are apart of field trip planning and we include both recreational and educational activities. The cost of field trips vary are in addition to your child's tuition. Field trips will be posted and information sent out as soon as possible.

SEPARATION POLICY

Fear of separation between parents and children is a normal feeling. Our policy is to make this transition to go as smoothly as possible. To do this;

- We will acknowledge child's anxiety
- We will try to engage child with activities that the other children are doing.
- We will comfort the child if he or she is crying or visibly upset.
- We will encourage a routine with the parent and child such as a hug and a kiss for the parent.
- Once child has settled down, we will contact you and let you know how your child is doing.

CHILDREN WITH SPECIAL NEEDS

Our program is committed to the principle of inclusion. Children with special needs have the same needs as all children...a place where they feel physically comfortable, loved and secure; opportunities to play and learn; people who care about them; and activities that allow them to be successful. Children with special needs often are not so different from typically-developing children. They may need more time to learn and practice certain skills. They may need more praise and encouragement to gain the skills typical for their age group. They may need specific adaptations to help them succeed at certain activities. Staff and parents collaborate to meet the individual needs of the child. Communication with families is ongoing and is responsive to the needs of families. Sometimes assistance from outside agencies is used and/or recommended (Early On, CISD early childhood specialists, community partners, etc.). Screening and assessment tools are used to help identify possible delays in development.

Benefits of Inclusive Child Care

Inclusive child care can be beneficial, both for the child with a special need and for the other children in the inclusion classroom. Some of the benefits of inclusive child care for children with special needs include:

- Chances to learn by observing and interacting with other children of similar ages.
- Time and support to build relationships with other children.
- Chances to practice social skills in real-world situations.
- Exposure to a wider variety of challenging activities.
- Opportunities to learn at their own pace in a supportive environment.
- Chances to build relationships with caring adults other than parents.

Typically developing children can also benefit from interacting with a child with a special need in their child care program. Benefits of inclusive child care for typically developing children include:

- Increased appreciation and acceptance of individual differences.
- Increased empathy for others.
- Preparation for adult life in an inclusive society.
- Opportunities to master activities by practicing and teaching others.

Providers/teachers make inclusion a positive experience for everyone by:

- Creating an environment, both physical and emotional, where *everyone* is invited to participate as much as they want to and everyone is treated with respect and kindness.
- Answering children's questions with simple, straightforward honesty and encouraging open dialogue about disabilities (and abilities) among children (and parents).
- Helping children feel comfortable with each other and develop friendships based on their shared interests.
- Facilitating interactions and play between children who are differently abled, especially if the child with special needs has difficulty communicating in a way that another child can understand.
- Creating a sense of community in the classroom, where every person is valued as a unique individual who has something to contribute and where everyone is responsible for caring for one other.
- Giving children the freedom to explore their ideas about disabilities through play and conversation, while guiding them to be aware and respectful of the feelings and perspective of the child with special needs.

The child's primary caregiver/teacher will be involved in the formal process of creating and implementing the plan required by federal law for any child with an identified disability: the Individualized Family Service Plan (IFSP) for children younger than three and the Individualized Education Plan (IEP) for children three and older.

CULTURAL COMPETENCY PLAN

We believe all children deserve an early childhood education that is responsive to their families, communities, and racial, ethnic, and cultural background. Culture influences every aspect of a child's development and is the framework in which children develop and is reflected in childrearing beliefs and practices. Battle Creek Christian Early Learning Center is committed to respecting each child's culture and diverse needs. This includes but is not limited to the religion, language, race, celebrations, socio-economic status, education level of family members, child-rearing practices and family structure in each home. Families must not be expected to sacrifice their own cultural identity, but rather take pride in themselves and their culture. We strive to reflect this through our policies, procedures and everyday operations as follows:

- Families are treated with respect and sensitivity from the first meeting.
- Actively involve parents and families in the early learning program.
- Each child and family will be supported in their cultural values and norms of the home.
- Incorporating the diverse cultures of our families, community, and the city we live in within the classroom.
- Staff will be recruited that are trained in the languages of our families or a plan put in place with the family to incorporate an understanding between center and home.
- All staff will have training opportunities annually to further their knowledge of enhancing their daily communications and curriculum planning.

