

Operational Discipline and Guidance Policy

This form provides the required information per 26 Texas Administrative Code (TAC) minimum standards §744.501(7), §746.501(a)(7), and §747.501(5).

Directions: Parents will review this policy upon enrolling their child. Employees, household members, and volunteers will review this policy at orientation. A copy of the policy is provided in the operational policies.

Discipline and Guidance Policy

Discipline must be:

- 1) Individualized and consistent for each child;
- 2) Appropriate to the child's level of understanding; and
- 3) Directed toward teaching the child acceptable behavior and self-control.

A caregiver may only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction, which include at least the following:

- 1) Using praise and encouragement of good behavior instead of focusing only upon unacceptable behavior;
- 2) Reminding a child of behavior expectations daily by using clear, positive statements;
- 3) Redirecting behavior using positive statements; and
- 4) Using brief supervised separation or time out from the group, when appropriate for the child's age and development, which is limited to no more than one minute per year of the child's age.

There must be no harsh, cruel, or unusual treatment of any child. The following types of discipline and guidance are prohibited:

- 1) Corporal punishment or threats of corporal punishment;
- 2) Punishment associated with food, naps, or toilet training;
- 3) Pinching, shaking, or biting a child;
- 4) Hitting a child with a hand or instrument;
- 5) Putting anything in or on a child's mouth;
- 6) Humiliating, ridiculing, rejecting, or yelling at a child;
- 7) Subjecting a child to harsh, abusive, or profane language;
- 8) Placing a child in a locked or dark room, bathroom, or closet with the door closed or open; and
- 9) Requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age.

Additional Discipline and Guidance Measures

(Only Applies to Before or After School Program (BAP)/School Age Program (SAP) that Operates under 26 TAC Chapter 744)

A program must take the following steps if it uses disciplinary measures for teaching a skill, talent, ability, expertise, or proficiency:

- Ensure that the measures are considered commonly accepted teaching or training techniques;
- Describe the training and disciplinary measures in writing to parents and employees and include the following information:
 - (A) The disciplinary measures that may be used, such as physical exercise or sparring used in martial arts programs;
 - (B) What behaviors would warrant the use of these measures; and
 - (C) The maximum amount of time the measures would be imposed;
- Inform parents that they have the right to ask for additional information; and
- Ensure that the disciplinary measures used are not considered abuse, neglect, or exploitation as specified in Texas Family Code §261.001 and TAC Chapter 745, Subchapter K, Division 5, of this title (relating to Abuse and Neglect).

Signature

This policy is effective on the following date: _____

Signed by: _____

Role: ☐ Parent ☐ Caregiver/Employee ☐ Household Member (CH. 747 only)

Minimum Standards Related to Discipline

- Title 26, Chapter 746 Subchapter L: [http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=746&sch=L&rl=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=746&sch=L&rl=Y)
- Title 26, Chapter 747 Subchapter L: [http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=747&sch=L&rl=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=747&sch=L&rl=Y)
- Title 26, Chapter 744 Subchapter G: [http://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=744&sch=G&rl=Y](http://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=26&pt=1&ch=744&sch=G&rl=Y)



Admission Information

Use this form to collect all required information about a child enrolling in day care.

Directions: The day care provider gives this form to the child's parent or guardian. The parent or guardian completes the form in its entirety and returns it to the day care provider before the child's first day of enrollment. The day care provider keeps the form on file at the child care facility.

General Information

Operation's Name		Director's Name	
Child's Full Name		Child's Date of Birth	Child Lives With <input type="radio"/> Both parents <input type="radio"/> Mom <input type="radio"/> Dad <input type="radio"/> Guardian
Child's Home Address		Date of Admission	Date of Withdrawal
Name of Parent or Guardian Completing Form		Address of Parent or Guardian (if different from the child's)	
List telephone numbers below where parents/guardian may be reached while child is in care.			
Parent 1 Telephone No.	Parent 2 Telephone No.	Guardian's Telephone No.	Custody Documents on File <input type="radio"/> Yes <input type="radio"/> No
Give the name, address, and phone number of the responsible individual to call in case of an emergency if parents/guardian cannot be reached			Relationship
I authorize the child care operation to release my child to leave the child care operation ONLY with the following persons. Please list name and telephone number for each. Children will only be released to a parent or guardian or to a person designated by the parent/guardian after verification of ID.			
Name		Phone Number	
Name		Phone Number	
Name		Phone Number	

Consent Information

Check All That Apply:

1. Transportation

I give consent for my child to be transported and supervised by the operation's employees:

☐ for emergency care ☐ on field trips ☐ to and from home ☐ to and from school

2. Field Trips

☐ I give consent for my child to participate in field trips.

☐ I do not give consent for my child to participate in field trips.

Comments

3. Water Activities

I give consent for my child to participate in the following water activities:

☐ water table play ☐ sprinkler play ☐ splashing/wading pools ☐ swimming pools ☐ aquatic playgrounds

4. Receipt of Written Operational Policies (Check All that Apply)

I acknowledge receipt of the facility's operational policies, including those for:

☐ Discipline and guidance ☐ Procedures for release of children
☐ Suspension and expulsion ☐ Illness and exclusion criteria
☐ Emergency plans ☐ Procedures for dispensing medications
☐ Procedures for conducting health checks ☐ Immunization requirements for children
☐ Safe sleep ☐ Meals and food service practices
☐ Procedures for parents to discuss concerns with the director ☐ Procedures to visit the center without securing prior approval
☐ Procedures for parents to participate in operation activities ☐ Procedures for parents to contact Child Care Licensing (CCL), DFPS, Child Abuse Hotline, and CCL website

5. Meals

I understand that the following meals will be served to my child while in care:

☐ None ☐ Breakfast ☐ Morning snack ☐ Lunch ☐ Afternoon snack ☐ Supper ☐ Evening snack

6. Days and Times in Care

My child is normally in care on the following days and times:

Day of the Week	A.M.	P.M.
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Authorization For Emergency Medical Attention

In the event I cannot be reached to make arrangements for emergency medical care, I authorize the person in charge to take my child to:

Name of Physician	Address	Phone Number
Name of Emergency Care Facility	Address	Phone Number

I give consent for the facility to secure any and all necessary emergency medical care for my child.

Signature — Parent or Legal Guardian

Child's Additional Information Section

List any special needs that your child may have, such as environmental allergies, food intolerances, existing illness, previous serious illness, injuries and hospitalizations during the past 12 months, any medication prescribed for long-term continuous use, and any other information which caregivers should be aware of:

Does your child have diagnosed food allergies? ☐ Yes ☐ No Plan Submitted on

Child day care operations are public accommodations under the Americans with Disabilities Act (ADA), Title III. If you believe that such an operation may be practicing discrimination in violation of Title III, you may call the ADA Information Line at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Signature — Parent or Legal Guardian

Date Signed

School Age Children

My child attends the following school

School Phone Number

My child has permission to (check all that apply):

- ☐ walk to or from school or home ☐ ride a bus ☐ be released to the care of his/her sibling under 18 years old

Authorized pick up/drop off locations other than the child's address

- ☐ Child's required immunizations, vision and hearing screening, and TB screening are current and on file at their school.

Admission Requirement

If your child does not attend pre-kindergarten or school away from the child care operation, one of the following must be presented when your child is admitted to the child care operation or within one week of admission.

Check **only one** option:

1. ☐ Health Care Professional's Statement: I have examined the above named child within the past year and find that he or she is able to take part in the day care program.
Signature — Health Care Professional Date Signed
2. ☐ A signed and dated copy of a health care professional's statement is attached.
3. ☐ Medical diagnosis and treatment conflict with the tenets and practices of a recognized religious organization, which I adhere to or am a member of. I have attached a signed and dated affidavit stating this.
4. ☐ My child has been examined within the past year by a health care professional and is able to participate in the day care program. Within 12 months of admission, I will obtain a health care professional's signed statement and submit it to the child care operation.

Name

Address of Health Care Professional

Signature — Parent or Legal Guardian

Date Signed

Requirements for Exclusion

- ☐ I have attached a signed and dated affidavit stating that I decline immunizations for reason of conscience, including religious belief, on the form described by Section 161.0041 Health and Safety Code submitted no later than the 90th day after the affidavit is notarized.
- ☐ I have attached a signed and dated affidavit stating that the vision or hearing screening conflicts with the tenets or practices of a church or religious denomination that I am an adherent or member of.

Vision Exam Results

Right Eye 20/ Left Eye 20/ ☐ Pass ☐ Fail

Signature

Date Signed

Hearing Exam Results

Ear	1000 Hz	2000 Hz	4000 Hz	Pass or Fail	
Right	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Pass	<input type="radio"/> Fail
Left	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> Pass	<input type="radio"/> Fail

Signature

Date Signed

Vaccine Information

The following vaccines require multiple doses over time. Please provide the date your child received each dose.

Vaccine	Vaccine Schedule	Dates Child Received Vaccine
Hepatitis B	Birth (first dose)	<input type="text"/>
	1–2 months (second dose)	<input type="text"/>
	6–18 months (third dose)	<input type="text"/>
Rotavirus	2 months (first dose)	<input type="text"/>
	4 months (second dose)	<input type="text"/>
	6 months (third dose)	<input type="text"/>
Diphtheria, Tetanus, Pertussis	2 months (first dose)	<input type="text"/>
	4 months (second dose)	<input type="text"/>
	6 months (third dose)	<input type="text"/>
	15–18 months (fourth dose)	<input type="text"/>
	4–6 years (fifth dose)	<input type="text"/>
Haemophilus Influenza Type B	2 months (first dose)	<input type="text"/>
	4 months (second dose)	<input type="text"/>
	6 months (third dose)	<input type="text"/>
	12–15 months (fourth dose)	<input type="text"/>
Pneumococcal	2 months (first dose)	<input type="text"/>
	4 months (second dose)	<input type="text"/>
	6 months (third dose)	<input type="text"/>

Vaccine	Vaccine Schedule	Dates Child Received Vaccine
Inactivated Poliovirus	12–15 months (fourth dose)	
	2 months (first dose)	
	4 months (second dose)	
	6–18 months (third dose)	
	4–6 years (fourth dose)	
Influenza	Yearly, starting at 6 months. Two doses given at least four weeks apart are recommended for children who are getting the vaccine for the first time and for some other children in this age group.	
Measles, Mumps, Rubella	12–15 months (first dose)	
	4–6 years (second dose)	
Varicella	12–15 months (first dose)	
	4–6 years (second dose)	
Hepatitis A	12–23 months (first dose)	
	The second dose should be given 6 to 18 months after the first dose.	

