



# Parent Handbook

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[www.gccofsc.org](http://www.gccofsc.org)



Dear Parents:

Thank you for choosing Grace Academy Child Development Center to enhance your child's early development. This policy manual will provide you with essential information about the rules and regulations of our program. Choosing an early childhood program is one of the most important decisions you will make during your child's early years. We believe parents want a safe and nurturing environment for their children. Grace Academy represents its deep commitment to ensuring that children have the best start possible on their educational journey. With a religious basis, Grace Academy has incorporated a Christian-based education into its curriculum. Our goal is to provide for the enhancement of spiritual, cognitive, emotional, physical and social development of children while involving families in collaboration with the community.

We are excited and are very confident that both parents and children will find the experience at Grace Academy very rewarding. Please call 803.445.1752 if you have any questions regarding our program. We look forward to a most prosperous and successful year with your child.

Sincerely,

*Jennifer Bishop*

**Jennifer D. Bishop, MPA**  
Owner/Operator

*Robin B. Jefferson*

**Robin B. Jefferson, M.Ed.**  
Executive Director

## **Vision Statement**

To equip children socially, educationally, and spiritually in order to be successful in a global society.

## **Mission Statement**

To enable a growing number of children to become successfully balanced in a global society by providing a safe and challenging pre-school experience.

Grace Academy is a preschool serving children ages to 5 years.

## **Academy Goals and Philosophy**

It is our philosophy that God is the creator of all things. Consequently, Grace Academy stands on the belief that children are gifts from God. It is our goal and philosophy to provide a safe, clean and supportive environment for children to learn and grow in mind, body and spirit.

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## ADMISSIONS

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### **Admission Policy**

The Grace Academy Child Development Center (GACDC) admits children through 5 years of age without regard to race, culture, sex, religion, national origin, ancestry or disability. When the parent or legal guardian of a child identifies that a child has special needs, GACDC and the parent or legal guardian will meet to review the child's care requirements. GACDC does not discriminate on the basis of special needs. The program accepts children with special needs as long as a safe, supportive environment can be provided for the child. To help the program's staff better understand child's needs, the staff will ask the parent or legal guardian of a child with special needs to complete a "Special Care Plan" in conjunction with the child's health care provider(s). The program will attempt to accommodate children with special needs consistent with the requirements of the Americans with Disabilities Act. If the program is unable to accommodate the child's needs as defined by the child's health care provider(s) or the Individual Family Service Plan/Individual Education Plan without posing an undue burden as defined by federal law, GACDC will work with the parent or legal guardian to find a suitable environment for the child.

### **Enrollment**

Prior to the child's attendance, a conference with the parent or legal guardian and the child is required to acquaint each new family with the environment, staff, and schedule for childcare. During the visit, the parent or legal guardian will have a personal interview with the staff of GACDC and an opportunity to review the "Parent Handbook" and other written materials maintained at the facility. Each child will spend one hour at the program with a parent or legal guardian before remaining in care without a family member. The following forms must be completed and submitted to GACDC prior to the child's first day of attendance. The information in these forms will remain confidential and will be shared with other caregivers only as required to meet the needs of the child:

**Application for Childcare Services** - Completed by parent or legal guardian.

**Child Health Assessment** - Signed by the child's physician or certified registered nurse.

**Childcare Emergency Information** - Signed by a parent or legal guardian for each child enrolled. A parent or legal guardian will update these forms every 6 months and whenever the information changes.

**Special Care Plan** - When the parent or legal guardian informs the center staff that a child has a disability, a special care plan will be completed by a parent or legal guardian and/or health care provider(s) for that child. A parent or legal guardian may be asked to authorize release of information of from providers of special services to help the childcare provider coordinate the child's care.

**Consent for Childcare Program Activity** - Completed by a parent or legal guardian.

**Childcare Agreement** – Completed by a parent or legal guardian.

**Other Items Needed for Enrollment:**

- Payment of non-refundable \$100 annual registration/materials fee and \$75 activity fee
- Immunization Record
- Visit the classroom with your child before first day of attendance
- Complete all consent forms
- Purchase of at minimum one (1) GACDC uniform shirt

**Waiting List Policy**

Applicants who wish to have their names placed on GACDC’s waiting list must submit a completed enrollment form. A **non-refundable** \$175 enrollment fee is required at this time. Admission will be granted on the basis of availability. Clients will be notified by phone or email when space becomes available. Enrollment must begin within 2 weeks or the space will be forfeited and the client’s name will be removed. If a space becomes available for a child on the waiting list before s/he is ready to come to the Center, the space can be held only if tuition is paid in full.