HEALTH CARE PLAN

Available upon request is our health care plan. This includes our health practices and policies including procedures for: children and staff hand washing; handling children's bodily fluids; cleaning and sanitizing of all equipment, toys and other surfaces; and controlling infection, including universal precautions. We also have a binder of health-related resources located on the parent table. It includes the following: local pediatricians and health care facilities, child safety tips (safe sleep, car seat safety, etc.), immunization recommendations and more. Please see health record and immunizations section for info on those requirements.

TOILET LEARNING

We will work with each family to determine the readiness of their child for toilet training. Some of the main signs we are looking for are that your child is at least 18 months old and that they can stay dry for at least two hours at a time. There are a lot of different readiness signs but these will be the two main ones we look at when charting your child's toileting habits.

There are specific "potty times" in the classroom when all children will be asked to use the toilet. They will be changed if at any other time they are wet or soiled. We will only be asking them to use the potty 5 specific times of the day. This will allow the child to feel what it is like to need to use the potty. We understand that this may create more accidents but each child needs to know the feeling of needing to use the toilet, not that the teacher is trained to take the child to the potty. Frequent requests to use the potty will also create resistance from the child. The children want to play not use the toilet every hour. It will be more effective and we will have better cooperation with fewer requests to use the toilet instead of no cooperation and resistance from the child with frequent requests. These potty times will be: before breakfast (7:30), before lunch (11:00), before nap (12:00), after nap (2:30-3:00), and afternoon (5:00). Times may vary.

The children will have accidents. This may also be frustrating but can be developmentally normal. If we suspect that the child is wet or soiled we will request for the child to clean up themselves with the teachers help. We will try not asking if they are wet. Some children will feel ashamed and will not admit they are wet or soiled. Guilt and shame are not effective ways of helping young children learn new skills; you cannot shame a child to stop having accidents. If we all expect accidents, this will cut down on the frustration of parents and teachers when it does happen.

We would like to have real underwear with vinyl pants or pull up over the underwear (licensing requires that there be a waterproof outer covering that shall not be reused until thoroughly washed and sanitized) but if a family wants to use pull-ups we will support that as well. We just need to be consistent at home and at the center on what we use, real underwear or pull-ups. If your child arrives at the center in a pull-up we will continue to put them in a pull-up. If they come in real underwear we will continue to use the real underwear. If at any time your child asks to be put in real underwear we will do this for the child. This sign is a big step that your child wants to take control of their toileting. We will still honor requests for your child to have a pull-up on during nap. We assume that you are still using them at bedtime and that fits with consistency of when I go to sleep I always get a pull-up. If at any time after starting to use real underwear your child is resisting or it seems like it is just not working then we can offer back the diapers and pull-ups and forget about the toilet training for a while. We need to let your child know that it is their decision and timing.

Resistance or withholding can occur during toilet training. Any child over 3 years old, healthy, and not toilet trained after several months of trying can be assumed to be resistant to the process rather than not getting trained. Because of this you may want to have your child evaluated by your pediatrician to rule out any physical problems. Resistance to having a BM can also affect how well your child can hold their urine. The most common cause of resistance is that a child has been reminded or lectured too much. They are having a power struggle. At this point you put more responsibility on your child by giving them full control; real underwear or pull-ups, when they want to use the potty (no reminders), they clean themselves, and no punishment or criticizing for accidents.

Toilet Learning: Ready or Not?

Children must be both emotionally and physically ready for toilet learning. No two children (even siblings) who are treated exactly in the same way will be ready for toilet training at the same age. It is rare for a child to be successfully toilet trained before the age of 28 months.

Disadvantages of trying to train children too early:

- Training a child who isn't ready can be a waste of time and cause a lot of unresolved anger.
- A child forced to try toilet learning may experience a sense of failure and so many parents
- Creates a war of wills in which no one wins
- Stresses may cause parents to use inappropriate regimentation or force. One of the principle causes of child abuse is parental frustration over unsuccessful toilet learning
- A child's anxiety about toilet learning may sometimes lead to bed-wetting into adulthood.

If certain signs are clearly present and the child is past the "no-to-every-request" stage they are probably ready. A child's sphincter muscle must be developed before a child can master toilet learning.