Physician or Public Health Personnel Verification

Signature or stamp of a physician or public health personnel verifying immunization information above:

Signature

Date Signed

Varicella (Chickenpox)

Varicella (chickenpox) vaccine is not required if your child has had chickenpox disease. If your child has had chickenpox, please complete the statement: My child had varicella disease (chickenpox) on or about (date) and does not need varicella vaccine.

Signature

Date Signed

Additional Information Regarding Immunizations

For additional information regarding immunizations, visit the Texas Department of State Health Services website at www.dshs.state.tx.us/immunize/public.shtm.

TB Test (If Required)

☐ Positive ☐ Negative Date:

Gang Free Zone

Under the Texas Penal Code, any area within 1,000 feet of a child care center is a gang-free zone, where criminal offenses related to organized criminal activity are subject to harsher penalties.

Privacy Statement

HHSC values your privacy. For more information, read our privacy policy online at: <https://hhs.texas.gov/policies-practices-privacy#security>

Signatures

Child's Parent or Legal Guardian

Date Signed

Center Designee

Date Signed

Parent Handbook of Policies

Welcome

The purpose of this Parent Handbook of Policies is to outline the policies and procedures of LC Childcare.

Registration Checklist Children may be enrolled from 6 weeks until they begin first grade, regardless of race, creed, or religious beliefs. The following forms are required by child care regulations and LC Childcare and need to be read, completed and/or signed prior to enrollment:

1. Parent Handbook of Policies (Read/sign/date)
2. Statement of Health (Physician provided)
3. Immunization Record (Physician provided)
4. Permission to Photograph (Read/complete/sign/date)
5. Food Allergy & Anaphylaxis Emergency Care Plan (If needed)
6. Infant Safe Sleep (Read/sign/date)
7. Infant Sleep Exception/Health Care Professional Recommendation (If needed)
8. Infant Feeding Instructions (Updated monthly)
9. Discipline Policy (Read/sign/date)
10. Copy of both parents' drivers' licenses
11. Child's Birth Certificate
12. Bug Spray and Sunscreen Permission

State Licensing Requirements

Michelle Edwards, as the child care director licensed with Texas Department of Family and Protective Services and LC Childcare, complies with all applicable licensing regulations and standards. These standards relate to health, safety procedures, nutrition, caregiver to child ratios, and record keeping. We believe that these standards in place are in the best interest of the children.

LC Childcare is subject to inspection by state. The latest licensing inspection report will be posted on the parent bulletin board for your viewing at any time, or you may choose to visit the state's website to view. Find the Minimum Standards and our latest inspection report online at https://www.dfps.state.tx.us/child_care/ There will also be a filed copy of Minimum Standards at the daycare for review at any time. You may contact the local licensing office at 817-321-8604 with any questions. To file a complaint for abuse/neglect, see phone number or website listed above.

Open-Door Policy

LC Childcare has an open-door policy for all parents. This means you may stop by anytime during business hours unannounced to observe your child, the child-care

center's program activities, the building, the premises, and the equipment. Of course, for safety purposes, our door will be locked. Parents are also free to call and check in on their child at any time. If necessary, please leave a message and your call will be returned in a timely manner. Many parents will text their questions and that too works well.

Please note, we reserve the right to amend any portion of the Parent Handbook of Policies, Enrollment Application, and Operational Policies at any time. When we do make a change to the contract, you will be provided a copy.

Daycare Hours

This daycare is Licensed and our operating hours are Monday- Friday 6:30 a.m. to 5:30 p.m.

Tuition Fees

6 weeks- 24 months of age - \$270/week

~Part time option: \$67/day, minimum 3 days per week

24 months plus 1 day until first grade - 247\$/week

~Part time option: \$63/day, minimum 3 days per week

*\$100 Non-refundable deposit required

*Once the application form and deposit have been submitted, you will be notified within 24 hours of your child's acceptance or denial of admission.

Tuition Covers

-Two snacks with milk and water from ages 17 months +1 day and above

-Curriculum and craft supplies for children when they are ready

-Diapers (until age 3) and wipes (for all children)

Payment Policy Your account will be automatically debited every Monday for the week.

Late Pickup Policy If there is an emergency and you are late, we are understanding and you will not be charged a fee. However, if you are late for any reason other than an emergency, you will be charged 2\$ a minute. **Please be courteous and arrive on time.**

Deposit: A nonrefundable deposit of 100\$ is due when you turn in your registration forms.

Filing Taxes LC Childcare will keep a record of all payments made for your child's tuition. At the end of the year, you will receive an itemized statement with all payments made.

Holidays LC Childcare will be closed Thanksgiving day and the following Friday. LC Childcare will also be closed from December 24- January 2nd and will reopen January

3rd. Parents will not be charged for the week of December 27-31.

Vacations and child illnesses

Parents are responsible for payment when their child is ill or when the family takes a personal vacation.

Discontinuation of Services Notice

LC Childcare requires a two weeks advance notice before discontinuing services. If this notice is not given, you will be charged for two weeks.

Termination Policy The first two weeks will be regarded as a trial period, in which case either party may terminate the contract without notice.

Arrival, Departure & Release of Children Children are to arrive clean and ready for the day. It is normal for some children to have difficulty separating from parents. Please keep your drop off brief as the longer you prolong the departure, the harder it gets. A smile, cheerful good-bye kiss, and a reassuring word that you will be back are all that is needed. Children are always quick to get involved in play or other activities as soon as parents are gone. Please make sure to be brief at pick up times as well. This is a time of testing, when two different authority figures are present (parent and care provider).

No one other than the parent or person(s) designated by you will be allowed to pick up your child without **advanced written, texted or verbal permission indicating the person's name and relationship to your child**. We reserve the right to request photo identification of the individual(s) granted permission to pick up your child.

If there is a court order keeping one parent away from the child, we must have a copy of that order in our file to that effect. Otherwise, we cannot prevent the non-custodial parent from picking up the child.

Sign-In Please sign your child in and out each day.

Current Information

Notify LC Childcare of any changes to contact numbers, emergency contact numbers and physician information as this is how you/ they will be notified in case of any emergency or illness with your child.

Allergies

If your child has an allergy to food, insects, etc., you must fill out a Food Allergy & Anaphylaxis Emergency Care Plan and take this with you to your child's doctor to be filled out, signed and dated. **If your child will need an Epinephrine injection or medication in case of allergic reactions, the parent is responsible for purchasing this medication for childcare or for bringing an EpiPen in daily to and from childcare.** A copy of your child's plan will be kept on file and it will be placed in the child's classroom. It will be privately placed on the wall, under an allergy alert sheet, for

teachers and/or household members to see in case of an emergency. A generic list of allergies present in the school will also be posted on the parent bulletin board.

Supplies

- Diapers are provided until age 3
- Wipes are provided for all children
- 2 snacks with drinks are provided for all children at ages 17 months +1 day and above

Parents Please Provide:

Infants

- Diaper cream
- Bottles (**Parents must take bottles home, wash and return daily**)
- Formula and/or breast milk
- Snacks
- Pacifier, if desired
- 3 clearly labeled changes of clothing
- Light blanket

18 months-5 years

- 3 Clearly labeled changes of clothing
- Lunch
- Water Bottle (**to be taken home and washed daily**)
- Blanket
- Snuggle/ Lovey to sleep with if desired
- Nap mat (see link for example:
https://www.amazon.com/gp/product/B085337YB1/ref=ppx_yo_dt_b_asin_title_o09_s00?ie=UTF8&psc=1)
- Clothing/shoes appropriate for the daily weather

Health Check A visual or physical assessment upon arrival will be done on your child/children. This is to identify potential concerns about your child's health, including signs or symptoms of illness and injury, in response to changes in the child's behavior since the last date of attendance. Please note that if your child is asleep upon arrival, he/she must be awakened before they are dropped off so that we can ensure their wellbeing before we can take them in for care.

Illness For the health and safety of your child and all the children in care, please do not bring your child in to daycare sick. Allergy-like symptoms include clear runny nose, slight cough, and no fever. They still allow the child to participate in our class activities. If you are not sure if your child should be brought to daycare, then please call and check with us. If a child becomes ill during daycare hours: the child will be moved away from the other children to the sick bay area in the front office and the parents will be contacted to pick up their child. The child will be attended to until the parent can make

arrangements to pick up the child.

Note: Once the child is removed from daycare due to an illness, they may not return to daycare until the symptoms that required removal are no longer present. The child must be fever free without the help of medication for at least 24 hours. The child must also be void of any contagious disease, unless accompanied by a doctor's note stating that the illness in question is not contagious, and the child is otherwise feeling well enough to participate in our daily schedule.

Guidelines for Children Requiring Exclusion from Daycare A child with any of the following illnesses must be completely free of any symptoms before returning to daycare. If the child is taking antibiotics for an illness, the child may return to daycare after the initial 24 hours of beginning antibiotics as long as he or she has no fever (under 100°F under the arm and inside ear, under 101°F orally), is no longer contagious, and is otherwise feeling well enough to participate in our daily schedule. Additionally, if a child has two runny bowel movements that cannot be contained in a diaper, they will be sent home until diarrhea-free for 24 hours.

Signs of illness include the following; unusual lethargy, irritability, persistent crying for no reason, runny nose (more runny and excessive than a clear runny nose), cough (more than slight), difficulty breathing, diarrhea, vomiting, mouth sores, rashes (note from doctor stating rash is non-contagious is ok), pink eye, chicken pox, mumps, measles, roseola, hepatitis A, impetigo, lice, ringworm, scabies, strep throat, scarlet fever, tuberculosis, shingles, and any other contagious disease or rash. **Any child with a fever of 101°F or above orally (in the mouth), 100 °F axillary (under the arm), or 100 °F tympanic(ear) may not attend daycare.**

State law requires that we notify parents of children who have been exposed to certain contagious diseases. Please notify us if your child becomes infected, so a note can be posted.

Medication

If your child needs to be medicated in order to get through the day and be able to comfortably participate in our classroom activities, then it is quite possible that he or she may be too sick to attend daycare. We will however give certain doctor prescribed medications to the children, given that they are no longer contagious, and only if the medication consent form has been signed. LC Childcare will only dispense prescription medication if it is required three or more times a day, in which case we will dispense the middle dose. Parents will be responsible for dispensing the morning and evening doses at home.