**Hours of Operation**

**GACDC’s hours of operation are Monday – Friday 7 am to 6 p.m.** In case of severe weather or natural disasters, the Center will follow the decisions of Richland School District One. Such decisions will be broadcast on local radio and television stations.

**Regularly scheduled Center holidays include:**

- New Year’s Day
- Day After New Year’s
- Dr. Martin Luther King Jr. Birthday Observance
- Good Friday
- Monday after Easter
- Memorial Day
- July 4<sup>th</sup>
- Labor Day
- Thanksgiving
- Friday after Thanksgiving
- Christmas Eve
- Christmas Day
- Day After Christmas

**Vacation Policy**

After one (1) year of continued enrollment, families will be granted one-week vacation week each school year to be taken at your discretion. Payment will be suspended for that week. One week written notice must be given to the director or designee. Payment for the week returning from vacation is still expected on time. GACDC will close two weeks each school year during early August and late December. Please

review the calendar of events for specific closing dates.

### **Attendance**

Attendance at the Center is on a full-time basis. If your child does not attend on a scheduled day, full tuition is charged. Your weekly tuition is due each Thursday by 6 p.m. A late fee of \$35, per student, will be charged to all accounts not paid in full by Thursday at 6 p.m. Your child will be disenrolled if tuition is not received by the following Monday. Parents are obligated to pay unpaid balances when child(ren) are disenrolled.

Students must arrive no later than 9 am to the Academy. Students arriving after 9 am, without a doctor's excuse, will not be allowed to attend that day of school. Tuition is not pro-rated for the day the student was not in attendance.

### **Childcare Agreement**

A childcare agreement will be prepared covering dates, hours and tuition charges for each school year your child is enrolled at GACDC. The agreement must be signed by the parent/guardian and returned to our office by the deadline. By signing, you agree that you will abide by all rules, regulations and policies set out in this handbook and that you will pay for all dates specified in the contract even when your child is absent. GACDC agrees to provide childcare services on all days and hours contracted.

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## **TUITION, REGISTRATION AND CHILDCARE FEES**

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### **Tuition Policy**

A one-time, non-refundable enrollment fee of \$175 is required for each child at the time of initial enrollment. This enrollment fee does not apply toward tuition cost. Full tuition is expected the week in which a holiday occurs. Although we operate according to a planned calendar, GACDC may be closed on any given day of the year for any reason at the discretion of the Director. Among these days would be holidays, days surrounding holidays, staff development days and unplanned events. We will give as much advance notice as possible. Your child's monthly tuition will not be adjusted for these days. The Center may also be closed one week (late summer) for In-Service.

### **Annual Registration and Activity Fee**

Once a year, usually during the spring, every child must pay a \$175 annual registration fee.

### **Late Pick-Up Fee**

If you know you are going to be detained, please notify the center immediately so that we can reassure your child that he/she has not been forgotten. If not notified within 15 minutes past your child's contracted time, the emergency contact person listed on your child's information record will be contacted to pick up your child. In the event that an authorized person cannot be reached, the child will be referred to the Department of Public Safety.

Parents will be charged late fees in 5-minute increments per student (\$5 for every 5 minutes past the scheduled pickup time.) Late fees are due at the time of pickup. It is very important that you pick up your child at the designated time; that is necessary for staffing purposes and serves as a courtesy to our employees. **This is a per student policy therefore, if you have more than one student, the late-fee applies to each student.**

### **Childcare Fees**

Fees are charged based on a weekly schedule. Fees are extenuating circumstances regarding chronic illnesses will be at the discretion of the Center. We ask that you notify the center by 8 am if your child will be absent. It is required that you provide 14 days written notice of your child's termination from the Academy. All changes take effect on the first day of the week. Parents are responsible for contracted fees. The Academy does not provide a bill prior to the tuition due date.

### **Grace Academy Child Development Center Fees**

#### **Infant & Toddler (Infant – 24 Months)**

- Fulltime rate \$140 per week
- Annual registration fee \$175

#### **Toddler (2 years)**

- Fulltime rate \$130 per week
- Annual registration fee \$175

#### **Toddler (3-4 years)**

- Fulltime rate \$120 per week
- Annual registration fee \$175

#### **Toddler (4-5 years)**

- Fulltime rate \$110 per week
- Annual registration fee \$175

***Note: Rate are subject to change at the discretion of the Academy.***

### **Payment Methods**

The GACDC accepts payments in the forms of Cash, Visa, MasterCard, and ABC Vouchers. **Payments are due by 6 p.m. on each Thursday of the week.** Payments may be made at the front desk. In all cases, payments are expected to be made on a regular basis.