Signs of readiness:

- Is aware of the “need to go” and shows facial expressions or by telling you
- Can understand and express one-word statements (wet, dry, potty, go, etc.)
- Wanting to imitate adults and be grown-up
- Can sit quietly for 4 minutes or more
- Dislikes wet or soiled diapers
- Is anxious to please you
- Able to stay dry for at least 2 hours or wakes up dry
- Able to pull elastic waist pants up and down
- Tells you that they are about to go

Preparing your child:

- Take child to bathroom with you
- Help child to recognize the sensations of being wet, wetting now, about to wet
- Change diapers in bathroom to associate the process with the place
- Teach the words you want your child to use for bathroom function
- Help children learn the meaning of before and after
- Get a potty chair and introduce it to the child. Let child sit on it fully clothed
- Begin reading potty books (Koko Bear’s New Potty by Vick Lansky)
- Let child practice lowering and raising training pants

Dress for Success:

- Clothing that is easy to pull off and on
- Avoid buttons, zippers, snaps, belts, overalls, onesies, and tights
- Use loose fitting underpants (without diapers children are more motivated to use the toilet on their own)
- Sensations of wet or cold are immediately obvious in underpants, which is not the case in disposable diapers and pull-ups
- Buy a sample of cotton training pants and wash first before child wears them. If they are tight around the legs, they will be difficult to raise and lower

Parents:

- Start good two-way communication before the process begins. Tell your child’s caregiver before you start the toilet learning process
- Use of the same language and attitudes at home and childcare makes adjusting from one environment to another less confusing for the child
- Bring extra clothing! Children will have accidents and shouldn’t be forced to wear a diaper by the end of the day
- Show an interest in your child’s experiences using the potty at the center
- Children who use the toilet appropriately at the center may not at home. This is not uncommon and usually temporary
- Be prepared to back off if your child doesn’t show interest within two to four weeks, or an agreed upon arrangement with your child’s primary caregiver. Sometimes your child is just not ready regardless of perceived readiness
- Nighttime control comes long after daytime control. Continue to use diapers or pull-ups, and a dry child in the morning should be praised
- Nighttime control can follow daytime control by several months or several years

Accidents Happen

Fully trained children will and often have toileting accidents. Occasional accidents are part of the toilet training process. Do not punish a child for having an accident.

Why accidents may happen:

- May be an indicator that your child is not quite ready
- Moments of great excitement or fear
- Absorbed in play
- Bad dreams
- Illness
- Stress of any kind
- Jealousy of an infant sibling
- Fear of the toilet

DISCIPLINE POLICY

It is our intent to view discipline as a positive learning experience. When discipline is used as a teaching opportunity there are no magic techniques that work for every problem or every child. Each child has the right to be free from corporal or unusual punishment, infliction of pain, humiliation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature. BCCELC does not allow any physical or emotional punishment. Our emphasis is on redirection and helping children develop positive methods of problem solving.

We enforce three main rules that keep BCCELC a safe place for all:

- 1 We will not let you hurt yourself.
- 2 We will not let you hurt anyone else.
- 3 We will not let you hurt our school.

We expect children to test the limits, that's how they learn. Children need permission and outlets for expressing feelings such as anger, sadness, frustration and depression. Our main goal is for the children to learn self-control and appropriate forms of self-expression. We use the following guidelines to facilitate this process and enforce our "three rules":

- Natural Consequences -- The children learn from the consequences of their behavior and choices. Understanding mistakes and accidents is a learning process. It may be appropriate to discuss what happened and why. Some situations require the adult to positively direct the child to a logical consequence. For example, wiping up spilled milk, or washing crayon marks off the table or wall. This approach helps children become more responsible for their own actions.
- Problem Solving -- Thinking of alternative solutions and the possible effects of such solutions. Through problem solving, children develop a sense of responsibility for their own actions, begin to understand others needs and strengthen their decision-making skills. Children need adult assistance to think of alternatives that will be mutually agreeable. We might ask, "How can you...? What could you do to...?" Children soon learn to generate their own solutions. Problems between two children can also be resolved by this technique, directing children to "use their words." Examples of dialogue can be demonstrated by adults... this is known as NEGOTIATION!