Over the counter medications such as Tylenol for teething or pain associated with bumps or bruises (not to bring down a fever) will be considered on a case by case basis. LC Childcare can deny the dispensation of over the counter medications at any time. If you're not sure if we will administer a certain medication or not, please feel free to ask.

Bug Spray and Sunscreen

Bug spray and sunscreen will not be applied unless it is supplied by the parent or guardian and is in spray-on form. LC Childcare will require a signed permission slip to apply the spray(s) with instructions as to when it should be applied.

First Aid, Medical and Dental Emergency Procedures Emergency information is kept on file at the daycare. In case of illness or injury, parents will be notified by phone at the telephone number that is on file.

For children who sustain a minor injury that does not require medical attention, LC Childcare will take the following steps:

1. First Aid will be administered, as necessary
2. The parents will be contacted
3. An injury report will be completed, with one copy given to you and one copy placed in your child's file.

For children who sustain a minor injury that may require medical attention:

1. First aid will be administered, as necessary
2. The parents or authorized person will be contacted
3. In the event that a parent or authorized person cannot be reached;
 - a. The child's physician will be consulted for assistance
 - b. 911 will be activated, if necessary
4. An injury report will be completed, with one copy given to you and one copy placed in your child's file and called in to child care regulations.

For Children requiring prompt medical attention the following steps will be followed

1. CPR and/or First Aid will be administered, as necessary
2. 911 will be activated if the injury is serious or life threatening
3. The parents or authorized person will be contacted
4. If the parents or authorized person cannot be reached, the physician listed on the child's emergency information will be contacted
5. An injury report is completed, a copy is given to the parents, and a call is made to child care regulations.

Immunizations/ Exemptions

Each child in care must have current and up to date immunizations and then continue to meet applicable immunization requirements specified by Texas Department of State Health Services. This requirement applies to all children in care from birth through 14 years of age. With each immunization, please turn in a current copy of your record. This includes any immunization exemptions or exceptions. All immunizations required for the child's age must be completed by the date of admission, unless:

- (1) The child is exempt or excepted from an immunization.
- (2) The child is homeless or a child in foster care and is provisionally admitted for up to

30 days if evidence of immunization is not available. Then the child needs to seek an appropriate health-care professional to obtain the required immunizations. Current immunization requirements can be found at <http://www.immunizetexas.com>

Exemptions or exceptions:

(A) A child may be exempt from immunization requirements for a medical reason or reason of conscience, including a religious belief. To claim an exemption, the person applying for the child's admission must meet criteria specified by the Department of State Health Services.

***We will accept medical exemptions that are signed by a US-licensed MD or DO and clearly state a medical reason the person cannot receive specific vaccines. Unless the exemption states a lifelong condition, the exemption is only valid for one year.**

***For religious or reason of conscience exemption, we will need a completed, signed and notarized affidavit on a form provided by the department stating that the child's parent, legal guardian, or the student declines vaccinations for reasons of conscience, including because of the person's religious beliefs. The form must be submitted to LC Childcare within 90 days from the date it is notarized. The affidavit will be valid for a two-year period from the date of notarization. A child or student who has not received the required immunizations for reasons of conscience, including religious beliefs, may be excluded from school in times of emergency or epidemic declared by the commissioner of the department. To obtain an affidavit, visit this website:**

<https://co-request.dshs.texas.gov>

(B) For some diseases, a child who previously had a disease and is accordingly naturally immune from it may qualify for an exception to the immunization requirements for the disease. To claim this exception, the person applying for the child's admission must meet the criteria specified by the DSHS.

Hearing & Vision Screening Children 4 years and older must have a vision and hearing screening. A copy of that screening from their doctor must be turned in for our records.

Diaper Policy It is the parent's responsibility to provide diaper cream for their child. Diapers are checked frequently, every two hours or more as needed. Diapers containing bowel movements (BMs) are changed immediately. The diaper changing tables are cleaned and disinfected between each diaper change and the hand washing of the childcare provider and child is performed after each diaper change.

Toilet Training

We are more than happy to encourage potty training as long as the child is ready (typically between 2 and 3 years old). The initial start of potty training needs to be done at home for at least two weeks with success before it can be effectively started at daycare. Parents will be required to supply pull-ups during this time. **Children will be**

allowed to come to daycare in cotton training pants/underwear after they have been accident free for at least two weeks in pull-ups. Communication between parents and the daycare provider is imperative for a successful transition from diapers to toilet. This training includes wiping with toilet paper and handwashing. All of these skills are useful in preparation for kindergarten where children are responsible for self-care.

Meals/Snacks

Parents provide lunch for their children. LC Childcare provides snacks (for ages 17 months +1 day and up) that meet the requirements of the Child and Adult Care Food Program. Milk and water will be served with snacks. Your child will also have their water bottle accessible to them all day. The snacks for each week constantly vary to ensure the children receive a well-balanced diet. The children are offered the food, but they will not be forced to eat. It is our goal to offer nutritious snacks to the children in our care, as nutrition is a vital part of a child's health. Children need to eat well-balanced meals to meet their daily energy needs and to help them build strong bodies and minds. We know that the good food habits a child develops will help them prevent cavities, iron deficiency anemia, and obesity, etc. - all common nutritional problems in young children.

*Please note that all lunches and snacks may be brought from home. However, LC Childcare will not be responsible for its nutritional content or for meeting the child's daily food needs. Please do not bring sugary foods or fast food.

Special Diets

If your child has any particular dietary needs resulting from being a vegetarian, having allergies, certain religious beliefs, or even non-religious beliefs, and so on, then we must be informed and obtain a doctor's note stating the fact when applicable. At that time, it will be determined if your child can participate in the nutrition program. Certain meals and different types of foods can usually be substituted in place of in order to still fulfill the dietary requirements of the nutrition program. However, if a solution is not reached between the parent, the provider, and the child nutrition program with regards to their rules and regulations, then all of the child's snacks will need to be provided for by the parent.

Toys We have well-organized, separate, age appropriate toys for the toddler and infants. Infants will not be allowed to be around or play with small objects and toys. **Please do not bring your child's toys to daycare except on designated sharing/show and tell days.** As much as we try to encourage sharing, this seldom works when it is the child's own personal toy. It only causes problems between them and the other children. Never send your child to daycare with toy weapons or choking hazards.

Behavior Management & Discipline

See Form 1099 attached. The discipline of a child is achieved through patience, consistency, and positive reinforcement. Our goal is to teach the children that are in our

care manners, kindness and the importance of being respectful to others. We believe the example the provider sets speaks much louder than just words. At the same time, the children are explained the rules of the daycare frequently, so they know what's to be expected of them. Once a child is old enough to understand the rules and disobeys them by exhibiting inappropriate behavior (ex. include hitting, aggression, etc.), hurting others, or damaging property, the following developmentally appropriate guidance techniques will be used:

* **Redirection:** The child is redirected to another activity and given an opportunity to try again at another time.

* **Last Resort:** When a child's behavior is continually upsetting or dangerous to others, a conference will be called with the parents. If the problems cannot be resolved, arrangements will have to be made for the child to go elsewhere for care.

Note: Sometimes if both a parent and a provider are both in the same area (examples would be during drop-off and pick-up times) a child may forget the rules or test the boundaries. Please help show your child that you respect LC Childcare, by reminding them that the rules still apply when you are around. We will also remind them of the rules and correct them if needed.

Cleanliness

LC Childcare takes the well-being of your child very seriously and works hard to provide an environment that is as healthy as possible. We thoroughly clean surfaces that children come into close contact with by using soap and water and the appropriate sanitizing solution. The high chairs are cleaned between each use and the diaper changing tables are cleaned and disinfected between each diaper change. Toys are cleaned and disinfected often. Hand washing is the single most effective practice in preventing the spread of germs. We wash our hands many times throughout the day, as well as the children's hands before and/or after engaging in a variety of different activities.

Reporting Child Abuse All employees at LC Childcare are required by law to report any suspected incidents of possible child abuse or neglect. Your child can be questioned by child protective services at any time without your consent. You may contact the local licensing office at 817-321-8604 or even file a complaint by phone or website for Abuse/Neglect.

Child Abuse Hotline: 1-800-252-5400 (Available 24 hr/day)

http://www.dfps.state.tx.us/Contact_Us/report_abuse.asp

Emergency Preparedness

Evacuation procedures will be posted in every room and monthly drills will be performed.

Security will be notified in the event of an emergency and teachers have the responsibility of notifying security and the child care front office in the event of a threat or incident such as the ones listed below.

Tornado/bad weather- Children will relocate to the conference rooms A, B, and C, the choir room and/or stairwells where they will duck and cover. Infants will be rolled into these designated areas.

Communicable disease outbreak- In the event of an outbreak, the Director or person in charge will notify the Health Department and Child Care Licensing to inform them of the situation and ask for instructions and guidelines to follow for specific illness or outbreak. The Director or person in charge will inform all staff members of instructions and guidelines and require them to follow the same. The Director or person in charge will also notify all parents about the situation in writing within 48 hours as required by child care regulations.

Lockdown- Full information on our procedures can be found in our Emergency Preparedness Plan. Parents may request to view this at any time.

Accident- The teacher will comfort the child by speaking in a low, quiet voice. Then they will apply first aid as needed. They will call the office if they need further assistance and/or to tell the Director or person in charge to call 911 and notify security. If the child is bleeding profusely, pressure will be applied to stop the bleeding. If injury is to the head or face, it will be reported to the office immediately - even if it is minor. An Injury Report will be completed and given to the Director to sign immediately. Parents will sign this at pick-up time. The teacher will turn the Injury Report into the Director or person in charge before they leave on the same day. In the event of serious illness or injury involving an adult, the office will be contacted and the Director or the designated person in charge will call 911 and/or the person's emergency contact.

Illness- The child will be asked, "What doesn't feel good?" Teachers will contact the front office and have the child's temperature taken. If the fever is over 100 degrees, the Director or person in charge will contact the parent. If there is no fever, teachers will make the child comfortable and keep an eye on him/her. If the child complains of pain, teachers will ask him/her to point with one finger to where it hurts the most and then investigate that spot for injury or discoloration and call the office. In the case of light vomiting or mild diarrhea: If no pain, teachers will call the office after the third episode.

