Welcome

We are happy to welcome you to the HSU Children’s Center staff. I hope this year will be rewarding for you, and that you will have the opportunity to form relationships, learn new skills, and put your learning into practice.

This handbook is intended to provide you with valuable information about our program and answer questions that you may have throughout the year, from your first day of work through leaving the program. The following sections are included:

- Our Program
- Children’s Center Guiding Principles
- Information about Employment
- Staff Development
- Health & Safety Procedures, Mandated Reporter Responsibilities
- Emergency Procedures
- Important Phone Numbers

If you have any questions or concerns feel free to contact us at any time.

Susan Rosen
Our Program

This section includes:
✓ Our Story
✓ Licensing Information
✓ Children & Families Served
✓ Professional Staff
✓ Hours & Days of Operation

HSU Children’s Center Story

The HSU Children’s Center began in 1971 when a group of student parents, needing low-cost, convenient childcare to enable them to complete their degree programs, got together and formed a parent-run preschool program. Although there have been many program and funding changes over the years, the Children’s Center has maintained the same mission – to provide affordable high quality early care and education services to the HSU Community – students first, then staff, faculty and community families. The Children’s Center provides a broad range of comprehensive services to families to support and encourage their academic and family success.

Additionally, the Children’s Center is available to faculty and students of HSU to support classroom instruction through observation and direct participation with young children. Currently the Children’s Center supports service learning requirements in several Heritage Spanish language courses, observation requirements for Psychology classes, visits from Photography, and field placements for Child Development coursework. In addition, we host mentees from College of the Redwoods Early Education classes and we often have Arcata High School students working with us.

In February 2013 we acquired the former Arcata Children’s Center. The preschool at the 10th Street Center is the same size as our Exploration House and serves low-income families. That summer we invested in renovations and opened a new toddler classroom in Fall 2013. In the Spring of 2014, the 10th Street Preschool was accredited by the National Association for the Education of Young Children along-side the campus program.
Licensing Information

The Children’s Center facilities are licensed by the State of California, Department of Social Services, Community Care Licensing. Our toddler classrooms (lic#121305614) are licensed for a maximum of 27 children, 0-2 years old of which 15 can be 18-30 months old. Our preschool classrooms (lic#121305613) are licensed for a maximum of 58 children from 2-5 years old of which 6 can be 18 months – 2 years old. The license for the 10th Street Center (lic#125406385) for 24 preschoolers from 3-5 years old and 13 toddlers.

We typically serve at any one time:

- Infant classroom 8 Children (3 groups of 3)
- Middle toddler classroom 12 Children (3 groups of 4)
- Older toddler classroom 8-12 Children (2-3 groups of 4)
- Discovery room 20 Children (2 groups of 4, and 2 groups of 6)
- Exploration house 24 Children (3 groups of 8)
- 10th Street preschool 24 Children (3 groups of 8)
- 10th Street toddler classroom 8-12 Children (2-3 groups of 4)

In the entire program we serve approximately 112 children at any one time, usually 150 children each semester.

Children and Families Served

The Children’s Center welcomes children from families of HSU students, prioritizing low-income student families. We also serve children of staff and faculty when room is available. We maintain a waiting/eligibility list – low-income students are enrolled based upon need, full-cost students, staff and faculty are enrolled based upon the date they got on the waiting list.

The Children’s Center enrolls children in August who are at least three months old to four year olds who are not eligible for kindergarten. The program welcomes children with disabilities and makes all reasonable accommodations to meet the child’s individual needs.
Professional Staff

The Children's Center employs twenty professional staff. We are an HSU program, under Enrollment Management and Student Affairs Vice President Peg Blake. Stephen St. Onge, the Director of Housing and Residential Life, is the direct supervisor of the Children’s Center program.

- The Children’s Center Director is responsible for the total program including planning, implementation and supervision.
- The Assistant Director is the immediate supervisor of the classroom teachers and is responsible for oversight of all aspects of the children’s program, and staffing.
- The Office Manager is responsible for administrative, reporting, budgeting, and supporting the entire program and all program staff.
- The Food Program Coordinator coordinates the Children’s Center’s Food Service.
- The Supervising Teachers are responsible for the program, environment, and staffing meeting all requirements of Title 22, as well as classroom program planning implementation and evaluation; supervision and training of student staff.
- The Classroom Teachers are responsible for implementing a program consistent with the policies and procedures of the Children's Center including curriculum planning, staff supervision and training, working with children and families, assessments and portfolios, and working collaboratively with their teaching staff and the staff of the Children’s Center.
- CCAMPIS Teachers assist the classroom teachers with all aspects of the classroom program.
- Students comprise the bulk of our staff – from cooks to Associate Teachers. Student staff job descriptions are in the back of this handbook.

Hours and Days of Operation

We open each day at 7:30 AM and close at 5:30PM, Monday through Friday following the University Green & Gold calendar. During academic semesters we offer an after-care program at our campus Older Toddler classroom from 5:30-6:30PM for parents who need it. We are open during some breaks on a limited basis. The Children’s Center calendar is posted on our website, www.humboldt.edu/childrencenter.
Guiding Principles

This section includes:

- Ages Served, Days & Hours of Operation, Location
- Open Door Policy
- Equal Access, Non-Discrimination Policies, and State Mandated Policies

Ages Served

HSU Children’s Center serves families with children from 3 months old until they are legally eligible to enter kindergarten, as legislated by the State of California. We serve children in three licensed centers, an infant center and a preschool on campus and the 10th Street Preschool at 1695 10th Street.

HSU Children’s Center Toddler Center accepts children in August of each academic year who are between 3 months and 24 months of age. There is an infant room and a toddler classroom. Children entering the youngest classroom are generally between 3 and 12 months of age when they enter, with Middle Toddlers running from 12 to 24 months of age.

HSU Children’s Center Preschool includes our Older Toddler Classroom, the Discovery Room and the Exploration House. The Older Toddler Classroom serves the Younger Toddler children from the previous year and adds a few new two year olds in August for the academic year. The Discovery Room serves preschoolers as young as 2 ½ years old. It is a smaller classroom with supports for children who are still involved in toilet learning and other self-care skills. The Exploration House and our 10th Street Preschool are our largest classrooms and serve children three years of age until they leave for kindergarten.

Days & Hours of Operation

The Children’s Center operates Monday through Friday, 7:30AM to 5:30PM. We have extended care hours available on a limited basis at the center on campus. As part of the University community, we honor the Humboldt State University calendar for both academic semesters and the two summer Extended Education sessions. We are open for some breaks and closed for others. Please consult our calendar for 2015-16, available on our website. The 10th Street Preschool has a more continuous calendar and may be more suitable for students and staff who have traditional work schedules with less flexibility.
Location

HSU Children’s Center is located on Humboldt State University’s campus, adjacent to the 14th Street parking lot, between A and B streets, in Arcata, CA. The program is located in four buildings:

Building #94 Jensen House contains the administrative offices and kitchen. Our office is open from 7:30AM to 5PM each weekday.

Building #37 Baiocchi House is the home of the Infant and Middle Toddler classrooms.

Building #39 Toddler Annex houses the Older Toddler classroom.

Building #36 Mary Warren House is home to the Exploration House and the Discovery Room.

The 10th Street Preschool and Toddler Classrooms are located at 1695 10th Street in Arcata.

Open Door Policy

Families are always welcome in their children’s classrooms. We are legally required to release a child to their biological parent, and to give parents access to their child on site. The only circumstance under which we can keep a child from their parent is when a restraining order is in force and we have a copy. **We are required to check ID of any adult picking up who we do not know, and verify that they are on the child’s emergency card and designated to pick up the child.**

Equal Access, Non-Discrimination, and other Required Policies

The HSU Children’s Center welcomes the enrollment of children with disabilities and makes all reasonable accommodations to meet the child’s individual needs. The program will work with parents and specialists in the development and implementation of IFSPs, IEPs, and other individualized plans to address the child’s needs.

The HSU Children’s Center does not discriminate on the basis of actual or perceived sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, religion, color, mental or physical disability, or age or on the basis of a person’s association with a person or group with one or more
of these actual or perceived characteristics. All families are encouraged to participate in all aspects of the program. Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact CSDA’s TARGET Center @ (202) 720-2600 (voice and TDD).

The HSU Children’s Center will provide no religious instruction or worship.

The HSU Children’s Center policies are subject to review by the University administration, Center staff and Parent Advisory Board. Policy decisions can only be established or altered by the joint consensus of the University administration, Center staff and Parent Advisory Board. Parents will be notified in writing of any policy changes. Open meetings for major policy changes are held for parents at the monthly Parent Board meetings. Policies causing undue personal concern may be discussed with the Center Director, Parent Advisory Board members, and/or University administration at any time. The University Uniform Complaint Procedures are available in the Center Office and on Humboldt’s State web page [http://www.humboldt.edu/president/uml/un100-01.html](http://www.humboldt.edu/president/uml/un100-01.html)

Concerns may also be addressed to Dept. of Social Services, Community Care Licensing (707) 826-9961.

The Children’s Center participates in the USDA Child and Adult Care Food Program. “In accordance with Federal law and U.S. Department of Agriculture (USDA) policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (800) 795-3272 or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.”
Information about Employment

This section includes:
✓ New Employee Orientation
✓ Staff Orientation
✓ Staff Trainings
✓ Staff Meetings
✓ Work Schedules and Assignments
✓ Expectations of Staff
✓ Code of Ethics and Disciplinary Action

The Children’s Center values diversity in staff and maintains a policy of nondiscrimination, hiring qualified individuals without regard to race, color, religious creed, national origin, ancestry, gender, sexual orientation, marital status, age, disability, medical condition or status as a veteran provided they meet the requirements established by the center for the position. Efforts are made to hire staff that reflect the cultural diversity of the families and children we serve. Employment, retention and advancement of employees shall be based on merit and be responsive to the needs of the Children’s Center for quality and excellence.

Applications are available on the Children’s Center’s website located on the Humboldt State University website. Applications may be submitted in person, by email or mailed to the Children’s Center. Applications are screened for suitability for individual positions based upon hours of availability, child development units, experience and references. Applicants who appear to be a good match for a particular position will be called for an interview. Interviews can take place in person or over the phone. Successful applicants must fill out applicable paperwork required by the university and Community Care Licensing, they must be Live Scanned and turn in a completed Health Clearance and TB Clearance before beginning work with children.

Orientations – Employment of Student Staff

Upon hiring all staff must complete paperwork required by Humboldt State University, licensing, and the Children’s Center. All newly hired staff are required to meet with the Office Administrator for a New Employee
Orientation. This orientation covers paperwork, live scan and health requirements, timesheets and paychecks. Prior to assuming job duties all employees will be provided with a paid orientation meeting and a variety of written materials, including a staff handbook, classroom manual, and support materials.

During the first month of employment, staff are required to:
- Read the Staff Handbook
- Begin working on trainings through the Moodle site, including completion of the required on-line staff trainings
- Attend Staff Trainings and/or Staff Meetings

Staff Trainings & Staff Meetings

At least twice per academic year all staff are provided with a paid, all day Saturday, staff training. In August the training provides information about the Children’s Center, the NAEYC Code of Ethics, supervision guidelines, relationship-based caregiving, expectations of team members regarding attendance, dress, attitude, confidentiality and personal interactions. We also spend time in classroom groups reviewing the classroom schedule, environment, routines and cleaning lists. There is an opportunity to practice a fire drill, an earthquake drill, and to practice using a fire extinguisher. In January the training centers on diversity issues, working with children with exceptional needs, and classroom work on accreditation standards and working with individual children and families.

Classroom staff meetings are held 1-2 times per month, from 5:30-7:30PM, and dinner is included. Each meeting has a community training topic and break-out sessions for each classroom team. Staff meetings are mandatory and paid.