- Redirection -- Having an activity redirected or replaced by an acceptable substitute. When reasons are stated by an adult the child can soon learn to redirect themselves. When we redirect an activity we look at what the child is involved in doing and offer an acceptable alternative. If two children fighting over a scoop in the sand area, we may offer a cup or another scooper. A child climbing on a table would be directed to a climber instead. Another enticing activity may work equally well.
- Cool Off -- Cool off is not a punishment, a threat or humiliating to the child. It should not be in a predetermined chair or place. It should last as long as the child feels is needed to calm down. It should be a time for adult and child to talk about feelings—after the child has calmed down. In some situations a child will be so upset and so intense that he/she may need to be held and reassured that the adult is there to help them calm down. A screaming thrashing child may need to be soothed in this manner before discussing the behavior or incident. The child may need to calm down by him or herself.

We believe that when children are cuddled, talked to, given choices and made to feel important throughout the day, they are less likely to demand attention by negative behavior. As children become older we attempt to let them work through their disputes and problems on their own. When it appears that they need assistance, an adult will step in to help with problem solving or negotiating.

The learning environment is planned and scheduled to maximize appropriate behavior. Routines are designed to allow children a successful mix of choice and structure. The goal of discipline is to help children build their own self-control, not to have them behave through adult-imposed control. Modeling and recognizing acceptable behavior are the preferred methods of training.

Any discipline technique will be more effective if it is applied in a way that maintains or enhances the child's self-esteem. The technique must match the age and development of the child. No technique will be effective in every situation. We strive to recognize and encourage children's efforts, anticipating and eliminating potential problems.

The child must understand why she or he is being disciplined.

Idle or impossible threats encourage children to test rules and punish limits. Effective discipline requires follow through.

The road to independence and self-discipline takes time and patience!

In an event inappropriate discipline is used with a child by an employee or volunteer the parent will be notified by the director. The use of any physical discipline of a child by a staff member or volunteer will result in immediate dismissal.

BITING POLICY

Children sometimes bite other children. Although not all toddlers bite, biting is considered a normal stage in a child's development. Children may bite for a variety of reasons, rarely with the intent to hurt another child. The following are some reasons children bite:

Teething: Toddlers are often cutting teeth and it hurts. Chewing on something relieves the itch and stops the pain momentarily.

Sensory Exploration: Toddlers are very good at using all of their senses to learn about the world. The "oral mode", an important style of learning for infants, continues into toddlerhood. They bite everything, not just their friends.

Cause and Effect: Toddlers are eager explorers. They are constantly studying cause and effect. Biting produces a predictable response. Often, the response is dramatic; there is a lot of noise and attention from adults.

Self-Assertion: This is probably the most common reason toddlers bite. It is a way to express frustration when they do not yet have the language skills to do so.

Biting for Cause and Effect or Self-Assertion are behavior related bites.

The teachers take action to reduce the number of biting incidents by providing access to teething toys, providing numerous sensory exploration activities, providing opportunity to explore cause and effect and offering toddler's options and alternatives to reduce frustrations.

When a child is bitten, we avoid any immediate response that reinforces the biting, including negative attention. The bitten child is immediately comforted, and the area is washed and ice is applied. The teacher may cuddle and help the child calm down if they are crying. The biter is immediately removed with no show of emotion and told firmly "no biting, it is not okay to bite, biting hurts." The biter is redirected to another area of the classroom and attention is focused on the bitten child.

The bitten child and the biter are talked to on a level that they can understand. Once everyone is calm then everyone talks together about what happened and why. We work with each biting child on resolving conflict or frustration in an appropriate manner. The words are provided to the children to help them communicate if the same situation occurs again.

The teacher will fill out an "ouch report" for the bitten child and an incident report for the biter. The parents will not be told the name of the child involved in the incident due to the confidentiality law to protect the children. Each family is expected to work together with the teachers in hopes of preventing further incidents of biting. We recognize how upset parents may be when they learn their child has been bitten or has bit: however, we also recognize that biting is a normal part of toddler development but still not acceptable.

The teachers can provide resources such as articles, books, etc. to help parents at home. We will document observations of your child that will show a pattern of why they may be biting or the situation that causes the bite to happen. These observations will start as soon as the first bite or attempt happens no matter how old your child is at the time of the bite. We will also try to adapt the environment and work with parents to reduce any child stress that may cause biting.

We will work with each family to come up with a plan that works best with their child's individual needs. Below is a list of ways that we can work together in hopes of breaking your child of biting.

- Contacting outside resources to work with an individual outside our center to make observations of the biter and situations to determine the level of intervention that may or may not need to be taken.
- A 'shadow teacher' can be provided for your child at the family's expense to ensure your child is watched closely for biting and opportunities to prevent the biting.