### **Sick Policy**

Tuition must be paid for a full week regardless of attendance in order to retain placement.

### **Court Fees**

Should it become necessary to petition the courts regarding the non-payment of fees,

court & attorney fees will be the responsibility of the parent/legal guardian.

### **Confidential Records**

All student records and files will be kept in a locked file cabinet in the director's office. Access to these files will only be permitted to the following staff members of GACDC: Director, Associate Director, Campus Manager and the SC Department of Social Services.

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## **UNIFORM, CLOTHING AND OTHER BELONGINGS**

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We are a total uniform Academy, students and staff. Children are required to wear uniforms Monday through Thursday: Uniforms consist of...

- Grace Academy Apparel
- Any bottoms (jeans, shorts, pants, skirts for girls)
- Closed toes shoes, sneaker

Please be reminded that light-up shoes, sandals or flip-flops may **not** be worn at the Academy at anytime.

Friday is considered students' clothing choice day. All students are exempt from wearing GACDC uniforms on this day.

Each child is expected to keep a complete change of extra clothing, including socks, at the Center. Extra clothing should be placed in a plastic Ziploc bag clearly labeled with the child's name. **GACDC is not responsible for misplaced or damaged clothing.**

Children are not permitted to bring toys from home except for special projects. The Center provides adequate toys and materials for all children and cannot take responsibility for items from home that may get lost or broken.

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## **CHILD: TEACHER RATIOS**

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Low ratios and small groups are important criteria of quality. SC regulations do not limit group size, however GACDC is committed to keeping group sizes at two-time ratio. Under certain circumstances SC licensing ratios.

During rest times the Center follows DSS nap time ratio regulations.

### **Tracking/Accountability of Children**

Tracking of Children

- A. Children shall be directly supervised at all times by qualified staff persons.

Direct supervision shall be physically near, readily accessible, aware and responsible for the ongoing activity of each child and be able to intervene when needed.

- B. The center shall have written policy to account for each child by name as the child enters and exits the premise, enters and exits the vehicles, or moves to a new location in or around the center. Each class uses a tracking form to account for each student as they enter and exit the premises, enter and exit vehicles, or moves to a new location in or around the center.
- C. There shall be at least two staff members in the center at all times and near feeding chairs providing constant supervision.

### **Outdoor Policy**

Outside play is an extension of the curriculum aimed at promoting healthy physical motor growth and socialization. Teachers are encouraged to take stimulating materials outdoors to extend curriculum activities.

Plan for your child to play outdoors every day the weather permits. Remember to dress your child appropriate for the season. *If your child is to ill to go outside, she or he belongs at home.*

### **Field Trips**

Well-planned and carefully supervised field trips are an important part of a quality curriculum for children 3 years old and older. Parents are welcomed and encouraged to help chaperone all field trips.

The Center's enrollment contract includes a Field Trip Authorization Form; however, a parent's signature is required each time children are going to use the Center's bus to leave the school grounds for a planned outing.

Short walks on the Grace Campus may occur spontaneously if they support the current learning and interest of the children. Children will always use safe walkways and will not cross busy streets. As on any outing, stringent, safe ratios will be adhered to and teachers will always have cell phones and emergency contact information with them.

At anytime GACDC students are planning to attend a field trip, every student must wear their GACDC t-shirt for easy identification, regardless of the day of the field trip.

### **Transportation**

Grace Academy CDC will require written permission letters/forms from every parent when transporting children to and from home, school, or other designated places including planned field trips and activities.

### **Visitor Policy**

All visitors are required to sign-in upon entering the Center. Visitors with the

exception of parents/guardians are required to wear a badge.

#### Visitor Check-In Procedures

1. All visitors are required to provide their name;
2. Provide a copy of ID;
3. Be checked to confirm they are on the authorized list;
4. If confirmed – follow policy, if not, they will be asked to leave.

**Parents must specify who can visit their child(ren) by completing the authorized visitor's form.**

#### **Family/Staff Communication**

The facility will promote communication between families and staff by using written notes as well as informal conversations. Families are encouraged to leave written notes with important information so that all caregivers who work with the child can share the parent's communication.

#### **Child Assessment**

Continuous assessment of each child's development is carried out at the Center. Informal and formal teacher assessments are used to gain insights into each child's social, emotional, cognitive and physical growth and development.

#### **Parent-Teacher Conferences**

Lead teachers will hold regularly scheduled conferences with parents for the purpose of sharing and gathering information about the children in their care. Such conferences should occur at least annually or at the time of transition. Teachers view themselves as important resources for each child and family.