In addition staff will have opportunities to attend trainings both on-site and off-site that support their development as assistant teachers and early care professionals.

Work Schedules and Assignments

Copies of staff job descriptions and responsibilities are given to staff when they are hired and are available in the office, in the back of this handbook and online. Although job descriptions are provided to assist staff in communicating job responsibilities, they are only guidelines and are not intended to cover all tasks or duties you may be assigned. Job descriptions normally change over time as the Center adjusts the program to meet the individual needs of children, parents, and teachers. From time to time, all employees are expected to perform duties and handle responsibilities that are not part of their normal job.
It is important that each staff member observe his or her scheduled work hours. If a staff member needs to be late due to an emergency, they must call the Center Office and let the teacher know when they will arrive. Quality child care demands dependable staff members.

Staff members should not be at the Centers with a contagious illness or infection. Each staff member is responsible for making arrangements for a substitute whenever she/he is unable to work due to illness. This is necessary to maintain the adult child ratio required by law and safety. A list of substitutes is provided each semester indicating substitute names, phone numbers and hours available.

It may be necessary to phone all substitutes before finding one who is available. It is advisable to begin calling early to allow enough time to locate a substitute, please think ahead and try not to call substitutes after 10:00 p.m. or before 7:00 am. If someone calls you and asks you to sub, please return their call even if you can’t sub for them. The same goes for texting, emailing, facebooking... Remember, when you are in need these are the same people who will be responding to your sub requests.

Staff members who are feeling too ill to work may be excused by their supervisor. However, under all circumstances it is the responsibility of each staff member to find his or her own substitute. If a substitute cannot be found, the supervisor must approve the absence.

Staffing at the Center is directly related to the number of children enrolled. If the enrollment decreases, it is possible that the number of hours worked by staff would be reduced. In such a case the employee would be paid only for the actual number of hours worked so this must be reflected on the time sheet.

**Break and Lunch Periods**

Staff are scheduled for breaks as follows:

0-3.75 hours, no break

4-5.75 hours, 15 minute paid break

6-7.75 hours, 15 minute paid break and 30 minute unpaid lunch

8 hours, (2) 15 minute paid breaks and 30 minute unpaid lunch

Breaks are scheduled, to the extent feasible, in the middle of the work period. Since the needs of the children are paramount, the supervisor is authorized to adjust breaks as required by program needs. The staff lounge in the Office is
available for breaks and lunch periods. Staff may use the microwave and refrigerator in the kitchen. Computers are usually available as well.

Staff members need to use break and lunch times for eating/drinking. As models for the children, staff cannot drink coffee or eat outside foods while working in the classroom. In order to model healthy habits, teachers should eat with children during meals.

**Probationary Period**

The trial period for new employees lasts up to 90 calendar days from date of hire. During this time, you have your first opportunity to evaluate the Children’s Center as a place to work, and management has the first opportunity to evaluate you as an employee. All student employment with the Center is at will. This means you and the Center are free to terminate employment at will at any time by giving a two-week notice. **A two-week notice is essential to find a replacement for you in the classroom.**

Each new student employee will be evaluated after a two-month period. The result of that evaluation will assist both the supervisor and the employee in determining the employee’s progress on the job. All employees, regardless of position, status or length of service, are expected to meet and maintain Center standards for job performance and behavior. After the probationary period all student staff will be evaluated each year.

**Time Sheets**

All student staff members must indicate the number of hours worked each day on time sheets provided in each classroom. Time sheets must be completed and submitted on the due date indicated. A chart is posted with instructions on how to fill out time sheets. The student’s monthly paycheck depends upon filling out the time sheet correctly and submitting it on time. The Children’s Center Office Manager is available to answer questions regarding time sheets and other related matters.

Student Assistants cannot work more than 20 hours a week for the University, this includes employment in other work places on campus. Please keep the Assistant Director informed if you have a second on-campus position. Occasionally it might be necessary to work more than 20 hours to cover for another staff member’s absence. These situations should be approved by the Assistant Director or Director. Students may not work more than 8 hours in a day. If your schedule and a staff meeting put you at risk of going over 8 hours in one day, contact the Assistant Director or the Director to make arrangements. You must subtract any half hour lunch breaks from your total hours before putting them on your timesheet. Paychecks are picked up at the Cashier’s window in the Business Services Building on the 15th of the month
following the period covered on the time sheet. Identification is required to pick up a paycheck.

**Salary Schedule**

Effective 7/1/2015

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<thead>
<tr>
<th>Position</th>
<th>1st Semester</th>
<th>+250 hours</th>
<th>+500 hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cook/Helper/Cleaner/Gardner/Floater</td>
<td>$ 9.00/hour</td>
<td>$ 9.25/hour</td>
<td>$ 9.60/hour</td>
</tr>
<tr>
<td>Student Assistant Aide</td>
<td>$ 9.25/hour</td>
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<td>$ 10.00/hour</td>
</tr>
<tr>
<td>Student Assistant Aide (2 classes, enrolled in class)</td>
<td>$ 9.60/hour</td>
<td>$ 9.85/hour</td>
<td>$ 10.05/hour</td>
</tr>
<tr>
<td>Student Assistant Aide (3 classes, enrolled in class)</td>
<td>$ 9.85/hour</td>
<td>$ 10.05/hour</td>
<td>$ 10.45/hour</td>
</tr>
<tr>
<td>Teacher/Associate Teacher/Assistant Teacher Permit Student Assistant</td>
<td>$ 10.45/hour</td>
<td>$ 10.75/hour</td>
<td>$ 11.00/hour</td>
</tr>
<tr>
<td>Permit + Infant/Toddler 3 units</td>
<td>$ 11.00/hour</td>
<td>$ 11.30/hour</td>
<td>$ 11.55/hour</td>
</tr>
<tr>
<td>1st year 2nd year 3rd year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Associate Teacher (Permit + Infant/Toddler)</td>
<td>$ 11.50/hour</td>
<td>$ 11.75/hour</td>
<td>$ 12.00/hour</td>
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</tbody>
</table>

Effective 1/1/2016

<table>
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Designation of Authority

In the Director’s absence the Assistant Director/Program Coordinator will assume full program responsibility. In her absence program responsibility is passed on to a Site Supervisor. Full program responsibility means supervision and accountability for all staff actions, maintaining a safe environment, and protecting the physical safety of each child.

Designation of responsibility for program further entails familiarity with all emergency procedures in case of fire, earthquake or other natural disaster, or in the event of child injury, illness, or parent failure to pick up child. Supervisory staff is responsible for reporting all messages and activities to the Director.

**AT NO TIME MAY SUPERVISORY STAFF LEAVE THE CLASSROOM OR BUILDING SITE WITHOUT VERBAL TRANSFERAL OF RESPONSIBILITY TO THE NEXT INDIVIDUAL IN CHARGE.**

Student staff in teaching positions are required to enroll in one course per semester to meet the 12 unit requirement for earning a Child Development Permit. A listing of required courses is available in the Office. Applicable course offerings are posted in each classroom each semester.

Standards of Conduct

Groups of people who are working together for any purpose require certain guidelines pertaining to their conduct and relationships. Accordingly, we ask that all of our employees be aware of their responsibilities to the Center and to co-workers and engage in direct communication and constructive criticism. All staff must assume responsibility for the following guidelines for the safety and well-being of everyone at the Center.

- **Work time:** Work time is for working! Any conduct which interferes with the work time of a staff person will not be tolerated. Personal cell phones should be off. Staff are not permitted to leave work areas during work time without permission of their supervisor.
- **Security:** all staff must wear their HSU Student Id at all times. A pouch and lanyard will be given to you when you are hired. If you lose your id, pouch or lanyard, you must purchase a new one before working at the Children's Center. Id card replacements can be purchased at the library, pouches and lanyards in the Children’s Center Office.
- **Work performance:** Employees are expected to put in a fair day’s work. Unsatisfactory work, poor performance, producing work below standard, and lack of cooperation jeopardizes our children and other staff.
- **Attendance:** Punctuality and dependability are of prime importance to the efficient running of the Children’s Center. If it becomes necessary for you to be late to work
for any reason or to be absent from work you are expected to follow the procedures listed below:

1. If you know you will be absent in advance – class trip, wedding... - there is a form available to you. On this form you will put the details of when you will be absent and who will be your substitute(s). This form is given to your supervising teacher for approval and kept on file.

2. If you are ill or have an emergency – call the office and let them know your situation and who your sub(s) will be. In a real emergency, please call and let us help you find a sub.

3. When an absence will be longer than one day, notify your supervisor daily or as often as needed to keep him/her informed as to the date of your probable return to work.

4. A doctor's verification of illness may be required if an employee takes more than one week off sick or if, in the opinion of the employee’s supervisor, the absenteeism has been excessive.

- **Attitude**: All children, parents and visitors should be treated with kindness, friendliness, patience and respect. Staff must refrain from gossip and other forms of conduct which could disturb the program and detract from the professionalism of the Center.

- **Confidentiality**: It is against the policy of the Center and those we serve to give out information regarding children and their parents. This includes any photos of the children. All information and pictures should be held in strict confidence and should not be shared with anyone outside of the Center.
  - Inside the Center, such information should be discussed only when it will benefit the care we offer the child and parent, and such discussions should take place only during staff meetings or privately with your supervisor. **At no time will staff discuss individual children or personnel issues with parents at the Center or outside the work environment.**
  - Confidentiality includes all forms of communication including but not limited to social media and email.
  - You are also expected not to discuss any problems or concerns in the presence of any child.
  - Maintaining professional conduct is expected of all employees of the Children’s Center. Refer all inquiries regarding children, their performance, and parents to your supervisor.

- **Dress and Personal Appearance**: Employees represent the Children’s Center to the community. It is important that your appearance and attire be neat, clean and appropriate for working with young children, as well as meeting with parents and campus representatives. Teachers, the Assistant Director and the Director may set reasonable standards and have the authority to relieve employees from duty who do not meet the appearance and attire standards. Whenever possible, an alternative will be provided so that you may remain at work.
• Smoking is prohibited in the building and on the grounds of the Children’s Center. Smoking at HSU is restricted to certain areas, the one nearest the Children’s Center is at Plant Operations on B Street.
• Telephone Use: Center telephones are to be used for business purposes in serving the interests of our customers and in the course of normal operations. Answer all calls promptly and courteously. The proper way to answer the phone is “HSU (classroom name), this is ________, may I help you?”

Disciplinary Action

The Center uses a constructive approach to disciplinary matters to insure that the professional standards of the Center are being met at all times. The constructive approach to discipline for corrective action does not require specific steps but may consist of counseling, oral and written warnings, letter of reprimand, demotion, suspension, or dismissal. Although there is no way to identify every possible violation of standards of conduct the following is a partial list of infractions which will result in corrective action.

Actions requiring immediate discharge

Most rules involve common sense and accepted standards of good conduct. Violation of the following rules is considered serious and will result in discharge without prior warning:
• Striking or abusing a child, humiliating a child, endangering the life of a child, withholding food from a child as punishment.
• Staff who are accused of child abuse will be suspended or given leave with pay pending investigation of the accusation. Parents or legal guardians of suspected abused children will be notified. Parents or legal guardians of other children in the program will be contacted by the Director if a caregiver is suspected of abuse so they may share any concerns they have had. However, no accusation or affirmation of guilt will be made until the investigation is complete. Caregivers found guilty of child abuse will be dismissed.
• Inconsiderate or disrespectful treatment of parents, staff or visitors.
• Failure to follow program policies regarding child guidance and visual supervision.
• Violation of Center confidentiality policy.
• Refusal to perform assigned work or follow instructions.
• Gross carelessness or negligence.
• Willful destruction of property.
• Sleeping during the supervision of children.
• Coercing or inciting others to limit work performance or engage in any practice in violation of Center rules.
• Unauthorized absence. Employees must notify supervisory personnel immediately upon necessity of absence. Repeated unauthorized absences will result in termination.
• Unauthorized removal of property.
• Personal conduct outside the workplace that places them at risk of being excluded by licensing from the center may result in unpaid leave until the matter is resolved or may result in immediate dismissal, depending upon the severity of the situation.