Explosion, chemical spill or gas leak that occurs INSIDE the facility- Teachers will turn off the A/C and unplug electrical devices. Teachers will keep children seated on the floor and calm. They will remain prepared to evacuate if told to do so by the Director, person in charge, security, or emergency personnel.

Bomb threat/other threat- Full information on our procedures can be found in our Emergency Preparedness Plan. Parents may request to view this at any time.

Off-site evacuation and relocation- Children will be evacuated to the baseball field next to the Risen Nation church building. Infants will be wheeled in their cribs and all other children will walk. Depending on the situation, the city may also send transportation vehicles. **For distance evacuations, we will relocate to the Watauga Community Center at 7901 Indian Springs Rd, Watauga, TX 76148. The phone number of this location is (817)514-5828.** After all children and staff have been relocated to the evacuation site, are safe, and had all their needs taken care of, the Director and Assistant Director will designate staff to contact parents and notify them of the situation. The Director will be the contact person for emergency personnel and parents. The center's usual verification process for allowing adults to pick up children from the center will be used at the evacuation site. (i.e. only persons listed on the child's enrollment form as authorized to pick up will be allowed to do so after showing photo ID.)

Fire- When we are made aware of a fire or when an alarm sounds, we will quietly say, "Fire drill boys and girls, line up at the door please." We will not attempt to put out the fire unless it is between staff and a child or preventing exit. Everyone will proceed to the proper fire exit and exterior meeting place as designated on the floor plan in the classroom. Infant teachers will place all of the children in cribs and all other children will walk. **The exterior meeting place will be the main parking lot on the Denton Highway side.** The fire department, Director or person in charge will tell us when staff and the children can re-enter the building or when we may begin off-site evacuation procedures.

Learning and Fun

For ages two through five, we offer a structured preschool curriculum. It is a professionally planned preschool curriculum designed to be used in childcare homes and centers. This on-going preschool program is offered Monday through Friday and is both entertaining and educational. Your child will enjoy activities ranging from art and craft projects to games, songs, finger plays, storytelling, creative dramatics, exercises, science, shapes, numbers, colors, alphabet, and much more through various monthly themes. Some of these projects will be taken home to share with you, and others will be group activities that you can ask about. We know that children learn best by "doing". Therefore, the activities the children participate in are developmentally appropriate, concrete, hands-on, and most of all fun, because we believe that learning is an exciting experience.

For ages 24 months and younger we work on and with the following: throughout each day we practice on large and small motor skills by reaching, grasping, rolling, sitting, crawling, standing, walking, climbing, throwing, catching, kicking, cooing and talking; whichever developmental stage your child happens to be in at the time. Infants and toddlers learn through play by utilizing flash cards, books, numbers, shapes, colors, the alphabet, stacking blocks, puppets, age-appropriate toys, and much more. We

encourage participation, but the child will not be forced to participate. Most importantly, our goal is to make learning for all ages fun and non-intimidating. It is our hope that both you and your child will be as enthusiastic as we are about our program.

Activities

We know that children learn through play. Because of this, we do not underestimate its importance on a growing child's mind, body and spirit. Therefore, the children under our care receive lots of opportunities for both free-play and structured-play throughout each day. During structured-play, we primarily have only one group of toys or activities at a time in order to allow the children to concentrate fully on each thing that they do. Age appropriate activities will be scheduled with the flexibility allowed to respond to the needs of each individual child and their various ages. Activities that we and the children participate in, include, but are not limited to the following.

Indoor activities: books and story-time, blocks, circle-time, tumbling exercises, lacing, puzzles, music and dancing, dress up, play food, interactive stuffed animals, cars/trucks/planes, arts and crafts, flash cards, animals/dinosaurs, trains, musical instruments, balls, dolls, various learning toys, musical instruments, various games, song games, play dough, coloring, sing along story books, painting, board games, puppets, Simon-says, and singing.

Outdoor activities: climbing, sliding, jumping, running, balls, jump rope, racing, parachute, catch, bubbles, follow the leader, ride-on toys, wagons, tunnels, neighborhood walks, exploring nature/weather, soccer, and yes, falling. As you know, children play hard and will get some bumps and bruises from time to time. We do our best to limit the amount of times this occurs, with constant supervision and watchful eyes. Due to the safe environment/toys we have surrounded ourselves with, we hope to prevent any injuries before they can happen.

Weather permitting, we play outdoors every day.

LC Childcare understands the value and importance of physical activity and outdoor play. Some benefits include better moods, reduced stress levels, more naturally attuned sleep rhythms, and the enhanced opportunity to develop a lifelong connection to nature. Everyday (weather permitting), infants will enjoy 1.5 hours of outdoor time, toddlers will have 2 hours of outdoor time, and preschoolers will enjoy 1 hour and 45 minutes of outdoor time. Children will engage in both structured and unstructured physical activities including the activities listed above. These activities will take place on walks around the building and in our playground area. Parents must make sure that children wear the appropriate footwear and clothing that allows for them to engage in physical activities freely and safely. Sneakers and seasonally appropriate clothing such as sweaters and long pants in the winter support your children's need for outdoor fun! On days where extreme weather conditions prohibit or limit outdoor play, the neighborhood common area will be used as a space for children to play freely as a substitute for being outdoors.

***Since children will be engaging in lots of outdoor play, please do not bring your child to the center wearing open-toed shoes or Crocs. Close-toed sneakers are required.**

Daily Schedule This schedule is meant to give you an idea of your child's day. Actual times and activities may vary depending on time of the year, weather, age and temperament of the children. Age appropriate activities are scheduled with the flexibility allowed to respond to the needs of each individual child and their various ages (potty times, diaper changing).

Infant Daily Schedule

6:30-7:30	Welcome! Good Morning! Children arrive, teachers greet parents and interact with the babies. Sit babies in your lap and offer them rattles, chew toys, rock them and sing to them, show them toys that have lights and music, lay the baby under a play gym on a thick baby safe play mat.
7:30-8:30	Play time, floor time, tummy time, play gym or snuggles and singing.
8:30-9:00	Breakfast for older babies/bottles offered to younger babies, holding, snuggling, rocking, singing or reading.
9:00-9:15	Diaper routine
9:15-9:30	Touch and sensory exploration activities with discovery baskets
9:30-10:00	Outdoor time, stroller walks
10:00-11:00	Diaper routine then nap time

11:00-12:00	Lunch time for older babies, bottles offered to younger babies, holding, snuggling, rocking, singing, or reading
12:00-1:00	Diaper routine then afternoon nap
1:00-2:00	Diaper routine for older babies, bottles offered to younger babies, holding, snuggling, rocking, singing, or reading
2:00-3:00	Outdoor time, stroller walks
3:00-4:00	Play time, floor time, tummy time, play gym or snuggles and singing.
4:00-5:30	Diaper routine then play time. Greet parents & say goodbye for the day.

Please keep in mind: This schedule is only a general guideline. This schedule is flexible and will be changed to meet the baby's needs. Parents are welcome to drop in anytime.

Naps, snacks, lunch and bottles will be adjusted to the baby's own schedule.

Outdoor play will depend on the weather.

Diapers are changed every 2 hours or more often if needed.

Toddler Daily Schedule

6:30-7:30	Drop off, free play, snuggle time and getting settled for the day
7:30-8:30	Continued drop off snuggle time and story book time
8:30-9:00	Diaper changes

9:00-9:30	Independent play time/ play centers
9:30-10:15	Circle time (morning routine + songs)
10:15-10:30	Snack time
10:30-11:30	Outdoor play + physical activity
11:30-12:00	Lunch
12:00-1:00	Sensory or Art Activity
1:00-1:30	Story time books + songs
1:30-2:30	Nap time
2:30-3:00	Afternoon snack
3:00-4:00	Group play, outside time
4:00-4:30	Closing circle
4:30-5:30	Free choice time, games and centers. Say goodbye until tomorrow.

Preschool/ Kindergarten Daily Schedule

6:30-7:30	Welcome! Good Morning! Children arrive, teachers greet parents and interact with the preschoolers, coloring, table toys, play dough, puzzles, etc.
7:30-7:45	Wash up and bathroom routine
7:45-8:45	Circle Time / Group Time
8:45-9:15	Arts and Crafts
9:15-9:45	Outside Play
9:45-10:00	Snack
10:00-11:00	Science and Discovery
12:00-1:00	Bathroom Routine and Lunch
1:00-1:30	Outside play
1:30-1:45	Clean up bathroom routine, get ready for naps
1:45-3:15	Naps
3:15-4:00	Snacks
4:00-4:45	Outside play
4:45-5:30	Free play, play dough, coloring, cutting, table toys. Say goodbye until tomorrow.

Nap Time

LC Childcare follows the Safe Sleep guidelines as outlined in Form 2550 for infant nap times. LC Childcare will always put infants to sleep on their backs unless you provide an Infant Sleep Exception form 2710 signed by the infant's health care professional.

Toddlers/ Preschoolers sleep on mats provided by parents. Nap time for children 24 months and older is during the time between 1:30 p.m. and 3:15 p.m. each day. Typically, children 24 months and younger will take a morning nap as well, moving toward a one nap a day schedule between 18 months and 24 months of age. Typically, children 6 months and younger may need a third nap during the day, which can be incorporated into their late afternoon schedule. Please see your child's schedule for their class' nap times.

The State of Texas requires that all children under the age of five at least have a rest period every day. No child will ever be forced to sleep; however, they are encouraged to remain quiet and on their mat during this time.

Teacher/Parent Communication

It is important that you feel comfortable with our policies, procedures and your child's care. If you do not understand something, have a concern, or you feel uncomfortable with one or more of our policies and/or procedures, it is important that you express that to us before enrolling your child by either calling us or speaking directly to us.

Appointments are available via Calendly and we strongly recommend you set up an appointment. Lifestyle Christianity Child Care's goal is to provide the best possible care. Feel free to communicate any needs, wants and/or concerns regarding your child. **It is only through good parent/provider interaction that good quality, nurturing care can be achieved.**

Liability Insurance

LC Childcare has liability coverage through State Farm Insurance for unforeseen incidents.

Thank you for the opportunity to work with you and care for your little one.

Note: By signing the Policies/Handbook and the Enrollment Application, it is understood that all of the policies and procedures of LC Childcare handbook have been read, understood and agreed upon. I understand this is a legal and binding contract.