Parents may request a meeting with their child's teacher or primary caregiver at any time.

#### **Parent Survey**

Parents are given the opportunity to express their opinions of the program annually. Annual surveys are designed to examine the program's effectiveness in meeting the needs of both our children and parents.

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## **EDUCATIONAL APPROACH**

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Parents are the most important teachers. Success in school can be enhanced by parents and teachers working together. We encourage you to visit the classroom, participate in classroom activities and extend school learning experiences at home.

Grace Academy is committed to ensure a high-quality Pre-K experience (full day and half day schedules are available) designed to develop oral language and early literacy skills. Additional specific benefits which are offered to accomplish our goals are, but not limited to:

- Multi-Cultural Learning
- Hands-On Approach
- Multi-Sensory Learning
- Real-World Curriculum Connections
- Kindergarten prep learning
- Low Pupil-Teacher Ratio
- College Educated Staff
- Student Portfolios
- Computer Technology
- Diagnostic Testing Conducted Periodically
- Foreign Language Instruction
- Supplementary Related Arts Exposure

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## **CURRICULUM**

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GACDC will be using the Creative Curriculum System. This nationally recognized and regarded curriculum is forward thinking and extremely comprehensive and will be utilized in every classroom within the academy. Visit their website at [www.teachingstrategies.com](http://www.teachingstrategies.com) to learn more about what our students will experience.

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## **CHILD GUIDANCE & DISCIPLINE**

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### **Philosophy of Discipline**

Caregivers will not use physical punishment or abusive language. Caregivers will equitably use positive guidance, redirection, planning ahead to prevent problems, encouragement of appropriate behavior, application consent with clear rules and involvement children in problem solving to foster the child's own ability to become self-disciplined. Where the child understands words, discipline will be explained to the child before and at the time of any disciplinary action. Caregivers will encourage children to respect other people, to be fair, to respect property, and to learn to be responsible for their actions.

Caregivers will guide children to develop self-control and orderly conduct in relationship to peers and adults. Aggressive physical behavior toward staff or children is unacceptable. Caregivers will intervene immediately when a child becomes physically aggressive to protect all of the children and encourage more acceptable to the child.

### **Permissible Methods of Discipline**

For acts of aggression and fighting (e.g., biting, hitting, etc.) the staff will set appropriate expectations for children and guide them in solving problems. This positive guidance will be the usual technique for managing children with challenging behaviors rather than punishing them for having problems they have not learned to

solve. In addition, staff may:

1. Separate the children involved.
2. Immediately comfort the individual who was injured.
3. Care for any injury suffered by the victim involved in the incident.
4. Notify parents/legal guardians of children involved in the incident.
5. Review the adequacy of caregiver supervision, appropriateness of facility activities and administrative corrective action if there is a recurrence.

Physical restraint will not be used except as necessary to ensure a child's safety or that of others, and then in the form of holding by another person as gently as possible only for as long as is necessary for control of the situation.

Medicines or drugs that will affect behavior will not be used except as prescribed by a child's health care provider and with specific written instructions from the child's health care provider for the use of the medicine.

Time-out will be used if other management techniques are ineffective. The period of "time-out" will be just long enough to enable the child to regain self-control. As a general rule this period will not exceed one minute per year of age. Caregivers will monitor the effectiveness of "time-out" and seek the help of a mental health consultant when approved behavior management strategies do not seem to be effective.

### **Suspected Child Abuse**

All observations or suspicions of child abuse or neglect will be immediately reported to the child protective services agency no matter where the abuse may have occurred. The center director will call South Carolina Department of Social Services at 803.735.7000 or 803.735.7222 to report suspected abuse or neglect. The center's director will follow the direction of the child protective services agency regarding completion of written reports. If the parent is or legal guardian of the child is suspected of abuse, the center director will follow the guidance of the child protective agency regarding notification of the parent or legal guardian. Reporters of suspected child abuse would not be discharged for the making the report unless it is proven that a false report was knowingly made.

Staff accused of child abuse may be suspended or given leave with/without pay pending investigation of the accusation. Such caregivers may also be removed from them the classroom and given a job that does not require interaction with the children. Parents or legal guardians of suspected abused children will be notified. Parents or legal guardians of other children in the program will be contacted by the center director if a caregiver is suspected of abuse so they may share any concerns they have had. However, no accusation or affirmation of guilt will be made until the investigation is complete. Caregivers found guilty of child abuse will be summarily dismissed or relieved of their duties.

All staff at the academy will attend training for Policies and Procedures for the Prevention of Child Abuse and Neglect.