**Code Of Ethics**

The Center adheres to the National Association for the Education of Young Children (NAEYC) Code of Ethical Conduct. Employees are expected to follow this code when making workplace decisions of an ethical or moral nature.

**Performance Evaluations**

You will be asked to complete a self-evaluation annually along with the performance evaluation completed by your Supervising Teacher. Such evaluation will be based on your performance of duties and responsibilities as outlined in the job description along with the individual professional development plan established by you and your Supervising Teacher. The joint performance evaluation process allows you and your Supervising Teacher to discuss your overall performance and summarize your achievements, challenges, and goals.

**Personnel Files**

Child Care Licensing (Title 22 §101217) requires that employee records be maintained at the work site. Student employee personnel files are maintained in the Children's Center Office in a locked file. Applications, fingerprint clearances, physicals, recommendations, training certificates, and transcripts are some of the records maintained. These files are confidential; however, an employee may contact the Director and make an appointment to review their file. By law, your personnel file is kept for three years once you leave the Children's Center.

**Health and Counseling Services**

You are very important to the children and program so it is important that you keep yourself both physically and mentally well. Staff working with young children are exposed to many illnesses, if you are feeling ill it is important that you get needed medical care. Students should go to the Student Health Center on the campus, or their own provider. Health Center services are available by appointment and walk-in basis. Being a student and a teacher can be stressful.
If you are feeling overwhelmed, depressed or stressed it may be helpful to talk with your supervisor. Sometimes just talking with someone is a relief, but there may also be some work-related changes that can be taken. The campus Counseling Center is also available for students (ext. 3236) for individual appointments and/or support groups.

**Grievance Procedures**

Staff are encouraged to discuss their concerns regarding the program with their supervisor, Assistant Director and/or the Director. In the event that the problem is not resolved, you may request a review through the University Student Grievance Procedure. A copy of this procedure is available in the Center Office, through the Vice President of Enrollment Management and Student Affairs, and on the HSU web site [http://www.humboldt.edu/advise/grievance.html](http://www.humboldt.edu/advise/grievance.html).

**Resignation**

An employee who resigns should give at least 10 working days notice if he/she wishes to terminate his/her employment without prejudice. This time is required so that an orderly transition can be made.
Health & Safety Procedures, Mandated Reporting

This section includes:

✓ Mandated Reporter Responsibilities
✓ Daily Health Screening
✓ Exclusion Guidelines
✓ Illness First Aid
✓ Infectious Disease Control Procedures
✓ Hand washing and Use of Gloves
✓ Accident and Incident Report Forms
✓ First Aid
✓ Injury Prevention
✓ Releasing a Child from the Center

Suspected Child Abuse Reporting

Child care providers are required by law (§11166 of the State Penal Code) to report suspected child abuse or neglect to Child Protective Services (CPS). In the event of reasonable suspicion, both CPS and the parent will be notified and an investigation will be made. CPS has the authority to "observe and/or interview children, or staff, and to inspect and audit child or facility records without prior consent." As a mandated reporter, you have absolute immunity from criminal or civil liability for reporting suspected abuse as required or authorized. The statutory duty to report is not excused or barred by the professional privilege of confidentiality. The primary intent of the report is to protect the child and help the parent. Training is provided annually to help recognize the signs of abuse so that we may function as responsible reporters, and you should review the handout *Staff Concerns Regarding Abuse* prepared by the Children’s Protective Services.

Child abuse is defined as:
• a physical injury which is inflicted by other than accidental means on a child by another person.
• sexual abuse, including both sexual assault and sexual exploitation.
• willful cruelty or unjustifiable punishment of a child resulting in physical pain or mental suffering.
• corporal punishment or injury.
• neglect, including both severe and general neglect.

In the event of reasonable suspicion of abuse the Center will notify both Child Protective Services and the parent. It is not our job to investigate or place blame. We function as a support system to the child and family during and after the investigation.

If you suspect child abuse or neglect:
1. Staff member will immediately report to the **Supervising Teacher, Assistant Director or Director** any suspected abuse or neglect.
2. The Director or Designee will make a verbal and written report to Child Protective Services through Humboldt County Social Services Department (445-6180)
3. Parents will be notified by the Director or Designee or Child Protective Services.
4. The program will keep one copy of the reporting form for the child’s file. The Director will make an oral report to the Vice President for Student Affairs when a student parent is involved.
5. All child abuse reports are to remain confidential.
6. In the rare situation that the supervisory staff do not agree with the suspicion and the employee still feels that there is a concern the employee is mandated to make the report to Child Protective Services directly.

**Daily Health Screening**

Teachers are required to make an informal health inspection as each child arrives at school. (Title 22, §101326.1) While greeting the child, get on the child’s level, touch their skin and look at their general appearance. If the child appears ill, talk to the parent to determine the child’s health status before the child is left at school for the day. Things to look for when doing a health screening include:
• listlessness
• rash
• excessive coughing, runny nose or eyes, difficulty breathing
• feverish appearance or warm to the touch
• parent or child report that child is not feeling well
• signs of severe injury such as noticeable bruises or cuts
Note: If the child is not well enough to participate fully in the day’s activities, including outdoor play, the parent may not leave the child at school. Also, if the child has had any of the following symptoms or illness in the previous 24 hours the parent may not leave her at school:

~ fever  ~ nausea or vomiting  ~ impetigo
~ rash of unknown origin  ~ earache  ~ severe coughing
~ strep throat  ~ diarrhea  ~ conjunctivitis (pink eye)
~ head lice/nits

Exclusion Guidelines

At the Center if a child becomes ill, in the opinion of the classroom supervisor, the parent will be contacted to have the child picked up. While waiting for the parent to arrive, the teacher will isolate the child, provide care needed. When parent arrives update them on the child’s status and remind them that the child should remain home the next day. Children must be symptom free for at least a day before returning to school.

Notification of Communicable Illness

The Children’s Center will notify all classroom parents and staff in writing of any contagious illness exposure. The nature of the illness, mode of transmission, period of communicability, classroom control measures, etc. will be described along with suggestions for actions to be taken.

Illness First Aid – while waiting for parent to arrive

• High Fever - cool down without chilling. Remove child’s outer clothing, wrap in light cloth that is damp with tepid water if necessary. Observe child closely, watch for signs of looking "poorly" and possible seizures.
• Vomiting - offer supportive care, give nothing by mouth. Encourage slow deep breathing if possible.
• Cough and colds - two areas of concern:
  • Croup (loud barking cough). Keep child in steamy room if possible
  • Epiglottis - child looks bad, drooling, won't lie down, difficulty breathing. Needs emergency treatment fast. Call 911 for transport to emergency room. Do not look in throat. Opening mouth can cause immediate closure of airway.
• Seizures - seizures are self-limiting, they will stop by themselves. Care is supportive. Keep child from hurting himself, lay on left side and aspirate if possible. Pay attention to how child looks, how long seizure lasts, and what happened just before.

When the Director or Office staff are not available to contact parents classroom supervising Teachers should contact Student Affairs (ext. 3361) to locate the
parent. Give the parent’s name and have them told that their child is ill at the Children’s Center and needs to be picked up immediately. If the parent is not a student call the home or work numbers indicated on the child’s Emergency Card. If no parent can be reached contact a local emergency contact listed on the Emergency Card to pick up the child. Be familiar with emergency procedures so that you may act quickly in the event of a serious accident or illness.

**Staff Medical Emergencies/Occupational Safety and Health Administration (OSHA)**

To protect the safety and health of all employees, federal and state regulations require all safety and injury prevention procedures be posted and followed by all employees. You will find this information on the bulletin board in the Office. Any injury that occurs on the job, no matter how insignificant an injury may seem when it occurs, must be reported to your supervisor or the Director to provide prompt evaluation and obtain medical attention if necessary. **In no circumstance should an employee leave the program without reporting an injury that has occurred.** During the work week staff needing medical treatment will be served at the HSU Health Center and afterhours at Mad River Hospital Emergency Room.

**Medications**

The Children’s Center does not administer any medications (neither prescription nor over-the-counter). Parents can come in to administer medication as needed, storage space if available in the Office refrigerator.

**Allergies**

All allergies and/or special dietary or medical needs must be indicated on the Emergency Form and on the Physician’s Form. Allergies and special dietary needs must be documented by a physician listing the food that may be substituted. Parents should also complete a Health Care Plan for any child with special medical conditions, including allergies. This plan identifies medical need, symptoms, triggers, and action plan.

If an over-the-counter medication is a part of the Health Care Plan, the medication must still be prescribed by a physician, dated, with specific instruction as to the administration. These medications will be stored in the classroom in a safety locked cabinet, out of children’s reach. Only professional staff may administer medications. These staff have current CPR and First Aid training, and have been trained on the appropriate steps to follow the Health Care Plan. A log will be kept of any incidents requiring medication and attached to the Health Care Plan. If the Health Care Plan is utilized, you will be notified immediately. If the child’s symptoms appear life threatening, 911 will be called.
EpiPen Jr. and EpiPen – if your child’s allergies are or may be life threatening and require immediate intervention with an EpiPen Jr or EpiPen, we will comply with those needs. Please work with your classroom teacher to complete a Health Plan that describes the symptoms and triggers, and exactly when medication would be administered. The EpiPen Jr or EpiPen must be prescribed by the child’s physician, with instructions clearly on the box or device. If the medication were administered, the teacher or office will contact you immediately and call 911 for follow-up care. All professional staff and associate teachers are trained in First Aid and practice the administration of an EpiPen during that training.

**Sun Protection**

Children will be protected against cold, heat and sun injury. Fresh air is valuable in preventing disease so children will go outside daily whenever possible. Parents are asked to provide warm clothing and rain gear. To prevent sun injury the program will provide sunscreen (with UVB and UVA protection). Parents will be asked to sign permission for the application of sunscreen and to provide alternative brand if they want a sunscreen other than that provided.

**Diapers & Diaper Creams**

The Children’s Center provides diapers and wipes for all children enrolled while at school. If families prefer to provide their own diapers and wipes, they may make arrangements with their child’s classroom teacher. Diaper Creams can be applied as necessary – please work with your teacher to complete a Health Care Plan that describes exactly when this should take place. Teachers must comply with the directions on the product families provide.

**No Smoking**

The Children’s Center facilities including outdoor play areas are smoke free. Smoking is only permitted on the HSU campus in designated areas. The nearest designated smoking area to the Children’s Center is at Plant Operations on B Street.

**Weapons of Any Kind**

Humboldt State University does not allow any weapons on campus. The Children’s Center complies with this policy and discourages children from pretending to use weapons while at school.
Blood-Related Injuries

The Director, Assistant Director, Teachers, and Associate Teachers are designated first aid providers and maintain current certifications in pediatric first aid and CPR. However, there is the possibility that students and volunteers could be exposed to blood while dealing with a blood injury when it first occurs. To further minimize potential infection, all Children’s Center employees who may have occupational exposure shall be offered the Hepatitis B vaccination series within 10 days of beginning classroom duties. A staff member may waive the right to the vaccination series but the waiver must be signed /dated and in the staff members employee file. Staff members need to provide documentation if they have previously received the Hepatitis B immunizations. In addition, Blood Borne Pathogen Training is mandatory for all employees of the Children’s Center.