Each incident will be dealt with on an individual basis as to what is best for all families and center.

ACCIDENTS & INJURIES

In the event that your child is seriously injured while at the center an ambulance will be called. The parent will be contacted via a phone call immediately thereafter.

For less serious injuries, the parents will be notified (phone call) and together with the director and/or lead teacher a decision will be made as to the best way to handle the situation. The parent may be asked to come to the center to examine the child firsthand before a decision is made. A parent will be notified via a phone call for all head injuries.

Minor injuries (small bumps, scraps or cuts with very little bleeding) will be treated by the staff and reported to the parents at the time of pick-up. Infant and toddlers will have an incident report noted in Brightwheel that parents will have immediate access to. The treatment may consist of washing the area, applying a band-aide and/or ice. A written injury report will be filled out and given to parents to sign at time of pick-up. Copies are available upon request.

ABUSE AND NEGLECT POLICY

If abuse or neglect of a child is suspected, staff are mandated to:

- make an oral report to Children's Protective Services
- file a written report within 72 hours of the oral report
- notify immediate supervisor

Excerpt from Child Protection Law (Act 238 of 1975):

Section 3-1a): A teacher or regulated child care provider who has reasonable cause to suspect child abuse or neglect shall make immediately, by telephone or otherwise, an oral report, or cause an oral report to be made, of the suspected child abuse or neglect to the department. Within 72 hours after making the oral report, the reporting person shall file a written report as required in this act. If the reporting person is a member of the staff of a hospital, agency or school, the reporting person shall notify the person in charge of that organization of his or her finding and that the report has been made, and shall make a copy of the written report available to the person in charge. Notifying a superior does not absolve the employee of their obligation to make the oral and written reports.

(Section 722.622) Definitions:

Child abuse means harm or threatened harm to a child's health or welfare that occurs through non-accidental physical or mental injury, sexual abuse, sexual exploitations, or maltreatment by a parent, a legal guardian, or any other person responsible for the child's health or welfare or by a teacher, aide or am member of the clergy.

Child neglect means harm or threatened harm to a child's health or welfare that occurs through either of the following:

-negligent treatment, including the failure to provide adequate food, clothing, shelter or medical care

-placing a child at an unreasonable risk to the child's health or welfare by failure of the paren, legal guardian, or other person responsible for the child's health or welfare to intervene to eliminate that risk when that person is able to do so and has, or should have, knowledge of the risk.

FIRE EMERGENCY

In the event of a fire, the children will be evacuated from the building using the nearest exit. They will be led to a safe area (behind Covenant Hope Church) away from the building, and staff will take attendance. If any child is unaccounted for, a search will be made to locate the missing child without putting the other children at risk. Parents will be notified (email, text, phone call, Facebook) of the fire and asked to pick-up their child immediately. A posting of the relocation site will be located at each entrance.

The building is equipped with fire alarms, smoke detectors, fire extinguishers, and with pull stations that are inspected regularly. The center practices fire drills so that in the event of an emergency everyone will be ready to act quickly and safely. All rooms have emergency plans posted near the exits to assist in successful evacuation.

TORNADO EMERGENCY

Tornado Watch: Upon learning of a tornado watch in the area, the weather conditions will be monitored until such time as the center is closed and all children have left with parents, or the weather watch is canceled.

Tornado Warning: Should weather conditions deteriorate and tornado warning is issued, children will proceed to a predetermined location in the building until such time as the tornado warning is canceled.

Should parents need to be notified they will be contacted by one or more of the following methods: email, text, phone call and Facebook posting. A posting of a relocation site will be posted at both entrances if applicable.

Tornado drills are practiced regularly with the children and staff.

RELOCATION PLAN

Some types of emergencies may require an evacuation of the facility and move children to an indoor relocation site. If a relocation is required the parents will be notified in the following ways:

- Mass email and text message
- Facebook page message
- Brightwheel and/or KidReports message
- Posting the relocation site address in a conspicuous location at the center that can be seen from the outside.

Our relocation site address for BCCELC is:

Covenant Hope Church
1021 Wagner Dr
Battle Creek, MI 49017
Located next door to the center.

Staff and children will walk to the relocation site, while infants will be placed in evacuation cribs and transported to relocation spot. Young toddlers may be placed in stroller to transport to relocation site.