Parent(s) or Guardian(s) Signature: _____ Date: _____

Signature of Daycare Provider: _____ **Date:** _____

I, _____ have received a copy of the following policies. Sign: _____ **Date:** _____

LC Childcare Operational Policies

Hours, days, and months of operation:

LC Childcare is open Monday- Friday 6:30 a.m. to 5:30 p.m. We will be closed Thanksgiving day and the following Friday. LC Childcare will also be closed from December 24- January 2nd and will reopen January 3rd.

Release of children:

When a child is enrolled in the center, we will require the information of three people that will be responsible for picking up the child. Each child's file will have photos to identify each designated pick-up person. No one other than the parent or person(s) designated by the parents/ primary caregiver will be allowed to pick up the child without advanced written, texted or verbal permission indicating the person's name and relationship to the child. We will request photo identification of the individual(s) granted permission to pick up the child. In the case where there is a court order keeping one parent away from the child, we must have a copy of that order in our file to that effect. Otherwise, we cannot prevent the non-custodial parent from picking up the child.

Illness and Exclusion Criteria:

If a child becomes ill during daycare hours: the child will be moved away from the other children into the sick bay area in the front office and the parents will be contacted to pick up their child. The child will be attended to until the parent can make arrangements to pick up the child.

Note: Once the child is removed from daycare due to an illness, they may not return to daycare until the symptoms that required removal are no longer present. The child must be fever free without the help of medication for at least 24 hours. The child must also be void of any contagious disease, unless accompanied by a doctor's note stating that the illness in question is not contagious, and the child is otherwise feeling well enough to participate in our daily schedule.

Guidelines for Children Requiring Exclusion from Daycare: A child with any of the following illnesses must be completely free of any symptoms before returning to daycare. If the child is taking antibiotics for an illness, the child may return to daycare after the initial 24 hours of beginning antibiotics as long as he or she has no fever (under 100°F under the arm and inside ear, under 101°F orally), is no longer contagious, and is otherwise feeling well enough to participate in our daily schedule. Additionally, if a child has two runny bowel movements that cannot be contained in a diaper, they will be sent home until diarrhea-free for 24 hours.

Signs of illness include the following; unusual lethargy, irritability, persistent crying for no reason, runny nose (more runny and excessive than a clear runny nose), cough (more than slight), difficulty breathing, diarrhea, vomiting, mouth sores, rashes (note from doctor stating rash is non-contagious is ok), pink eye, chicken pox, mumps, measles,

roseola, hepatitis A, impetigo, lice, ringworm, scabies, strep throat, scarlet fever, tuberculosis, shingles, and any other contagious disease or rash. Any child with a fever of 101°F or above orally (in the mouth), 100 °F axillary (under the arm), or 100 °F tympanic(ear) may not attend daycare.

We will notify parents of children who have been exposed to certain contagious diseases. Please notify us if your child becomes infected, so a note can be posted.

Procedures for dispensing medication:

We will dispense certain doctor prescribed medications to the children, given that they are no longer contagious, and only if the medication consent form has been signed. LC Childcare will only dispense prescription medication if it is required three or more times a day, in which case we will dispense the middle dose. Parents will be responsible for dispensing the morning and evening doses at home.

Over the counter medications such as Tylenol for teething or pain associated with bumps or bruises (not to bring down a fever) will be considered on a case by case basis. LC Childcare can deny the dispensation of over the counter medications at any time.

We will document medication dispensed with a medication log. The parents will be required to sign in and out the medication. LC Childcare will notate the child's name, the name of the medication, the date and time that the dosage was given, and the full name of the employee that dispensed the medication.

Procedures for handling medical emergencies:

Emergency information is kept on file at the daycare. In case of illness or injury, parents will be notified by phone at the telephone number that is on file.

For children who sustain a minor injury that does not require medical attention, LC Childcare will take the following steps:

1. First Aid will be administered, as necessary
2. The parents will be contacted
3. An injury report will be completed, with one copy given to you and one copy placed in your child's file.

For children who sustain a minor injury that may require medical attention:

1. First aid will be administered, as necessary
2. The parents or authorized person will be contacted
3. In the event that a parent or authorized person cannot be reached;
 - a. The child's physician will be consulted for assistance
 - b. 911 will be activated, if necessary
4. An injury report will be completed, with one copy given to you and one copy placed in your child's file and called in to child care regulations.

For Children requiring prompt medical attention the following steps will be followed:

1. CPR and/or First Aid will be administered, as necessary
2. 911 will be activated if the injury is serious or life threatening

3. The parents or authorized person will be contacted
4. If the parents or authorized person cannot be reached, the physician listed on the child's emergency information will be contacted.
5. An injury report is completed, a copy is given to the parents, and a call is made to child care regulations.

Preventing and responding to emergencies due to food or an allergic reaction

Each parent of a child with allergies will fill out a Food Allergy & Anaphylaxis Emergency Care Plan. Each classroom and area where food is prepared contains a current list of students with allergies. This list will remain covered to maintain confidentiality. Based on the Food Allergy & Anaphylaxis Emergency Care Plan, teachers will know the child's name, the food that they are allergic to, signs and symptoms of the child having a reaction, and what first aid steps must be administered if there is a reaction. In the lobby area, we will also have a generic list of allergies present at the school.

Procedures for parental notifications

Parents/ primary caregivers will be contacted via phone, text, and email with any information regarding their child in non-emergency and emergency situations. We will notify parents of children who have been exposed to certain contagious diseases by posting a notice outside of each classroom. Parents will also be notified of important information via the parent bulletin board.

Discipline and guidance

See Form 1099 attached. We will use praise and encourage good behavior instead of focusing only upon unacceptable behavior. We will also be reminding children of behavior expectations daily by using clear, positive statements. Redirection is assigning or directing to a different place or purpose. We will redirect the children using positive statements. Throughout the day, children will be engaged in many activities and have plenty of opportunities to interact and play with lots of interesting toys. Time outs will not be used.

Suspension and expulsion of children

The first two weeks after enrollment will be regarded as a trial period, in which case either party may terminate the contract without notice. If a child's behavior is continually upsetting or dangerous to others, a conference will be called with the parents. If the problems cannot be resolved, arrangements will have to be made for the child to go elsewhere for care.

Safe sleep policy for infants from birth through 12 months old

See attached Form 2550.

Meals and food service practices

Parents provide lunch for their children. LC Childcare provides snacks (for ages 17 months +1 day and up) that meet the requirements of the Child and Adult Care Food Program. Milk and water will be served with snacks. Children will also have their water

bottle accessible to them all day. The snacks for each week constantly vary to ensure the children receive a well-balanced diet. The children are offered the food, but they will not be forced to eat. It is our goal to offer nutritious snacks to the children in our care, as nutrition is a vital part of a child's health. Children need to eat well-balanced meals to meet their daily energy needs and to help them build strong bodies and minds. We know that the good food habits a child develops will help them prevent cavities, iron deficiency anemia, and obesity, etc. - all common nutritional problems in young children.

*Please note that all lunches and snacks may be brought from home. However, LC Childcare will not be responsible for its nutritional content or for meeting the child's daily food needs. Please do not bring sugary foods or fast food.

Immunization requirements for children

Each child in care must have current and up to date immunizations and then continue to meet applicable immunization requirements specified by the Texas Department of State Health Services. This requirement applies to all children in care from birth through 14 years of age. With each immunization, please turn in a current copy of your record. This includes any immunization exemptions or exceptions. All immunizations required for the child's age must be completed by the date of admission, unless:

- (1) The child is exempt or excepted from an immunization.
- (2) The child is homeless or a child in foster care and is provisionally admitted for up to 30 days if evidence of immunization is not available. Then the child needs to seek an appropriate health-care professional to obtain the required immunizations.

Current immunization requirements can be found at <http://www.immunizetexas.com>

Exemptions or exceptions:

(A) A child may be exempt from immunization requirements for a medical reason or reason of conscience, including a religious belief. To claim an exemption, the person applying for the child's admission must meet criteria specified by the Department of State Health Services

***We will accept medical exemptions that are signed by a US-licensed MD or DO and clearly state a medical reason the person cannot receive specific vaccines. Unless the exemption states a lifelong condition, the exemption is only valid for one year.**

***For religious or reason of conscience exemption, we will need a completed, signed and notarized affidavit on a form provided by DSHS stating that the child's parent, legal guardian, or the student declines vaccinations for reasons of conscience, including because of the person's religious beliefs. The form must be submitted to LC Childcare within 90 days from the date it is notarized. The affidavit will be valid for a two-year period from the date of notarization. A child or student who has not received the required immunizations for reasons of conscience, including religious beliefs, may be excluded from school in times of emergency or epidemic declared by the commissioner of the department. To obtain an affidavit, visit this website: <https://co-request.dshs.texas.gov>**

(B) For some diseases, a child who previously had a disease and is accordingly

naturally immune from it may qualify for an exception to the immunization requirements for the disease. To claim this exception, the person applying for the child's admission must meet the criteria specified by the DSHS.

Hearing and vision screening requirements

Children 4 years and older must have a vision and hearing screening. A copy of that screening from their doctor must be turned in for our records.

Enrollment Procedures and policy changes

The following forms are required by child care regulations and LC Childcare and need to be read, completed and/or signed prior to enrollment:

1. Parent Handbook of Policies (Read/sign/date. You will receive a copy)
2. Admission Information (Complete/sign/date)
3. Statement of Health (Physician provided)
4. Immunization Record (Physician provided)
5. Permission to Photograph (Read/complete/sign/date)
6. Food Allergy & Anaphylaxis Emergency Care Plan (If needed)
7. Infant Safe Sleep (Read/sign/date)
8. Infant Feeding Instructions (Updated monthly)
9. Infant Sleep Exception/Health Care Professional Recommendation (If needed)
10. Discipline Policy (Read/sign/date)
11. Copy of both parents' drivers' licenses
12. Child's Birth Certificate
13. Bug Spray and Sunscreen Permission

In the case that a change is made to LC Childcare's policy, all employees will be notified of any changes and parents will also be notified in writing of the changes. At least one copy of the updated operational policies or child-care enrollment agreement will be signed and dated for each family and kept in the child's record.

Indoor and outdoor activities

Indoor activities that we will be participating in include:

books and story-time, blocks, circle-time, tumbling exercises, lacing, puzzles, music and dancing, dress up, play food, interactive stuffed animals, cars/trucks/planes, arts and crafts, flash cards, animals/dinosaurs, trains, musical instruments, balls, dolls, various learning toys, musical instruments, various games, song games, play dough, coloring, sing along story books, painting, board games, puppets, Simon-says, and singing.