What to do if exposure to blood occurs? At the Children’s Center, we are primarily concerned with the Human Immune-deficiency Virus (HIV), the Hepatitis B Virus and the Tuberculosis bacilli (See our Blood Borne Pathogens Exposure Plan for definitions). All staff realize that rendering first aid is not their primary job assignment but in an emergency situation it may be necessary at the time the injury occurs. This may require with gloved hands, applying pressure with a compress to the wound until supervisory staff arrive to administer first aid. In the event that a staff member comes in contact with blood during their shift they need to immediately notify their supervisor. If the contact is with an open sore/broken skin or any other reason for concern then the Center Director will notify the campus Health Center and the staff member will be relieved of their duty with the children and proceed to the Health Center for a screening by a physician. The procedure to be followed at this time will be determined by information from the staff member, physician on duty and Center Director. For further information a copy of Bloodborne Pathogens Exposure Response, Prevention and Control Plan is available for reading in the office.

Universal Precautions shall be observed by Children’s Center employees to minimize/prevent exposure to blood and other infectious materials (CAL/OSHA regulations). For use at the Center these include:

- Barriers – gloves, goggles, aprons, etc.
- Hand Washing
- Barriers for emergency resuscitation
- Decontamination of Surfaces
Hand Washing

All staff, participating adults and children must wash their hands frequently while at the Center. Germs grow in warm, moist places, especially on palms, between fingers and under nails. Moist germs enter the body through the mouth or nose. Hand washing removes germs from hands before they touch food or utensils which go into the mouth. Surfaces and equipment handled by others contain germs.

In a group child care setting, the viruses responsible for colds circulate rapidly, especially during the winter months when we tend to remain indoors for longer periods of time. The virus concentration in respiratory secretions is usually highest 2 to 3 days before a person develops symptoms of illness. As a result, the classroom air and everything your bare hand touches picks up germs. Hand washing is the single most effective method of reducing illness and the spread of germs. Children should be instructed and assisted to wash hands just as adults.

The proper hand washing procedure is:
1. Wet hands with running water
2. Use liquid soap
3. Wash front & back of hands to finger tips using a scrubbing, over-and-under motion, rinse with running water
4. Continue washing for at least 20 seconds
5. Dry hands with paper towel (common towels may not be used)
6. Use paper towel to turn off faucet
7. Dispose of paper towel in a closed, lined trash can

Children and staff wash hands before
- Upon arrival
- Any food assistance, preparation or consumption
- Diaper changing or assisting with toileting
- Water play and playdough
- Setting out sheets and blankets for naptime
- Moving from one classroom to another
- Leaving the school

Children and staff wash hands after
- Mealtime
• Contact with body fluids (wiping/blowing noses, coughing on a hand, touching mucus, blood or vomit)
• Diaper changing, assisting with toileting, personal toileting
• Removing disposable gloves
• Outdoor play or supervision
• Water play
• Handling any garbage or cleaning
• Administering medication
• Handling a pet or any surfaces that might have contact with animals

In addition staff
• Do not use hand washing sinks for bathing children or for removing smeared fecal material.
• In situations where sinks are used for both food preparation and other purposes, staff clean and sanitize the sinks before using them to prepare food.

Sanitation Procedures

All staff must follow appropriate sanitation procedures for the health and safety of everyone attending the Center. Toxic materials, soaps, detergents and cleaning compounds must be stored where inaccessible to children and away from food supplies. All dishes and utensils used for eating must be cleaned and sanitized after each use. Each classroom has one spray bottle of disinfectant cleaning solution. These are used in the sanitation of changing tables, tables, chairs, counters, walls, water tables faucets, handles, doorknobs, soap dispensers. Any surface contaminated with body fluids should be cleaned immediately, disinfected, and rinsed. If carpeting is soiled the area should be blotted with paper towels, spot cleaned with carpet cleaner and Plant Operations contacted to shampoo as necessary.

Garbage cans must be lined and have lids. Any can without a lid must be for office paper use or art project paper scraps. Children and adults are to be instructed to place tissues, paper towels, napkins, food stuffs in a can with a lid. Contaminated items (paper towels from wiping a contaminated surface, tissue with blood, band-aids etc.) must be placed into a plastic bag, tied and deposited into a red biohazard container located at each Center.

Soiled laundry should be double bagged separately in a tied plastic bag and placed in the child’s cubby. The bag should be labeled with the contents (i.e. blood, feces, etc.) Sheets/blankets are sent home for laundering when soiled or at least weekly. All bedding is stored in the child’s cubby at the Center.

Items to be sanitized daily
• counter tops and edges
• table surfaces and edges
• sinks, toilets, faucets and handles
Disposable Gloves

The issue over whether and when to use disposable gloves in a child care setting has been a matter of controversy among health and child care experts. In preparation of the Children’s Center policy on the use of gloves many factors were considered. Following is the Children’s Center policy for the use of gloves:

Gloves should be worn under the following circumstances:

- blood-related injuries
- when adult has a break or cut in the skin
- when diapering or assisting with toileting involving a stool (While hand washing provides protection against infection transmitted through feces, gloves are suggested as there are situations where blood may not have been anticipated or recognized.)
- collecting garbage and trash.

Gloves should never be washed or reused. A new pair of gloves should be used for every situation. Gloves should be turned inward by removing from wrist to fingers, wrapping one glove inside the other while removing, and disposed of immediately in a covered, lined trash can. Disposable gloves are located throughout the school and in the:

- children’s bathroom
- first aid kits
- field trips bags

Handling Food

No one with signs of illness (including vomiting, diarrhea, and open infectious skin sores) or who is known to be infected with bacteria or viruses that can be carried in food will be responsible for food-handling.

All meals will be served “family style” with each food item being made available to each child and teacher present. Staff are to check for food allergies or substitute meals posted in each classroom. Food returned from individual plates is discarded and leftovers that have not been served are discarded at the end of the day. Drinking water is
accessible to children who can serve themselves and offered between meals to all children, while indoors and outdoors. Water will be dispensed by drinking fountains or individual drinking cups.

Handling Visiting Pets

Any pet or animal present at the facility, indoors or outdoors, shall be in good health, show no evidence of carrying any disease, and be a friendly companion for the children. No reptiles, snakes, lizards, turtles, or birds from the parrot family may come to the Center due to the increased possibility of spread of illness from these animals. All pets shall be cared for properly. Caregivers must always be present when children are handling pets. Children are to be instructed on safe procedures to follow when in close proximity to pets, such as learning how to handle them gently, and how not to provoke them or remove their food. Pet food supplies must be kept out of reach of the children. Pets shall be prohibited from food preparation, food storage, and eating areas. Children and adults shall wash their hands immediately after handling any animals or animal wastes. Parents must be notified of any visiting pets and given the opportunity to have their child excluded due to allergy or parent choice.

The Children’s Center policies of health and safety are based on the belief that the health and safety of children are part of the learning process. By establishing limits and standards within the daily routine, the health and safety of the children is maintained. Staff should always be alert to the total situation and make sure that all areas are supervised.

Injury

If a child is injured (other than a minor injury) while at the Children’s Center the parent or guardian will be notified of the injury and specific instructions regarding action to be taken will be elicited at this time. Supervising classroom Teacher will determine if parents should be called. Parents will be called immediately in the event of a head bump with swelling, facial injury, mouth/tooth injury, bee sting or bite that breaks the skin. If the parent or guardian cannot be reached the Center will notify the person designated as the child’s emergency contact. The Center maintains first aid supplies sufficient to care for minor injuries. Injuries will be noted on an Accident Form with a copy given to the parent and a copy for the Office.

Accident Report Form

The Accident Report Form is used to inform parents of any of the following that occur at school:

- Any injury that results in a mark (scrape, scratch, pinch, bump that results in redness)
- Any injury that would result in a lasting impression (sand in eyes, bit tongue, slivers, bug bites, etc.)
- All human bites
• Bump to the head

The form (in duplicate) must be completed by the staff member who witnessed the episode. After completing the form it should be signed by a Supervising Teacher (if classroom Supervising Teacher is unavailable, the form should be signed by a Supervisor in another classroom). The original is to be placed in the child's parent pocket, and the copy goes into the Office pocket. The intent of the form is to notify parents of what happened, how the accident occurred and what steps were taken to aid the child. It is critical that the parent receives this notification the same day that it happens. Parents are asked to sign accident report forms at departure. In completing the Accident Report Form it is inappropriate to include the name(s) of other children involved on the form if the injury was caused by another child.

**Incident Report Form**

The Incident Report Form is used to document when a child hurts another child or staff member. Only the Classroom Teacher may give a parent an Incident Report. It is troubling to a parent to get this information, even though we know that it is developmentally normal at the age of our children and, in most cases, the injury was not really intentional. Incidents include biting, scratching, pinching, hitting etc. Whenever an Incident occurs an Assistant Teacher should notify the Classroom Teacher or Associate immediately (notify a Supervising Teacher in another classroom if necessary). The Teacher will need to know details such as what occurred, where, who was involved, what happened before the incident, what was the child’s reaction to hurting the other child. (The Assistant Teacher will also need to complete an Accident Report Form for the child that was injured, remembering not to include the name of the child that caused the injury.) The Classroom Teacher will complete the Incident Report Form and share it with the parent. A copy of the Incident Report will also go to the office. The Classroom Teacher will notify all the classroom staff about the situation and remind them to be more watchful and to report any further injuries and/or attempts. Following three Incident Reports for the same child the Supervising Teacher will conference with the child’s parents and develop a plan to address the situation. All classroom staff will be informed of the plan and how they are to implement it.

**Discipline**

The Children’s Center believes that children are active, self-motivated learners. Children grow and develop self-discipline over time, with the support of caregivers and in the context of relationships. Adults support the development of pro-social behaviors in a variety of direct and indirect ways – through positive relationships, modeling, supporting peer interactions, creating engaging environments, promoting small group activities, utilizing routines and schedules, and supporting children’s learning and practice of
their social skills. Every child has their own timetable for development, therefore we believe that guidance must be relationship-based and individualized. If behavior becomes disruptive or challenging, we work with families to plan supports to help the behavior diminish.

**Implementing Classroom Preventive Practices**

1. **Safe Environment**: Every effort is made to make the Children’s Center is the safest environment we can provide for children, a place set up expressly for the use of the toddlers and their parent and caregivers. A carefully planned environment limits the need for adults to control toddler behavior verbally.

2. **Rich and Varied Curriculum**: Provided both inside and outdoors. In addition to allowing the children to use the materials already out on the shelves, provide enriched experiences that match their interest and energy level.

3. **Routines**: Daily routines provide a structure that helps toddlers feel secure and know what to expect.

4. **Duplicate Toys**: At the Center, we keep materials in matching sets of duplicate toys so that each child can have a similar toy.

**Using Social and Emotional Teaching Strategies**

1. **Non-verbal Techniques**: The caregiver is physically close to the toddler, sitting on the floor or a low seat, kneeling or squatting and making eye contact. Use meaningful gestures, such as a soft touch on the shoulder or stroking a cheek or arm to model gentleness.

2. **Redirect** toddlers to an appropriate substitute activity. For example, if a child is throwing toys, start a “basketball” activity, throwing soft toys or balls into a container. If a child grabs the pen from your pocket, get out markers and paper. Active children may be ready for outside play or a rainy day large motor activity like indoor climbing or jumping.

3. **Choices**: Providing simple choices gives toddlers the sense of autonomy and control that is essential at this stage of development. Make sure that both of the choices you offer will provide an outcome that is acceptable to you.

4. **Modeling**: Model pro-social behaviors (turn taking, sharing, empathy, gentleness, appropriate use of materials, and problem-solving techniques).

5. **Coaching**: Teachers use positive directions, telling the toddler, briefly and firmly, what to do (rather than what not to do). For example:
SAY     DO NOT SAY

Keep your bottom on the chair  Don’t climb on the chair

6. **Reinforce**: Recognize when the child behaves appropriately and be specific. Lecturing and “time out” are examples of negative attention that we do NOT use at the Toddler Center.

Attention for undesirable behavior reinforces that behavior, so ignore undesirable behavior when possible.

**Planning Intensive Individualized Interventions**

1. **Observation**: Watch and document child behavior.

2. **Conference**: Meet with family and create an individualized plan to address area(s) of concern. This may require involvement of community resources. Plan will include action for both family and classroom.

3. **Implementation**: Parents and classroom staff consistently implement plan for two week period and record observations.

4. **Follow up**: Assess & re-evaluate. If after a 6-week period the child's behavior has not improved, or if the teacher no longer feels they can keep other children safe from the actions of the child, the family will be given 2 weeks to leave the program. A meeting will occur with the teacher, family, and the Director or Assistant Director to create a transition plan for the family.

**Toddler Specific Strategies**

1. **Small Groups**: Keep children in small groups preferably with single caregiver and four or less toddlers in a given space. Crowding and over-stimulation can lead to challenging behaviors. Also, in this setting you will not be dividing your attention between too many toddlers.

2. **Observation**: Close observation of each individual child is of utmost importance in providing quality care and guiding toddler behavior. Closely observe each child to see what captures their interest and when they become frustrated or aggressive (are they crowded, hungry or thirsty, tired, or bored?) Avoid problem behaviors by providing activities that a child especially enjoys or by discovering and meeting unmet needs.

3. **Primary Caregiving**: The HSU Children’s Center supports the belief that each child needs to develop an intimate, stable relationship with consistent caregivers. To achieve this, the classroom children form a group and the same
caregivers care them for each week. Although each caregiver is fully responsible for all toddlers during their shift, a special attachment is fostered and soon develops between each caregiver and his or her “own” three to four toddlers in the group. All caregivers work as a team with a classroom of toddlers.

Not all children thrive in group care or in specific programs. Additionally, the program is limited by funding, adult: child ratios, specialized training of staff, etc. and cannot meet all the needs of all children. Specific circumstances in which this may occur include: aggressive, anti-social or unacceptable behavior to the extent that the child’s safety or the safety of other children or staff cannot be guaranteed inability of the child to adjust to the group care situation.

Should it be determined jointly by the administrators and teaching staff that the program is unable to meet the needs of a specific child, enrollment will be denied or services terminated. Whenever possible this action will only be considered after other avenues available to the program have been explored in an effort to provide service to the child and family. Referrals to other services and assistance in finding other child care will be made available to the family.

The following procedure will guide program action in most cases. (If the child’s behavior poses a serious risk to the safety of children or staff termination may be immediate.) Parent will be notified of the concern and meeting will be scheduled. Intervention meeting between parent, Assistant Director and Teachers, outline situation/area of concern and establish plan of action for both Center and parent(s) to address concern, finally set date for follow-up meeting and possibly determination meeting. At the follow-up meeting staff and families will evaluate progress and adjust plan as needed. If a child does not respond to the interventions of the staff and family within a 6 week period, or if the child’s behavior escalates so that staff can no insure the safety of the other children in the group, the family, teacher and director or assistant director will meet and create a timetable for the transition from the Children’s Center.

First Aid

Each classroom is equipped with a first aid kit and Manual for minor accidents. All Teachers may treat minor wounds and abrasions providing blood is not present. In the presence of blood, a Supervising Teacher will be called (Classroom Teacher or Associate, or Supervising Teacher from another classroom.

First Aid Procedures:
• For minor cuts and abrasions: cleanse with antibiotic soap on moist cotton ball and rinse with running water. Band-Aid if necessary. Take note of where and how the accident occurred.
• More severe cuts with bleeding: Contact a Supervising Teacher to assist with the blood injury. They will apply pressure with cotton or a clean paper towel. If extreme bleeding they will elevate area if possible and apply pressure at pulse point. Notify the Director and follow Emergency procedures.
• If a child falls... a little fall or a big one... allow him/her to get up by her/himself. Go to the child calmly and reassure him/her. If the child is seriously hurt he/she will know what part can be moved and what part can’t. If the child isn’t seriously hurt getting out of his/her own predicament will help greatly.
• When the child is seriously hurt, conscious or unconscious, do not move him/her. Get Supervising Teacher.
• Lost or broken tooth: get Supervising Teacher immediately; find tooth handle as little as possible, place in cup with milk; Supervising Teacher will contact parent to transport to child’s dentist.
• Any hard bumps, even if child seems to recover spontaneously, report immediately Supervising Teacher.
• Nosebleed: contact Supervising Teacher. They will place cool cloth on forehead and apply pressure to lower sides of nostrils for a full 5 to 10 minutes uninterrupted. Have child sit up and lean slightly forward.
• Human bites: clean area with soap and apply cold compress. If the bite breaks the skin the Supervising Teacher will notify parents immediately.
• Insect bites: contact Supervising Teacher. They will scrape off stinger if visible and treat with bee sting swab. Check child’s Emergency Card to see if allergy is noted, if so get medical help immediately. Even when no allergy is noted watch for a reaction as child may not have been stung before (coughing, shortness of breath, hyperactivity, flushed, progressive reddening of area).
• Splinters: Wash area thoroughly with soap, Band-Aid, and leave alone.
• Burns: apply cool water and then dry the area. Never apply ointments of any kind. Severe burns or electrical burns – Supervising Teacher will call paramedics.
• Foreign bodies: Contact Supervising Teacher. Eyes -- flush with water from inner to outer corner of eye. Ear and nose -- (beans, seeds, bugs, etc.) leave alone. Contact parent.
• Fractures, dislocations: there will be point tenderness at place of injury. Contact Supervising Teacher who will check the joints above for movement and color. Splint it where it lies including joints above and below injury. Apply ice. Contact parents and/or Paramedics.
• Head injuries: Contact Supervising Teacher. If unconscious check Airway, Breathing, and Circulation. Assume neck is broken and immobilize entire
torso. Call Paramedics. If conscious but shows signs of vomiting, sleepiness, or pale color contact parents.

Be aware of broken or cut skin areas on your hands. Skin lesions or wounds should be covered with a bandage. Speak to injured children in a calm voice with reassuring messages. Educate children, parents and volunteers to get a Supervising Teacher in case of blood injuries. Remind children not to touch another person's blood. When a blood-related injury occurs call a Supervising Teacher, CCAMPIS Teacher, Associate Teacher or Assistant Director to provide first aid.

**Accident Prevention Policies**

Common sense and close observation help to create a safer environment for children. Familiarize yourself with the following suggestions for providing children with a safe program.

**Supervision:**
- Always remember the number of children in your immediate group. Know where and what each one is doing.
- Children are not to go out of, or play on, the gates or fence around the playground.
- Never leave a group for whom you have assumed responsibility without telling another adult that you are going.
- Never leave a group of children unattended.
- There are prescribed areas for various activities. Generally, they should be conducted there. (Example: painting at the easel or table, clay at table, sand in the sandbox, bikes on the bike path, etc.)

**Movement:**
- Always be alert to prevent children from running in front of trikes, slide, swings, etc.
- Help keep the floor free of scattered blocks or toys not in use.
- An adult should be available to guide movement flow of children in one direction on balance beam, tumbling mat, ladder, slide, trikes and other equipment to prevent bumping into one another.
- No throwing of anything that could injure others or damage property.
- No banging into things with wheel toys. Children should sit on bikes.
- Wipe up spills on floor as soon as noticed to prevent falls.
- Do not permit children to stand on chairs or table tops. Do not permit children to sit on table tops.

**Sharp Objects:**
- Remind children to always walk while holding scissors, shovels, or other sharp objects.
- Scissors are to be used at the table only.
• Sharp knives, adult scissors, and work tools are to be regarded as potential sources of injury and need to be kept out of children’s reach.
• Knives used by children in cooking projects will need to be supervised by an adult.
• Remove broken toys; watch for splinters, protruding nails, etc.

Choking:
• Children need to be instructed to keep small objects out of their mouths.
• No peanuts, nuts, whole grapes, popcorn, raw carrots, pretzels should be served to children under four years.
• Children are to remain seated while eating for choking can occur if they run or fall while eating.
• No balloons are allowed in the program because of choking hazard should they burst. Disposable gloves should not be inflated for play.

Warm and Cold Weather:
• On warm sunny days, don’t allow children to get overheated. Encourage them to drink extra water and to play in shaded areas. (See Guidelines for Preventing Sunburn)
• In cold weather make sure children wear warm protective clothing before allowing them outdoors, several layers are useful.

Guidelines for Preventing Sunburn

Young children are more likely to get sunburned than adults but everyone should avoid prolonged skin exposure to sun. Areas such as the face, shoulders and backs of knees are more likely to burn than other areas, and children susceptible to burn should use sun block. The Center will provide a UVA/UVB sun block for each classroom and teachers will apply with signed permission from parents. Remember to wash your hands after each application.

If parents choose to bring their own brand of sunscreen, it must be indicated on the child’s permission form and the bottle labeled with child’s name. Individual children’s sunscreen and school sun block are stored together in each classroom.

Each time sunscreen is applied the time must be recorded and teacher should watch & document any reactions on the Sunscreen Roster. Sunscreen should not be applied to children’s hands because of hand/eye and hand/mouth contact by young children.

Visitors
Parents are always encouraged to visit, this is their Center and they are always welcome. While some parents will notify the classroom when they are coming to visit, parents are free to come and go at their own discretion.

All other visitors to the Center must check in at the Office first before going to the classroom. This includes relatives of the child unless they are visiting with the parent in attendance or unless they are designated to pick the child up from school. Practicum students and students visiting to observe the program must sign in at the Office. Children’s Center staff members’ friends or relatives must check in at the Office before visiting. The Office staff will issue a visitor’s pass to approved visitors.

**Classroom Cooking**

The kitchen has equipment available for cooking projects. All classroom cooking activities are to be closely supervised. Cooking and art activities involving appliances should be limited to four or five children with one adult. When in use, both the appliance and the cord should be out of the flow of traffic and an adult must sit next to the appliance at all times. Electric cords should be unplugged when not in use.

**Outdoor Play Areas**

Outdoor play is a key ingredient in our curriculum and the health and education of young children. When you are outdoors, the safety of the children is your primary responsibility at all times. In order for you to supervise effectively, you need to (1) position yourself near the action but not in it, (2) be aware of the entire outdoor area and who is “in charge” and (3) refrain from chatting with co-workers. To ensure safety, you also need to sweep and remove the chips and dirt from all hard surfaces every day including play structures and ramps. If you are taking the last group of children out of the classroom, bring the sign-in sheet with you. Conversely, if the entire classroom is in the yard and you are taking in the first group, take the sign-in sheet with you.

**Employee Health And Safety**

No employee wants to have an accident or cause someone else to have one. Carelessness on the part of an employee can result in accidents and injury. When employees perform their work in a safe way, they have accepted the personal responsibility of protecting themselves, their fellow workers, and Center equipment from accidents and injury. In order to form the habit of working safely, you as an employee should do the following:

1. Always use personal safety equipment provided.
2. Report all dangerous conditions and accidents, even minor ones.
3. Watch the bulletin board for safety information.
Safety Practices

It is the policy of CSU to provide safe working conditions for all employees and to promote continuous, vital safety awareness at all levels of administration. The Children’s Center is responsible for: (1) providing a safe environment for children, teachers and parents, (2) maintaining a safe environment, (3) developing and providing ongoing staff training, (4) enforcing all regulatory mandates and (5) providing safety information in writing to all employees. Employees are responsible to read and understand all Center safety and health regulations to assure their own personal safety and a concern for the safety of others.