Outdoor activities that we will be participating in include:

climbing, sliding, jumping, running, balls, jump rope, racing, parachute, catch, bubbles, follow the leader, ride-on toys, wagons, tunnels, neighborhood walks, exploring nature/weather, and soccer.

LC Childcare understands the value and importance of physical activity and outdoor play. Some benefits include better moods, reduced stress levels, more naturally attuned sleep rhythms, and the enhanced opportunity to develop a lifelong connection to nature.

Every day (weather permitting), infants will enjoy 1.5 hours of outdoor time, toddlers will have 2 hours of outdoor time, and preschoolers will enjoy 1 hour and 45 minutes of outdoor time. Children will engage in both structured and unstructured physical activities including the activities listed above. These activities will take place on walks around the building and in our playground area. Parents must make sure that children wear the appropriate footwear and clothing that allows for them to engage in physical activities freely and safely. Sneakers and seasonally appropriate clothing support your children's need for outdoor fun! On days where extreme weather conditions prohibit or limit outdoor play, the neighborhood common area will be used as a space for children to play freely as a substitute for being outdoors.

***Since children will be engaging in lots of outdoor play, children must not wear open-toed shoes or Crocs. Close-toed sneakers are required.**

Bug spray and sunscreen

Bug spray and sunscreen will not be applied unless it is supplied by the parent or guardian and is in spray-on form. LC Childcare will require a signed permission slip to apply the spray(s) with instructions as to when it should be applied.

Teacher/Parent Communication

It is important that parents feel comfortable with our policies, procedures and their child's care. If you do not understand something, have a concern, or you feel uncomfortable with one or more of our policies and/or procedures, it is important that you express that to us before enrolling your child by either calling us or speaking directly to us. Appointments can be made on Calendly and we strongly encourage parents to use this tool in order to communicate with us.

LC Childcare's goal is to provide the best possible care. Feel free to communicate any needs, wants and/or concerns regarding your child. It is only through good parent/provider interaction that good quality, nurturing care can be achieved.

Parent Participation

LC Childcare parents are encouraged to participate in our center's operation and activities. Check the parent bulletin board to stay updated on upcoming events and feel free to stop by the front office if there are ever any comments, concerns, or questions. We are happy to help.

Licensing inspection report and minimum standards

LC Childcare is subject to inspection by state. The latest licensing inspection report will be posted on the parent bulletin board for your viewing at any time, or you may choose to visit the state's website to view. Find the Minimum Standards and our latest inspection report online at https://www.dfps.state.tx.us/child_care/ There will also be a filed copy of Minimum Standards at the daycare for review at any time. You may contact the local licensing office at 817-321-8604 with any questions.

Child Abuse Hotline: 1-800-252-5400

Emergency preparedness plan

Evacuation procedures will be posted in every room. We will conduct monthly drills.

In all situations in this Emergency Preparedness Plan, "Director" refers to the manager on duty. In the Director's absence, the Assistant Director on duty assumes the role of Director and then designates another staff member to assume the responsibilities of the Assistant Director. In all situations in this Emergency Preparedness Plan, the Director or designated person in charge will notify Child Care Licensing and/or the Health Department and/or call 911 as each situation dictates. Security will also be notified in the event of an emergency and teachers have the responsibility of notifying security and the child care front office in the event of a threat or incident such as the ones listed below. In all situations in this Emergency Preparedness Plan, the Director or designated person in charge may delegate any portion of his/her duties to other staff members, volunteers or emergency personnel as he/she deems necessary.

Tornado/Bad Weather

In this event, we will stay calm and watch the kids, not the situation. Teachers will get their sign in/out and transition sheets and stuff it into their clothing. They will also grab their flashlight. Next, they will take all their children to the conference rooms A, B, and C, the choir room, and/or stairwells. Infants will be wheeled in cribs and all other children will walk. We will have the children sit as close together as possible and have the children duck and cover. This will be familiar to the children since it will be practiced each time we have a severe weather drill.

In the infant classroom, we will place the babies in two cribs and cover the top with a mattress from another crib. We will place the mattress sideways across top of the crib. Then we will roll the cribs to the designated safe zone and infant teachers will huddle next to the cribs. We will stay there until advised that the bad weather has passed. We will quietly sing songs with the children to help them keep calm. The Director in charge will monitor local weather stations and the weather alert radio for updates. Staff will also follow any instructions from security.

Communicable Disease Outbreak

All staff members will vigilantly follow policies and procedures regarding diaper changes, toileting, hand washing, food preparation and general common sense measures such as keeping surfaces clean, changing bedding, teaching children how to cover coughs and sneezes, etc. to prevent the spread of germs that cause illness in the first place. In the event of an outbreak, the Director or person in charge will notify the Health Department and Child Care Licensing to inform them of the situation and ask for instructions and guidelines to follow for specific illness or outbreak. The Director or person in charge will inform all staff members of instructions and guidelines and require them to follow the same. The Director or person in charge will also notify all parents about the situation in writing within 48 hours as required by child care regulations. All staff are to follow the school's confidentiality policies when speaking of the above outbreak. Any violation of the confidentiality policy is grounds for immediate termination.

Lock Down (includes weapon, hostage incident, intruder, trespassing, disturbance)

Parents may review our emergency preparedness plan at any time for information on lockdown procedures.

Accident

In case of an accident we will stay calm and make sure all children are supervised. If the teacher is alone, they will tell the child to sit down near them. The teacher will comfort the child by speaking in a low, quiet voice. Then they will apply first aid as needed. They will call the office if they need further assistance and/or to tell the Director or person in charge to call 911 and notify security. If the child is bleeding profusely, pressure will be applied to stop the bleeding. (In an extreme case, we will remove the child's shirt and use that.) If injury is to the head or face, it will be reported to the office immediately - even if it is minor. An Injury Report will be completed and given to the Director to sign immediately. Parents will sign this at pick-up time. The teacher will turn the Injury Report into the Director or person in charge before they leave on the same day. Teachers will keep the Injury Report confidential while it is in their presence. In the event of serious illness or injury involving an adult, the office will be contacted and the Director or the designated person in charge will call 911 and/or the person's emergency contact.

Illness

The child will be asked, "What doesn't feel good?" Teachers will contact the front office and have the child's temperature taken. If the fever is over 100 degrees, the Director or person in charge will contact the parent. If there is no fever, teachers will make the child comfortable and keep an eye on him/her. If the child complains of pain, teachers will ask him/her to point with one finger to where it hurts the most and then investigate that spot for injury or discoloration and call the office. In the case of light vomiting or mild diarrhea: If no pain, teachers will call the office after the third episode.

Explosion, chemical spill or gas leak that occurs INSIDE the facility

Teachers will close doors and turn off the air conditioner/heater. They will also turn off lights, computers, TV, radio, CD player, aquarium pumps or anything else that may cause a spark. They will keep children seated on the floor and calm. They will sing quiet songs or read stories. Teachers will remain prepared to evacuate if told to do so by the Director, person in charge or emergency personnel. If teachers detect a strong odor, they will show the children how to lift up and breathe through their shirts. If advised to evacuate, teachers will consider crawling to avoid strong fumes that are floating higher in the air.

Bomb threat or other threat

Full information on our procedures can be found in our Emergency Preparedness Plan. Parents may request to view this at any time.

Off-Site Evacuation and Relocation

Our primary responsibility is to keep the children safe. Teachers will keep their sign in/out sheet and transition sheets in their hands or stuff them into their clothing. If time allows, they will gather children's diaper bags, bottles, baby formula/food, and coats. Children will be evacuated to the baseball field next to the Risen Nation church building. Infants will be wheeled in their cribs and all other children will walk. Depending on the situation, the city may also send transportation vehicles. The Director will be responsible for keeping a charged cell phone with him/her and overseeing and directing the evacuation process. She/He is the last person to leave the building. The Assistant Director is responsible for taking the emergency binder (of permission slips and parent contact information), the first aid kit, emergency medication (i.e. insulin, epi pens, asthma medications), and a charged cell phone to the evacuation site so that he/she can be in charge of the evacuation site. The Director and Assistant Directors are aware of each cell phone number. **The evacuation and relocation site is the baseball field next to Risen Nation church for local evacuations. For distance evacuations, we will relocate to the Watauga Community Center at 7901 Indian Springs Rd, Watauga, TX 76148. The phone number of this location is (817)514-5828.** After all children and staff have been relocated to the evacuation site, are safe, and had all their needs taken care of, the Director and Assistant Director will designate staff to contact parents and notify them of the situation. Staff members will continue to supervise and take care of the children including entertaining them with songs, stories, games, etc. at the evacuation site. Staff will be watching the kids, not the situation. The Assistant Director will continue to supervise and take care of the needs of the staff. The Director will be the contact person for emergency personnel and parents. The center's usual verification process for allowing adults to pick up children from the center will be used at the evacuation site. (i.e. only persons listed on the child's enrollment form as authorized to pick up will be allowed to do so after showing photo ID.)

Fire

When we are made aware of a fire or when an alarm sounds, we will quietly say, "Fire drill boys and girls, line up at the door please." This should be familiar to them since teachers say it every month when we practice monthly fire drills. Our primary responsibility will be to get the children safely out of the building. We will not attempt to put out the fire unless it is between staff and a child or preventing exit. Teachers will get their sign in/out sheet and their transition sheet and keep it with them. They will then make a quick head count and make sure they have everyone. They will proceed to the proper fire exit and exterior meeting place as designated on the floor plan in the classroom. Infant teachers will place all of the children in cribs and all other children will walk. **The exterior meeting place will be the main parking lot on the Denton Highway side.** This is the same spot we will take the children each month during our fire drills. Teachers will do a name/face check once they are outside and check it

against their sign in/out sheet and transition sheet. If anyone is missing, they will tell the Director, person in charge, or a firefighter immediately, but never leave the children unsupervised. The children will be safe (out of the way of emergency vehicles and the fire) and supervised at all times. We will watch out for anthills, broken glass and other hazards. Staff will watch the kids, not the situation. The fire department, Director or person in charge will tell us when staff and the children can re-enter the building or when we may begin off-site evacuation procedures.

Nursing moms

We are happy to provide nursing mothers with a comfortable rocking chair in the nursery to nurse their child when they are at our center. Mothers have the right to breastfeed or provide breast milk for their child while in care.

Preventing and responding to abuse and neglect of children

Per state requirements, at least one clock hour of the annual training hours for staff must focus on prevention, recognition, and reporting of child maltreatment, including: Factors indicating a child is at risk for abuse or neglect, warning signs indicating a child may be a victim of abuse or neglect, procedures for reporting child abuse or neglect and community organizations that have training programs available to employees, children, and parents.

Employees and parents at LC Childcare will learn about issues regarding child abuse and neglect, identifying warning signs, and assessing risk factors through guest speakers, training, and informational posters around the child care facility. Parents and employees will also receive information on how to prevent child abuse and neglect with the help of guest speakers and informative posts to help guide them into the right decisions. Strategies for coordination between the center and appropriate community organizations will be listed at the bottom of informational posters in our center along with the steps parents need to take to obtain assistance and even report child abuse or neglect.

Prevention:

- Nurture your child.
- Make sure your child knows you love them even if they did something wrong.
- Ask for your child's opinion and ideas. What makes a good friend? Where is a place you would want to travel someday?

Help families under stress.

- Offer to babysit.
- Help a family member or friend with chores, errands, or lend a listening ear.

Know where to get help.

- Don't feel like you have to "do it all." Let your friends, family, or neighbors help. Don't be afraid

to ask for help. We all need help sometimes.

- Visit HelpAndHope.org. Share the information with a friend who might need help.

Protect your child.

- Listen to your child if they say they don't feel comfortable around someone.

- Tell your child to say "no" and "get away," and to tell you right away if anyone tries to touch or hurt them.

- Abusers often tell their victims to keep what they do a "secret." Teach your child the difference between a good secret, like a surprise party, and a bad secret, like something that makes them feel bad or uncomfortable. Make sure your child understands that it's OK to tell you "bad secrets."

Recognition:

There are four major types of child maltreatment: physical abuse, neglect, sexual abuse, and emotional abuse.

Physical Abuse is physical injury that results in substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child. The physical injury (ranging from minor bruises to severe fractures or death) can result from punching, beating, shaking, kicking, biting, throwing, stabbing, hitting, burning, choking, or otherwise harming a child. Such injury is considered abuse regardless of whether the caretaker intended to hurt the child.

Suspect Physical Abuse When You See:

- Frequent injuries such as bruises, cuts, black eyes, or burns without adequate explanations
- Frequent complaints of pain without obvious injury
- Burns or bruises in unusual patterns that may indicate the use of an instrument or human bite; cigarette burns on any part of the body
- Lack of reaction to pain

- Aggressive, disruptive, and destructive behavior
- Passive, withdrawn, and emotionless behavior
- Fear of going home or seeing parents
- Injuries that appear after a child has not been seen for several days
- Unreasonable clothing that may hide injuries to arms or legs

Neglect is failure to provide for a child's basic needs necessary to sustain the life or health of the child, excluding failure caused primarily by financial inability unless relief services have been offered and refused.

Suspect Neglect When You See:

- Obvious malnourishment
- Lack of personal cleanliness
- Torn or dirty clothing
- Stealing or begging for food
- Child unattended for long periods of time
- Need for glasses, dental care, or other medical attention
- Frequent tardiness or absence from school

Sexual Abuse includes fondling a child's genitals, penetration, incest, rape, sodomy, indecent exposure, and exploitation through prostitution or producing pornographic materials.

Suspect Sexual Abuse When You See:

- Physical signs of sexually transmitted diseases
- Evidence of injury to the genital area
- Pregnancy in a young girl
- Difficulty in sitting or walking
- Extreme fear of being alone with adults of a certain sex
- Sexual comments, behaviors or play
- Knowledge of sexual relations beyond what is expected for a child's age

- Sexual victimization of other children

Emotional Abuse is mental or emotional injury that results in an observable and material impairment in a child's growth, development, or psychological functioning. It includes extreme forms of punishment such as confining a child in a dark closet, habitual scapegoating, belittling, and rejecting treatment for a child.

Suspect Emotional Abuse When You See:

- Over compliance
- Low self-esteem
- Severe depression, anxiety, or aggression
- Difficulty making friends or doing things with other children
- Lagging in physical, emotional, and intellectual development
- Caregiver who belittles the child, withholds love, and seems unconcerned about the child's problems

Reporting Child Abuse : All employees at LC Childcare are required by law to report any suspected incidents of possible child abuse or neglect. Children can be questioned by child protective services at any time without parent consent. You may contact the local licensing office at 817-321-8604 or even file a complaint by phone or website for Abuse/Neglect.

Child Abuse Hotline: 1-800-252-5400 (Available 24 hr/day)

http://www.dfps.state.tx.us/Contact_Us/report_abuse.asp

Find local support at:

<https://www.getparentingtips.com/local-support/>

Vaccine-preventable diseases

No vaccines are required for caregivers at this time.

Open-door policy

LC Childcare has an open-door policy for all parents. This means they may stop by anytime during business hours unannounced to observe their child, the child-care center's program activities, the building, the premises, and the equipment. Of course, for safety purposes, our door will be locked. Parents are also free to call and check in on their child at any time. If necessary, please leave a message and the call will be

returned in a timely manner. Many parents will text their questions and that too works well.

Cell Phone/ Apple Watch Use

As it applies to all teachers, cell phones are not to be used when supervising children unless it is for the specific intent of speaking to office staff or security. This includes during recess and nap times. Cell phones should be placed on vibrate or silent mode. If there is an urgent need to answer the cell phone, teachers can let the front office know and they will be able to step outside and take a call. They may not answer personal calls or text messages inside the classroom.

We also want to remind teachers that using an Apple Watch for any other reason to check the time is not allowed. The less distractions there are to supervising children and keeping them safe, the better teachers can ensure they are doing their job to the best of their ability.

If these rules are repeatedly broken or dismissed, there will be corrective action taken.

Gang-free zone

Under the Texas Penal Code any area within 1,000 feet of a child-care center is a gang-free zone, where criminal offenses related to organized criminal activity are subject to a harsher penalty.

Note: By signing the LC Childcare Operational Policies, it is understood that all of the policies and procedures of LC Childcare Operational Policies have been read, understood and agreed upon. I understand this is a legal and binding contract.

Parent(s) or Guardian(s) Signature: _____ Date: _____

Liability Insurance Coverage

LC Child Care has liability coverage through State Farm Insurance for unforeseen incidents.

Parent's Name:

Parent's Signature & Date:

LC Child Care Photography/Social Media Permissions Form

Permission to Photograph

Child's Name:

Parent's Name and Signature:

Date

Permission to post on social media

Child's Name:

Parent's Name and Signature:

Date

Bug Spray and Sunscreen Permission

Child's Name:

Bug Spray / Sunscreen Brand Name:

Directions for application:

When to apply:

Parent name:

Parent Signature:

Date:

Name: _____ D.O.B.: _____

Allergic to: _____

 Weight: _____ lbs. Asthma: ☐ **Yes (higher risk for a severe reaction)** ☐ **No**

**PLACE
PICTURE
HERE**

NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. USE EPINEPHRINE.

Extremely reactive to the following allergens: _____

THEREFORE:

- ☐ If checked, give epinephrine immediately if the allergen was **LIKELY** eaten, for **ANY** symptoms.
- ☐ If checked, give epinephrine immediately if the allergen was **DEFINITELY** eaten, even if no symptoms are apparent.

FOR **ANY** OF THE FOLLOWING:
SEVERE SYMPTOMS



LUNG

Shortness of breath, wheezing, repetitive cough



HEART

Pale or bluish skin, faintness, weak pulse, dizziness



THROAT

Tight or hoarse throat, trouble breathing or swallowing



MOUTH

Significant swelling of the tongue or lips



SKIN

Many hives over body, widespread redness



GUT

Repetitive vomiting, severe diarrhea



OTHER

Feeling something bad is about to happen, anxiety, confusion

**OR A
COMBINATION**
of symptoms
from different
body areas.

1. **INJECT EPINEPHRINE IMMEDIATELY.**
2. **Call 911.** Tell emergency dispatcher the person is having anaphylaxis and may need epinephrine when emergency responders arrive.
 - Consider giving additional medications following epinephrine:
 - » Antihistamine
 - » Inhaler (bronchodilator) if wheezing
 - Lay the person flat, raise legs and keep warm. If breathing is difficult or they are vomiting, let them sit up or lie on their side.
 - If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.
 - Alert emergency contacts.
 - Transport patient to ER, even if symptoms resolve. Patient should remain in ER for at least 4 hours because symptoms may return.

MILD SYMPTOMS



NOSE

Itchy or runny nose, sneezing



MOUTH

Itchy mouth



SKIN

A few hives, mild itch



GUT

Mild nausea or discomfort

**FOR MILD SYMPTOMS FROM MORE THAN ONE
SYSTEM AREA, GIVE EPINEPHRINE.**

**FOR MILD SYMPTOMS FROM A SINGLE SYSTEM
AREA, FOLLOW THE DIRECTIONS BELOW:**

1. Antihistamines may be given, if ordered by a healthcare provider.
2. Stay with the person; alert emergency contacts.
3. Watch closely for changes. If symptoms worsen, give epinephrine.

MEDICATIONS/DOSES

Epinephrine Brand or Generic: _____

Epinephrine Dose: ☐ 0.1 mg IM ☐ 0.15 mg IM ☐ 0.3 mg IM

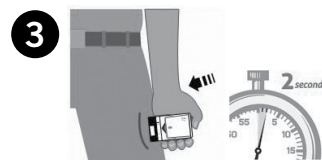
Antihistamine Brand or Generic: _____

Antihistamine Dose: _____

Other (e.g., inhaler-bronchodilator if wheezing): _____

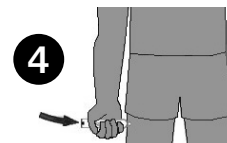
HOW TO USE AUVI-Q® (EPINEPHRINE INJECTION, USP), KALEO

1. Remove Auvi-Q from the outer case. Pull off red safety guard.
2. Place black end of Auvi-Q against the middle of the outer thigh.
3. Press firmly until you hear a click and hiss sound, and hold in place for 2 seconds.
4. Call 911 and get emergency medical help right away.