Under no circumstances would an employee be reprimanded, demoted, fired or discriminated against for reporting safety issues. Employees who do not treat safety seriously, do not follow Center policies and practices, or who operate in an unsafe manner are subject to established disciplinary action. The following areas require your attention:

Storage  Proper storage is essential for safety purposes as well as ease of locating specific materials when needed: Stack all materials safely inside and on shelves and never double stack on open shelves. Always return items to their proper storage area, maintaining storage area in a safe and orderly fashion. Keep tools and cleaning supplies in a locked area inaccessible to children. Never have anything stored within 24” of the ceiling.

Housekeeping  The foundation for a safe and pleasant place to work is good housekeeping: Materials should be kept out of aisles and not be stored against doors. Equipment must be returned to its proper storage area after each use. All spills must be cleaned immediately (refrigerator, shelf, floor, etc.) All employees are responsible to see that the classroom is thoroughly cleaned and materials properly stored at the end of each day. Utilize checklists for opening, closing, and weekly cleaning.

Lifting and Carrying  Extreme caution is necessary whenever you are lifting and carrying heavy children and objects. Employees need to be aware of the proper methods to use when lifting and carrying to avoid injury or stress. In general, moving heavy objects (furniture & equipment) is to be avoided by Center staff.
Handling of Hazardous Chemicals

Cleaning materials, detergents, aerosol cans, pesticides, health and beauty aids, poisons, and other toxic materials shall be stored in the original labeled containers and shall be used according to the manufacturer’s instructions and for the intended purpose. They shall be used only in a manner that will not contaminate play surfaces, food, or food preparation areas, and that will not constitute a hazard to the children. When not in actual use, such materials shall be kept in a place inaccessible to children and separate from stored food.

The Children’s Center shall provide workers with hazard information, as required by the Occupational Safety and Health Administration (OSHA), about the presence of toxic substances. This information includes the identification of the ingredients of art materials and disinfectants. This information may be found at the Center Office.

Any new employee must be trained before starting to work with hazardous chemicals, and any affected employee should have a training update to cover new products being introduced. All training will be documented.

Releasing A Child From The Center

All staff must be familiar with procedures for releasing a child to a person other than the parent. In the event that a person not cleared to pick up a child refuses to leave or insists on taking the child call Campus Police immediately (ext. 5555).

Children are to be released for pick-up only to parents, or persons designated on the child’s Emergency Information Card. In the event that any other person is to pick up the child a signed note from the parent must be sent and given to the Supervising Teacher. Parents are requested not to phone with this information. Parents are responsible for notifying the person who will pick up the child that they will be asked for identification before the child will be released to them. Staff are responsible for checking identification on any adult with whom they are not familiar who is picking up a child from the Center. Make sure this identification matches with the person designated on the child’s Emergency Card or note from the parent.

In case of emergency, parents may need to call in a request to release the child to someone other than the parent. In this event the person picking up the child must be PREVIOUSLY listed on the child’s Emergency Information Card. Do not release the child unless the parent has designated this person previously in writing. No child is to be released to anyone without a signed consent by parent or legal guardian. When there is any cause for doubt check with Office Staff before releasing the child.
Intoxicated Parent

It is difficult to predict under what circumstances a court would impose liability on a provider for releasing a child to an authorized but intoxicated (under the influence of drugs or alcohol) person. It is unclear whether the provider’s duty to protect the child’s health and safety over-rides the parent’s right to take the child away from the facility. Recommended actions are:

- Contact the Supervising Teacher (may be in another classroom) to assist with the parent. Notify Director, at home if necessary.
- Delay the person’s departure until she or he is sober.
- Volunteer to call another person on the child’s Emergency Card or a friend, relative or taxicab to pick-up the child and parent.

If the person refuses to cooperate or acts threateningly, it will be necessary for you to make a judgment as to what a reasonable person would do under similar circumstances concerning releasing the child. In the event that the child is released to the suspected parent, write down the license plate number and report the information to police immediately.

Unauthorized Person

When an unauthorized person demands release of a child, in order to avoid civil or criminal liability, a provider should take all reasonable steps to resist the person’s demands. Recommended actions:

- Contact the Supervising Teacher (may be in another classroom) to assist with the individual.
- Stay calm. Explain that the law and the Center rules prevent the release of a child to any unauthorized person.
- Explain that the only exception would be if the parent has signed a written authorization and verified orally with the provider.
- Call the custodial parent and inform him or her about the situation.
- If the parent confirms that the person is unauthorized, try to stall the person until the parent arrives without releasing the child.
- If the person abducts the child by force, get a detailed description of the unauthorized person, record the person’s license plate and take note of the direction in which they went and immediately notify University Police (ext. 5555).

Procedure For Children Left At Center

If a child has not been picked up at 6:30 (or closing time) contact the Afternoon Supervising Teacher listed by the phone. The Supervising Teacher is to begin calling persons on the Emergency Card supplied to the Center at the time of the child’s enrollment. Both primary and secondary numbers will be called. After 30 minutes, if the parent or other authorized person has not been
reached the Supervising Teacher is instructed to call the Director (cell: 267-4933). The Director and UPD are to be notified that the Supervising Teacher is alone at the Center with a child. The Director, Supervising Teacher, and University Police Department will determine at what point Child Protective Services will be contacted in the event that the parent or authorized person is unavailable for an extended period.
This section includes:
- Emergency Medical Information
- Emergency Illness Procedures
- Fire Emergencies
- Earthquake Procedures
- Campus Alarm Procedures
- Miscellaneous Emergencies

Each adult in charge shall assume responsibility for care in any emergency that occurs on school property or during school functions. If the Supervising Teacher is not available contact should be made with the Director or with the Assistant Director for back up. Emergencies are not pre-planned events. Therefore knowing these policies and being prepared will help you to respond in emergency situations. All staff members are responsible for learning the emergency procedures for the school and familiarizing themselves with the evacuation plans. Routes are posted in each classroom.

Emergency Medical Information

It is the policy of the Center to immediately attempt to reach either the parent or identified authorized individual whenever a child is sick or has any of the following injuries – head bump with swelling, facial injury, mouth injury, bee sting, or bite that breaks the skin. The Supervising Teacher, Assistant Director or Director will make this call. All parents enrolling children in the Center complete an Emergency Card, which supplies the following information:
1. Parent locator information (class schedule or work information)
2. Parent telephone numbers
3. An authorized adult other than parent who can act in an emergency situation
4. Authorization for Center to seek emergency treatment in the absence of the parent or other authorized individual
5. Authorized individuals who may pick-up child from the Center

Procedure for Dire Emergency

If the nature of the sickness or injury is such that the Director, Assistant Director or Supervising Teacher believes that immediate medical attention is necessary, they will
contact University Police to send an ambulance. *Campus Police are contacted by dialing 911 in an emergency.*

When the University Police or a supervisor arrives, relate what information you have and remain available to assist as necessary. The Police will assume responsibility for summoning additional assistance, moving or removing the individual, or taking any other action necessary. If the child is transported to the hospital (Mad River Hospital is the local emergency hospital) a staff member will accompany the child with the *Child’s Emergency Release and Mad River Form.*

Parents will be contacted by Office Manager immediately with information regarding their child’s condition and location.

Following the incident, fill out an Accident/Incident form on the event. Give full report, time, circumstances, actions, etc. Place one copy in child’s cubby or parent pocket and other in Office file for Director. The Director will notify the Department of Social Services.

**Procedure for Epidemic**

If notified of an epidemic immediately inform the Director and the Center will follow the instructions of Public Health or other emergency personnel.

The Center has developed emergency procedures in accordance with University Police in the event of a fire or an earthquake. The procedures will be practiced with children at regular intervals and you need to make sure you understand your role.

**IN THE EVENT OF FIRE,** children evacuate the building under the direction of caregivers and teachers quickly, yet calmly. *The individual noticing the fire pulls the alarm.*

**All Staff** – Direct children in your area out of the building, following emergency exit routes posted in each room. Be alert for fearful children. Help children walk in an orderly fashion to meeting area: south east corner of Toddler Yard for Toddler Center; west corner of west yard for Preschool near shed. If playground is ruled unsafe by emergency personnel, children will be evacuated to Special Event Field or other assembly point. Location will be posted on front doors for parents who have not yet arrived.

**Supervising Teachers** – Take sign-in sheet clipboards from their classrooms. Direct caregivers and assistants to evacuate children. Check bathrooms and classrooms to make sure all children and staff have exited. Move children to meeting area and contain in a group check sign-in sheets to be sure all children signed in have been evacuated. Remain with children in meeting area until you receive “all clear” signal. Supervising Teachers, CCAMPIS Teachers and Associate Teachers provide first aid.
**Director, Assistant Director and Office Manager** – Assist in evacuating Toddler Center. The Director will check with Supervising Teachers for roll call. On direction of University Police or Fire Department provide teachers with the “O.K.” to re-enter building. In the event that the building cannot be reoccupied, the Office Manager and designated staff will take the emergency cards to nearest safe phone to notify all parents for pick-up.

**Last Person to Exit each room** – Should close doors behind them. Do not open smoking or hot doors. If fire spreads or smoke becomes heavy, move evacuated children to a safe area away from fire and out of the traffic patterns of fire fighters. Stay calm and check for injuries.

**IN THE EVENT OF AN EARTHQUAKE**, if indoors, move away from windows, high cupboards, and outer walls. Children and staff should “Duck, Cover and Hold” under tables or crouched on the floor covering head, neck and back until shaking stops. Where unable to get under tables staff should cover children with classroom pillows, vinyl mats, pools, etc.

- Remain inside until shaking stops, after it stops count to five.
- One staff member must check safety of evacuation route, then all exit safely and meet at outside evacuation rally point to check in with all staff and children.
- If earthquake occurs while outside, move preschool children to:
  - **East yard** – east side of climbing structure near tunnel (away from buildings and grass area because of power lines);
  - **West yard** – center of playground between pear tree and end of climbing structure away from buildings (have children get into ball on ground and duck, cover, hold.)
- If earthquake occurs while outside for toddler children:
  - **Nature Yard** – gather children under overhang on north side of YTC building;
  - **Awning Yard** – along preschool/toddler fence away from building;
  - **Big Yard and Side Yard** gather children in center of yard along fence that divides the two play yards.

**After the Shaking Stops:**

**Supervising Teachers** – Attend to the needs of the children and staff. First aid supplies and medical information for child and staff are available in emergency packs in shed.

**Assistant Director and Office Manager** – Check child and staff sign-in sheets to determine if there are children and staff missing. If so, designate staff as “search and rescue” people. They shall check all rooms and nooks for children who may be hiding or in shock from fear or physical injury. As parents arrive
to pick up children be sure they sign each child out on the *Child Accounting Form* so that everyone has been accounted for. If it is necessary to send a child with someone on their emergency card, other than their guardian, record the child’s name, person with whom they left with and their destination on the *Child Accounting Form* (Child Accounting Form is located on clipboard in emergency pack). If it is necessary to send a child with someone on their emergency card, other than their guardian, record the child’s name, person with whom they left, and their destination on the Child Accounting Form. This will make it easier for the child’s guardian to find their child when they do reach the Center. Likewise, all staff members need to be accounted for and signed off on the *Staff Accounting Form* located on clipboard in emergency pack. Also, collect information concerning injuries, extent of damage, current hazardous conditions, and make recommendations to Director on protective actions.

**Director** – Takes responsibility of all emergency responses until relieved of the duty by University Police or other emergency authority. Establish communication so that location and extent of injuries can be communicated accurately and efficiently to disaster agencies. Assign staff to check for safety – check for gas, water, sewage breaks; check for downed power lines and shorts; turn off utilities if necessary, (wrench in emergency pack), extinguish small fires, if possible before they get out of hand (extinguishers are located by fireplace in front room of Exploration House; kitchen in Exploration House, Middle and Older Toddler Centers, by Door in Discovery Room and Younger Toddler Room; by door in Preschool Solar Room). Assign staff to get food, water and other emergency supplies located in emergency containers in shed. In the event that group must be relocated to another area, organize relocation and assign staff to take emergency supplies as well as post location on front doors for parents who have not yet arrived. Determine when staff will be relieved of responsibilities at each Center.

**Student Staff** – Need to remain on premises until relieved and accounted for (signed out by Office Manager)

**IN THE EVENT THAT CAMPUS EMERGENCY ALERT SYSTEM IS ACTIVATED:**
(Continuous ringing of bell tower bell, text message, and signage at all University entrances) Staff will immediately take children into the classrooms, away from windows, lights off, doors locked. Teachers will wait for notification from the Office before taking further action.

**Supervising Teachers, Assistant Director, Director, Office Manager** - remain at Center until released by University administration.

**Student Staff** – If Red or Yellow Alert while working, follow procedures and remain on premises until released by Center supervisory staff. If Red or Yellow Alert prior to arriving for work, do not come to Children’s Center.
Procedure for Power Failure

When the power goes out classrooms with cordless phones (Middle, Older Toddlers and Exploration House) need to disconnect cordless phone and connect backup phone to continue phone service. The Office should be notified of the power failure so that Plant Operations and Campus Police are notified. In the event of a long-term campus wide power failure University Police will notify the Center of a campus closure. Off-campus parents should be contacted immediately. If the campus is not closed and buildings become too dark or cold the Director will request approval to close the Center and if granted, parents will be contacted to pick up children.

Procedure in Event of Flood

If building flooding occurs due to broken water pipe, toilet, etc. remove children to playground area and contact Director or Office Manager who will call Plant Operations (extension 4475). In event of large-scale environmental flooding follow instructions of emergency personnel.

Procedure in Event of Missing Child

In the event of a missing child or children, notify the Office Staff immediately and conduct a search of the entire building and grounds. If this search does not discover the child, Campus Police will be immediately notified and provided with a detailed description of the child. Next, the child’s parent(s) will be alerted. All staff will cooperate in search efforts in every way possible while insuring the safety of the remaining children and until such time as their help is no longer required. As soon as possible, call Department of Social Services, Community Care Licensing to report an Unusual Incident.

Procedure in Event of a Suspicious or Threatening Individual On Site

In the event that a threatening individual is seen anywhere on the Children’s Center premises, notify all staff to move the children into the nearest safe classroom, lock the doors, turn off the lights and move children away from windows. University Police (extension 5555) should be notified immediately and provided with a detailed description of the individual. Children and staff are to remain in the classroom until given an all clear.
Important Phone Numbers

Please keep these numbers confidential.

UPD 826-5555
Children’s Center Office 826-3838
Children’s Center Fax 826-5671
Younger Toddler Room 826-5674
Middle Toddler Room 826-4601
Older Toddler 826-5670
Discovery Room 826-5672
Exploration House 826-4982
10th Street Preschool Office 826-5675
10th Street Toddler Classroom 826-5676
10th Street Preschool Classroom 826-5677
Susan Rosen, Director 267-4933 (cell) 502-1777 (David)
Visual Supervision Guidelines

The Children’s Center is licensed by the California Department of Social Services, Community Child Care Licensing under Title 22 of the California Administrative Code. Section 101229 states:

“No child(ren) shall be left without the supervision of a teacher at any time…Supervision shall include visual supervision.”

In addition to Section 101229, the following shall apply:

“Each infant shall be constantly supervised and under direct visual observation and supervision by a staff person at all times. Under no circumstances shall ANY infant be left unattended.”


- All children at Humboldt State University Children’s Center MUST be visually supervised at all times.
  - Special consideration must be given to areas children use occasionally such as bathrooms – children must never be unsupervised in the bathroom.
  - Napping children must be visually supervised by a teacher or aide in the same space as the sleeping children.

- Supervising Teachers, Teachers, and Associate Teachers are responsible for planning and maintaining supervision of ALL children in their care.

- United Student Assistants are responsible for visually supervising groups not to exceed 1:4 in Toddler Center and 1:8 in the Preschool as assigned by their Supervising Teacher.

- Staff must make their replacement aware of whom they are supervising before going on break or leaving at the end of their shift.

- Un-united Student Assistants and Helpers may assist in supervision but may never be unsupervised by teachers.

- Service Learning Students, Visitors, and Volunteers can never be responsible for supervising children.

I have read the Visual Supervision Guidelines and understand that while I am working in the classroom or play yard with children, I must work with other teachers to visually supervise all children at all times.

Name _____________________________________________________________________

Signature ___________________________________________________________________________________

Date ______________________________
HSU CHILDREN’S CENTER

MISSION STATEMENT

PHILOSOPHY

GOALS

Mission Statement
The mission of the HSU Children’s Center is to provide affordable, convenient, high quality child development services for families of Humboldt State University.

Program Philosophy
The Children’s Center believes that children are active, self-motivated learners. Development is fostered through intimate, stable relationships with caregivers and a secure, appropriate and challenging environment. Through the process of play and interaction with others and the environment children solve problems, work out social situations, integrate and synthesize information, construct knowledge. It is the responsibility of the teaching staff to provide a social and physical environment and activities that support and challenge development, taking the lead from the children’s needs, interests, and changing abilities.

This philosophy is based on the following beliefs:
- Each child is unique and special.
- Parents are the child’s first and most important teachers.
- A successful early childhood (first six years) is critical to healthy physical, emotional, and intellectual development later in life.
- Children grow and mature according to predictable stages of development as well as individual timetables.
- Children need a safe, healthy, and nurturing environment in order to grow up as healthy, successful adults.
- A secure, stable relationship with significant adults is necessary for children to optimally grow and develop.
- Good early childhood practices are based on knowledge of child development theory and research.

Program Goals
Program Goals:
- To work with parents to provide a program that meets the needs of each family and child and respect to diversity in race, culture, family structure, and language
- To provide parents with support, education and desired referrals to meet their family needs
- To provide stable, intimate, and individualized relationships with children and parents
- To provide a safe, predictable, and developmentally appropriate environment for children of different ages and abilities
- To provide care that is respectful and responsive to children and parents
- To support and challenge each child’s growth in all areas recognizing each child’s uniqueness and individual timetable
- To furnish children with a wide variety of experiences which will challenge their abilities and encourage their interests
• To help children develop problem solving, communication and negotiation skills to facilitate positive relationships
• To provide a program that reflects the lives of the children and families as well as the diversity found in society

Goals for Families:
• To be active participants in their child’s school experience.
• To be active participants in program planning and evaluation.
• To develop support network to help meet family needs.
• To secure necessary services to assist in meeting family needs.

Curriculum Goals for Children:

Children are personally and socially competent:
• To show self awareness and a positive self concept
• To demonstrate effective social and interpersonal skills
• To demonstrate effective self regulation
• To show awareness, acceptance, understanding, and appreciation of others’ feelings, needs, similarities and differences
• To show growing abilities in communication and language

Children are effective learners:
• To show an interest in learning new things
• To show cognitive competence and problem solving skills
• To show an interest in real life mathematical and science concepts
• To demonstrate emerging communication and literacy skills
• To demonstrate creative expression through art, music, dance and drama
• To develop non-stereotypical understanding of diversity in culture, family, ability, language, age and gender
• To demonstrate understanding of community in which they live

Children are safe and healthy:
• To respond to and initiate personal care routines with greater independence
• To demonstrate awareness of safety practices that minimize risk and support healthy growth
• To show increasing independence in making health life choices

Children show physical and motor competence:
• To move in coordinated way using large muscles in arms and legs
• To develop ability to coordinate use of hands to reach, manipulate, release with increasing strength and control
• To develop ability to balance self in space
• To develop use of eyes and hands together to perform tasks
HSU CHILDREN’S CENTER

PROGRAM CURRICULUM

Philosophical Basis

The Children’s Center believes that children are active, self-motivated learners. Development is fostered through intimate, stable relationships with caregivers/teachers in a secure, developmentally and culturally appropriate environment. Through the process of play and interaction with others and the environment children solve problems, work out social situations, integrate and synthesize information, and construct knowledge. It is the responsibility of the teaching staff to provide a social and physical environment and activities that support and challenge development, taking the lead from the children’s needs, interests, and changing abilities.

Program beliefs:
- Each child is unique and special
- Parents are the child’s first and most important teachers
- A successful early childhood is critical to healthy physical, emotional and intellectual development later in life
- Child grow and mature according to stages of development as well as individual timetables
- Children need a safe, healthy and nurturing environment in order to grow up as healthy, successful adults
- Children need secure, stable relationships with significant adults to optimally grow and development
- Good early childhood practices are based on knowledge of child development theory and research

Pedagogical Component

Activities
- Activities focus on how to best create a social, emotional, and intellectual climate that supports child-initiated and child-pursued learning
- There is a balance between preplanned activities and emergent curriculum ideas that come directly from the children’s spontaneous explorations of people and things of interest and importance to them
- Planned activities are provided for their potential to engage, challenge and build skills; children select among the activities
- Other curriculum activities emerge through children’s interests, questions, discoveries and efforts to build their own knowledge
- During activities the role of the caregiver/teacher is to support development in all areas, extend activities, scaffold learning, observe and assess
**Motivation Strategy**
- Children are intrinsically motivated to explore and learn

**Grouping**
- Heterogeneous grouping, much small group interaction (especially within primary groups with toddler-age children)
- Low teacher to child ratio, lower the younger the child

**Scheduling**
- Scheduled daily activities provide children with a sense of order and predictability
- Routines provide many learning opportunities
- Much flexibility in the schedule
- Large blocks of activity time to encourage children to fully engage and explore
- Larger group opportunities to listen to peers, share ideas, etc.
- Time scheduled for skill building

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**Administrative Component**

**Housing**
- Roomy environment designed to promote exploration
- Spaces for small groups (especially for younger children) and individual work
- Spaces that can change to meet individual and group needs and interests
- Learning/activity areas

**Equipment**
- Multidimensional materials encourage exploration and problem solving
- Materials for sensory exploration, artistic expression, block building, dramatic play, books, music, math and science
- Some structured materials to foster perceptual discrimination, manipulation and small muscle development
- Accessible materials organized on low, open shelves
- Duplicates of materials to support peer play and involvement

**Staff**
- Develop trusting, reciprocal relationships with children and parents; primary caregiving provides the secure, intimate relationship with one teacher for toddler-age children; through this close relationship caregivers/teachers develop an intimate knowledge of the child and family that enables them to provide a care and education program that is developmentally, individually, and culturally appropriate
- Plan and support activities that challenge the child’s current level of development
- Support and guide positive social interactions
- Observe and assess child’s interests, development, skills, etc.
HSU CHILDREN'S CENTER

DISCIPLINE & GUIDANCE

PHILOSOPHY

GOALS

Mission Statement
The mission of the HSU Children's Center is to provide affordable, convenient, high quality child development services for families of Humboldt State University.

Program Philosophy
The Children’s Center believes that children are active, self-motivated learners. Children grow and develop self-discipline over time, with the support of caregivers and in the context of relationships. Adults support the development of pro-social behaviors in a variety of direct and indirect ways – through positive relationships, modeling, supporting peer interactions, creating engaging environments, promoting small group activities, utilizing routines and schedules, and supporting children’s learning and practice of their social skills. Every child has their own timetable for development, therefore we believe that guidance must be relationship-based and individualized. If behavior becomes disruptive or challenging, we work with families to plan supports to help the behavior diminish.