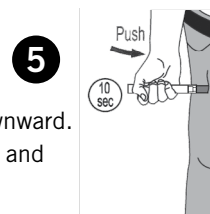
HOW TO USE EPIPEN®, EPIPEN JR® (EPINEPHRINE) AUTO-INJECTOR AND EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF EPIPEN®), USP AUTO-INJECTOR, MYLAN AUTO-INJECTOR, MYLAN

1. Remove the EpiPen® or EpiPen Jr® Auto-Injector from the clear carrier tube.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward. With your other hand, remove the blue safety release by pulling straight up.
3. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
4. Remove and massage the injection area for 10 seconds. Call 911 and get emergency medical help right away.



HOW TO USE IMPAX EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF ADRENALCLICK®), USP AUTO-INJECTOR, AMNEAL PHARMACEUTICALS

1. Remove epinephrine auto-injector from its protective carrying case.
2. Pull off both blue end caps: you will now see a red tip. Grasp the auto-injector in your fist with the red tip pointing downward.
3. Put the red tip against the middle of the outer thigh at a 90-degree angle, perpendicular to the thigh. Press down hard and hold firmly against the thigh for approximately 10 seconds.
4. Remove and massage the area for 10 seconds. Call 911 and get emergency medical help right away.



HOW TO USE TEVA'S GENERIC EPIPEN® (EPINEPHRINE INJECTION, USP) AUTO-INJECTOR, TEVA PHARMACEUTICAL INDUSTRIES

1. Quickly twist the yellow or green cap off of the auto-injector in the direction of the "twist arrow" to remove it.
2. Grasp the auto-injector in your fist with the orange tip (needle end) pointing downward. With your other hand, pull off the blue safety release.
3. Place the orange tip against the middle of the outer thigh at a right angle to the thigh.
4. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
5. Remove and massage the injection area for 10 seconds. Call 911 and get emergency medical help right away.



HOW TO USE SYMJEPI™ (EPINEPHRINE INJECTION, USP)

1. When ready to inject, pull off cap to expose needle. Do not put finger on top of the device.
2. Hold SYMJEPI by finger grips only and slowly insert the needle into the thigh. SYMJEPI can be injected through clothing if necessary.
3. After needle is in thigh, push the plunger all the way down until it clicks and hold for 2 seconds.
4. Remove the syringe and massage the injection area for 10 seconds. Call 911 and get emergency medical help right away.
5. Once the injection has been administered, using one hand with fingers behind the needle slide safety guard over needle.



ADMINISTRATION AND SAFETY INFORMATION FOR ALL AUTO-INJECTORS:

1. Do not put your thumb, fingers or hand over the tip of the auto-injector or inject into any body part other than mid-outer thigh. In case of accidental injection, go immediately to the nearest emergency room.
2. If administering to a young child, hold their leg firmly in place before and during injection to prevent injuries.
3. Epinephrine can be injected through clothing if needed.
4. Call 911 immediately after injection.

OTHER DIRECTIONS/INFORMATION (may self-carry epinephrine, may self-administer epinephrine, etc.):

Treat the person before calling emergency contacts. The first signs of a reaction can be mild, but symptoms can worsen quickly.

EMERGENCY CONTACTS — CALL 911

RESCUE SQUAD: _____

DOCTOR: _____ PHONE: _____

PARENT/GUARDIAN: _____ PHONE: _____

OTHER EMERGENCY CONTACTS

NAME/RELATIONSHIP: _____ PHONE: _____

NAME/RELATIONSHIP: _____ PHONE: _____

NAME/RELATIONSHIP: _____ PHONE: _____

Infant Feeding Instructions **Date** _____

Infant Name
DOB

Feeding instructions: Include Type of food and/or formula, and the amount of food Feeding times/frequency of feedings

Parent's Name
Parent's Signature
Caregiver Name
Caregiver Signature

Operational Policy on Infant Safe Sleep

This form provides the required information per minimum standards §746.501(9) and §747.501(6) for the safe sleep policy.

Directions: Parents will review this policy upon enrolling their infant at [redacted] and a copy of the policy is provided in the parent handbook. Parents can review information on safe sleep and reducing the risk of Sudden Infant Death Syndrome/Sudden Unexpected Infant Death (SIDS/SUIDS) at: <http://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/A-Parents-Guide-to-Safe-Sleep.aspx>

Safe Sleep Policy

All staff, substitute staff, and volunteers at [redacted] will follow these safe sleep recommendations of the American Academy of Pediatrics (AAP) and the Consumer Product Safety Commission (CPSC) for infants to reduce the risk of Sudden Infant Death Syndrome/Sudden Unexpected Infant Death Syndrome (SIDS/SUIDS):

- Always put infants to sleep on their backs unless you provide Form 3019, Infant Sleep Exception/Health Care Professional Recommendation, signed by the infant's health care professional [§746.2427 and §747.2327].
- Place infants on a firm mattress, with a tight fitting sheet, in a crib that meets the CPSC federal requirements for full-size cribs and for non-full size cribs [§746.2409 and §747.2309].
- For infants who are younger than 12 months of age, cribs should be bare except for a tight fitting sheet and a mattress cover or protector. Items that should not be placed in a crib include: soft or loose bedding, such as blankets, quilts, or comforters; pillows; stuffed toys/ animals; soft objects; bumper pads; liners; or sleep positioning devices [§746.2415(b) and §747.2315(b)]. Also, infants must not have their heads, faces, or cribs covered at any time by items such as blankets, linens, or clothing [§746.2429 and §747.2329].
- Do not use sleep positioning devices, such as wedges or infant positioners. The AAP has found no evidence that these devices are safe. Their use may increase the risk of suffocation [§746.2415(b) and §747.2315(b)].
- Ensure that sleeping areas are ventilated and at a temperature that is comfortable for a lightly clothed adult [§746.3407(10) and §747.3203(10)].
- If an infant needs extra warmth, use sleep clothing [redacted] (insert type of sleep clothing that will be used, such as sleepers or footed pajamas) as an alternative to blankets [§746.2415(b) and §747.2315(b)].
- Place only one infant in a crib to sleep [§746.2405 and §747.2305].
- Infants may use a pacifier during sleep. But the pacifier must not be attached to a stuffed animal [§746.2415(b) and §747.2315(b)] or the infant's clothing by a string, cord, or other attaching mechanism that might be a suffocation or strangulation risk [§746.2401(6) and §747.2315(b)].
- If the infant falls asleep in a restrictive device other than a crib (such as a bouncy chair or swing, or arrives to care asleep in a car seat), move the infant to a crib immediately, unless you provide Form 3019, Infant Sleep Exception/Health Care Professional Recommendation, signed by the infant's health-care professional [§746.2426 and §747.2326].
- Our child care program is smoke-free. Smoking is not allowed in Texas child care operations (this includes e-cigarettes and any type of vaporizers) [§746.3703(d) and §747.3503(d)].
- Actively observe sleeping infants by sight and sound [§746.2403 and §747.2303].
- If an infant is able to roll back and forth from front to back, place the infant on the infant's back for sleep and allow the infant to assume a preferred sleep position [§746.2427 and §747.2327].
- Awake infants will have supervised "tummy time" several times daily. This will help them strengthen their muscles and develop normally [§746.2427 and §747.2327].
- Do not swaddle an infant for sleep or rest unless you provide Form 3019, Infant Sleep Exception/Health Care Professional Recommendation, signed by the infant's health care professional [§746.2428 and §747.2328].

Privacy Statement

HHSC values your privacy. For more information, read our privacy policy online at: <https://hhs.texas.gov/policies-practices-privacy#security>.

Signatures

This policy is effective on: [redacted] Child's name: [redacted]

Signature — Director/Owner

Date Signed

Signature — Staff member

Date Signed

Signature — Parent

Date Signed

Infant Sleep Exception/Health Care Professional Recommendation

When a health care professional determines that it is medically necessary for an infant to sleep in an alternative position (other than sleeping on the infant's back), sleep in a restrictive device (such as a bouncer seat or swing), or needs to be swaddled to sleep, use this form to ensure that a licensed child care center, licensed child care home, or registered child care home that cares for the infant meets the minimum standards required by Texas Human Resources Code §42.042(e)(8)(A) and (B). The standards for these operations require the operation to:

- follow the directions of an infant's health care professional to provide specialized medical assistance to the infant (746.3815 and 747.3615); and
- maintain, while active, this form and any other directions from the health care professional that the parent provides to the operation [See §746.603(a)(10) or §747.603(a)(9)]. Keep the exception form in the infant's classroom, so that a caregiver may refer to the health care professional's instructions.

Directions: This exception will not be effective until all sections and signatures are complete. Once completed, the exception is acceptable for use by the child care operation.

Infant's Information

Infant's Name	Date of Birth	Infant's Age	Parent/Guardian's Name
Address			
Home Phone	Work Phone	Fax	Email

The infant's health care professional must complete the following section.

Health Care Professional Information

Name of Infant's Health Care Professional	Name of Practice
Address	
Fax number	
Work Phone	Home Phone
Email	

The Texas child care minimum standards (§§746.2426, 746.2427 and 746.2428 for child care centers or §§747.2326, 747.2327 and 747.2328 for licensed or registered child care homes) require child care operations to place all infants on their backs to sleep in a crib and to ensure that infants do not sleep in restrictive devices and are not laid down to sleep swaddled. But, based on the advice of the infant's health care professional, when medically necessary, the center may be authorized to use an alternative sleep position, restrictive device, or swaddle for the infant due to medical reasons.

The above named infant has the following medical condition that necessitates an alternative sleep position, allow for sleep in a restrictive device, or requires swaddling for sleeping:

--

Health Care Professional Information

Please describe the appropriate sleep position/restrictive device/swaddling technique to be used for the above named infant and include the effective dates for the exception:	

Effective Dates of Exception	From	To	

Health Care Professional's Signature

Date

Waiver of Liability

- I affirm and acknowledge that the below named child care operation has provided me with the operation's safe sleep policy.
- I further authorize the child care operation and its caregivers to place my infant in an alternative sleep position, restrictive device, or swaddling at the recommendation of my infant's health care professional, as described above.
- I, as the parent or guardian of the above mentioned infant, release and hold harmless the below named child care operation, its officers, directors, caregivers, and employees from any and all liability whatsoever associated with harm to my infant due to Sudden Infant Death Syndrome (SIDS).

Parent or Guardian's Signature

Date Signed

An authorized official with the child care operation must complete the following section.

Child Care Operation Information and Signature

Name of Child Care Operation	Operation Number
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Operation Representative's Signature

Date Signed

Privacy Statement

HHSC values your privacy. For more information, read our privacy policy online at: <https://hhs.texas.gov/policies-practices-privacy#security>.