Discipline & Guidance
At the Children’s Center our goal is for children to identify and regulate their own emotions, learn problem-solving skills, and build friendships. We do not believe in punishment or negative consequences, language or tone. We firmly believe that children with a positive self-concept are better equipped to develop successful relationships, and that by being consistently positive in our interactions, interventions and modeling we best support children’s social-emotional development.

The Children’s Center utilizes the Teaching Pyramid (below) which focuses on promoting social-emotional development, providing support for children’s appropriate behavior, and preventing challenging behavior.

![Teaching Pyramid Diagram]

The Teaching Pyramid
A model for supporting social competence and preventing challenging behavior in young children
Building Positive Relationships
- Teachers build positive relationships with families and children — through orientations, daily communication, and positive interactions we strive to create strong, positive relationships with families and children.
- Teachers use many techniques to promote optimal relationship building including primary caregiving (toddler center), continuity of care, and small groups.
- Children develop positive self-concept, confidence and a sense of safety in the context of positive relationships.
- Teachers support children’s peer relationships by exploring emotions, helping children articulate their feelings and needs, and teaching problem solving strategies throughout the curriculum.

Implementing Classroom Preventive Practices
- Teachers strive to create engaging, safe environments that build on children’s interests and are developmentally challenging. Having a variety of options available to children so that they can select if they want to be active or quiet, alone or with many other friends, and what activity in a space they are interested in pursuing.
- Children are encouraged and rewarded for pro-social behavior (trading with a friend, helping put away the blocks) and teachers are quick to intervene when behavior is hurtful or unsafe (calling someone names, throwing toys).
- Children are expected to learn routines, take care of their school, and treat everyone with respect — expectations are expressed through modeling, problem solving and through activities, stories and lessons.

Using Social and Emotional Teaching Strategies
- Children may need explicit instruction to ensure they develop competence in emotional literacy, anger and impulse control, problem solving, and friendship skills. Young children learn to name their emotions and match the word with the feeling as teachers reflect back to them. As they become confident that we understand their emotional words children may need support acting on their feelings and developing strategies for dealing with their strong emotional impulses.
- Friendship skills include negotiating, turn taking, making suggestions in play, requesting and receiving help, giving compliments, and even joining play. Teachers individualize support for each child – most children will move through these skills with increasing competence and minimal support, occasionally children need more explicit instruction and supported interactions.

Planning Intensive Individualized Interventions
- When behavior becomes consistently disruptive or endangers the child or others teachers will work with families to create an intervention plan for the particular situation. There is no uniform plan. Our process is to implement a plan for two weeks and then evaluate whether further intervention is necessary.
- When families identify a need for community services, we have a variety of professional connections to help families receive – these resources include evaluation for special needs, mental health services, crisis intervention services, and many more.
Our Assessment Tool
Desired Results Developmental Profile Assessment Policy

California Department of Education Child Development Division requires the Desired Results Developmental Profile (DRDP) be used in assessing children in State Funded Programs. The tool is used to assess children from birth to kindergarten in meeting program curriculum goals. Each semester parents meet with the classroom teacher to review the child’s portfolio and discuss the DRDP. Programs are required to show that the DRDP findings are used in planning curriculum and activities for children.

What is the DRDP?
The DRDP is an assessment tool for teachers to record an individual child’s progress in meeting developmental milestones, identifying their interests and needs and progress toward achievement of Desired Results for children. It is a process of recording a child’s progress over time. The first assessment is completed within 60 days of enrollment of the child each year and 6 months following. The four developmental areas on the Desired Results instrument are:

1) Children are personally and socially competent
2) Children are effective learners
3) Children show physical and motor competence
4) Children are safe and healthy

How are DRDP ratings determined?
The findings on a DRDP are determined through interaction and observation of children’s skills, behaviors, interests, and knowledge. Behaviors are considered typical if the child demonstrates them: easily and confidently; consistently over time; and in different settings. Evidence of a rating is documented through anecdotal records, writing samples, artwork, parent information, etc.

What documentation is used in DRDPs?
Ratings on the DRDP are documented through anecdotal records, writing samples, artwork, photographs, shared parent observations, etc. They can also include the Denver Developmental Rating Scale conducted by nursing students at the University.

Anecdotal observations are intentional watching and recording of children’s behaviors and skills. All teachers, student assistants and supervising teachers, collect anecdotes throughout the child’s day. Anecdotes are clear, objective, detailed, factual notes that describe what is seen and heard of a particular event. Work samples are also collected and provide evidence of knowledge, behaviors and skills. Photographs capture children’s individual and group activities. Parent observations and knowledge of their child is solicited and included at conference time and throughout the semester. All of this information is collected in each child’s portfolio which is kept confidential and only available to classroom teachers and the individual child’s parents.

How are DRDP findings used in the Program?
The DRDP findings are used to assess the development, interests and needs of an individual child and the classroom as a whole. The findings are utilized by classroom teachers for curriculum planning, individualized teaching, group activities, environmental changes, as well as adapting teaching practices. These findings are also shared with parents throughout the year.

When appropriate, with parent permission, this information can be shared when making a referral for diagnostic assessment. These referrals can be made through the Humboldt County Office of Education and/or Regional Center. This is only done after thorough observations, assessment and conferencing with families.
Appendix B

NAEYC Code of Ethical Conduct

The NAEYC Code of Ethical Conduct offers guidelines for responsible behavior and sets forth a common basis for resolving the principal ethical dilemmas encountered in early childhood care and education. The Code sets forth a framework of professional responsibilities in four sections. Each section addresses an area of professional relationships.

**Section I – Ethical Responsibilities to Children**

Childhood is a unique and valuable stage in the human life cycle. Our paramount responsibility is to provide care and education in settings that are safe, healthy, nurturing, and responsive for each child. We are committed to supporting children’s development and learning; respecting individual differences; and helping children learn to live, play, and work cooperatively. We are also committed to promoting children’s self-awareness, competence, self-worth, resiliency, and physical well-being.

I-1.2 To base program practices upon current knowledge and research in the field of early childhood education, child development, and related disciplines, as well as on particular knowledge of each child.

I-1.3 To recognize and respect the unique qualities, abilities, and potential of each child.

I-1.4 To appreciate the vulnerability of children and their dependence on adults.

I-1.6 To use assessment instruments and strategies that are appropriate for the children to be assessed, that are used only for the purposes for which they were designed, and that have the potential to benefit children.

I-1.8 To support the right of each child to play and learn in an inclusive environment that meets the needs of children with and without disabilities.

I-1.10 To ensure that each child’s culture, language, ethnicity, and family structure are recognized and valued in the program.

P-1.1 Above all, we shall not harm children. We shall not participate in practices that are emotionally damaging, physically harmful, disrespectful, degrading, dangerous, exploitative, or intimidating to children. This principle has precedence over all other in this Code.

P-1.3 We shall not participate in practices that discriminate against children.

P-1.4 We shall involve all those with relevant knowledge (including families and staff) in decisions concerning a child, as appropriate, ensuring confidentiality of sensitive information.

P-1.8 We shall be familiar with the risk factors for and symptoms of child abuse and neglect, including physical, sexual, verbal, and emotional abuse and physical, emotional, educational, and medical neglect. We shall know and follow state laws and community procedures that protect children against abuse and neglect.

**Section II – Ethical Responsibilities to Families**

Families are of primary importance in children’s development. Because the family and the early childhood practitioners have a common interest in the child’s well-being, we acknowledge a primary responsibility to bring about communication, cooperation, and collaboration between the home and early childhood program in ways that enhance the child’s development.

I-2.2 To develop relationships of mutual trust and create partnerships with the families we serve.

I-2.5 To respect the dignity and preferences of each family and to make an effort to learn about its structure, culture, language, customs, and beliefs.

I-2.6 To acknowledge families’ childrearing values and their right to make decisions for their children.

I-2.8 To help family members enhance their understanding of their children and support the continuing development of their skills as parents.

I-2.9 To participate in building support networks for families by providing them with opportunities to interact with program staff, other families, community resources, and professional services.

P-2.4 We shall involve the family in significant decisions affecting their child.

P-2.6 As families share information with us about their children and families, we shall consider this information to plan and implement the program.

P-2.9 We shall inform the family of injuries and incidents involving their child, or risks such as exposures to communicable diseases that might result in infection, and of occurrences that might result in emotional stress.

P-2.11 We shall not engage in or support exploitation of families. We shall not use our relationship with a family for private advantage or person gain, or enter into relationships with family members that might impair our effectiveness working with their children.

P-2.13 We shall maintain confidentiality and shall respect the family’s right to privacy, refraining from disclosure of confidential information and intrusion into family life.

P-2.14 In cases where family members are in conflict with one another, we shall work openly, sharing our observations of the child, to help all parties involved make informed decisions. We shall refrain from becoming an advocate for one party.
STAFF CONCERNS REGARDING ABUSE

• What if I am wrong?

A child care provider who reports “suspected” abuse in good faith cannot make a “wrong” report. In most states, those who make reports in good faith are immune from civil or criminal liability.

• What will happen to the child?

Each case is handled individually. Depending on the severity of the abuse and other assessments of the family a decision will be made whether to remove the child for safety reasons. In some cases, an adult may be removed from the home. In most cases, services to the family will focus on rebuilding family relationships.

• What good is my report?

Child care workers often feel powerless in the process of reporting. Each report causes a disruption of an abusive situation and alerts authorities to the potentially abusive families. Sometimes the impact of your report will not show effect until much later, possibly after the child has left your care. It is important not only to look at immediate result and changes, but at long term effects a single report may have.

• Will my report cause a parent to harm the child further?

This is often a concern and sometimes a problem. If this is a fear, convey this to the authorities. You make your report so they can assess this danger. In reality, there is probably more harm to be done if a report is not made. To the parent it may seem that you are condoning their treatment of the child.

• Should I report emotional abuse or neglect?

If in doubt, YES. This type of abuse and neglect is difficult to substantiate, but if unreported it is likely that no change will be made in the treatment of the child. Be aware of other kinds of abuse or neglect (physical, sexual) that may be occurring with the same children. In some cases, providing education and information to the parents can be a role the child care provider and child protective services can assume.

• What do I do to help an abused child heal?

Many child care providers are left with a feeling of helplessness, and powerlessness when they are to care for abused or neglected children. Responsible reporting is only one role; effective programming for the abused child is another very important role. Training resources for this information should be sought.
VERIFICATION OF COMPLETION OF
STAFF HANDBOOK AND CLASSROOM MANUAL

HSU Children’s Center

All Staff are required to thoroughly read both the Children’s Center Staff Handbook and Classroom Manual. These contain essential information for your job. After reading these materials sign and return this form (within the first two weeks of employment). Also, include one hour on your next timesheet for your time.

Keep the Handbook and Classroom Manual handy so you can refer to them as questions arise. Copies are also available at the Centers and on the Children’s Center website, www.humboldt.edu/childrencenter.

I verify that I have read both the Children’s Center Staff Handbook and Classroom Manual.

_________________________  _________________________
Signature                     Date
OUR LOCATION
Our Centers are located on the HSU campus at 14th and A Streets
and at 1695 10th Street, Arcata

CENTER OFFICE
Jensen House #94 • (707) 826-3838

TODDLER CENTER (LIC. 121305614)
Younger Toddler Classroom 12–18 months • (707) 826-5674
Middle Toddler Classroom 18–24 months • (707) 826-4601
Older Toddler Classroom 24–36 months • (707) 826-5670

PRESCHOOL (LIC. 121305613)
Discovery Classroom 30 mo.–3 ½ years • (707) 826-5672
Exploration House 3 ½–5 years • (707) 826-4982

PRESCHOOL (LIC. 125406385)
10th Street Preschool Classroom 3–5 years • (707) 826-5677
10th Street Toddler Classroom 18–30 months • (707) 826-5676

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