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## ILLNESSES

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### Admission and Exclusion

The goal of the Center is to prevent the spread of illness. Parental cooperation is essential in this effort.

#### Caring for Mildly Ill Children:

1. Parent notification and instructions.
  - a. If a child becomes ill while in care, the center shall notify the parent or responsible party immediately.
  - b. If a child may have been to a dangerous or serious communicable disease that is spread through casual contact, the center shall notify the parents of all potentially exposed children about the nature of the illness and potential exposure to the illness, and recommended consultation with the child's physician.
  - c. If a center choose to provide care to a mildly ill child, the center shall receive instructions from the parent of any special needs of the child.
2. Policies and Procedures:
  - a. If a center choose to provide care for a mildly ill child, the center shall have written policies and procedures specifying inclusion and exclusion from the group, communication with parents, recording of illness and care provided, specific types of illness and symptoms which prohibit care from being provided, special staff training being required and emergency health procedures.
    - i. Inclusion:
      1. Runny Nose (Yellow Mucas)
      2. Nose bleeds
      3. Asthma
      4. Vomiting
      5. Minor Cold and Flu Symptom
      6. Raised temperatures up to 99.9
      7. Tooth Aches
      8. Broken and/or fractured bones or sprains
    - ii. Exclusions:
      1. Chicken Pox
      2. Measles
      3. Fevers of 100 or higher
  - b. If a child is in a rest area due to illness or awaiting parental pick-up, the child supervised at all times.
  - c. A hand-washing sink shall be made available to a designated area for mildly ill children.

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## HEALTH PLAN

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Immunizations will be required according to the current schedule recommended by the U.S. Public Health Service and the American Academy of Pediatrics (see [www.aap.org](http://www.aap.org)). Every January, the Director will check with the public health department or the American Academy of Pediatrics for updates of the recommended immunization schedule regulations regarding attendance of children who are not immunized due to religious or medical reasons will be followed. Children not immunized will be excluded during outbreaks of vaccine preventable illness as directed by the state health department.

## **Health Consultation**

The South Carolina Department of Social Services and SCDHEC will provide ingoing consultation to the childcare facility and will help develop and approve all written policies relating to health and safety. The health consultant will visit the facility to review and give advice on the health component. The health consultant will provide advice about accommodations required for children with specific health problems, design and review surveillance systems and illness, assist with staff and family education and be a source of contacts within the health care community. Health consultants for childcare, nutrition professionals should have pediatric credentials or advance training in pediatrics.

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## **MEDICATION POLICY**

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The Center requires written authorization to administer any medication or medical treatment. Medications Forms are available in your child's classroom. Completed forms are kept in a medication log.

Over-the-counter medicines must be in the original containers. Medicines will be administered for only one day with a parent's authorization. Continued usage requires a physician's written authorization.

In case of prescription drugs, parents will complete the Medication Form requesting and authorizing administration of the medication and specifying in writing the dosage. Medication will be administered by GACDC at two designated times daily, 10:30 am and 2:30 p.m. The medicine must be in its original container. Parents may also come to the Center to personally administer medications to their children. The Center shall not be responsible for medications administered by parents.

A medication log will be maintained by the facility staff to record the instructions for giving the medication, the consent obtained from the parent or legal guardian, the amount, the time of administration, and the person who administered each dose of medication. Spills, reactions and refusal to take medication will be noted on this log. Medication errors will be controlled by checking the following items each time medication is given:

1. Right Child

2. Right Medicine
3. Right Dose
4. Right Time
5. Right Route Administration

If a medication error occurs, the Regional Poison Control Center and the child's parents will be contacted immediately. The incident will be documented in the child's record at the facility.

1. Medication and Medical Procedures: A written signed and dated parental consent is required for any prescription or over the counter medication or administration of special medical procedures.
  - a. All medications must be used only for the child for who the medication is labeled.
  - b. Medications should not be given in excess of the recommended dose.
  - c. Prescribed special medical procedures ordered for a specific child should be written, signed, and dated by a physician or other legally authorized health care provider.
2. Storage of Medication:
  - a. All medications shall be kept in their original labeled containers and have child protective caps. The child's first and last name shall be on all medications.
  - b. All medications shall be stored in a separate locked container under proper conditions of sanitation, temperature, light and moisture.
  - c. Discontinued and expired medications shall not be used and shall be returned to the parent or disposed of in a safe manner.
3. Medication Log:
  - a. For each medication that is administered by a staff person, a log shall be kept including the child's name, name of medication, dosage of medication, date, time and name of person administering the medication. This information shall be logged immediately following the administration of medication and a copy provided to the child's parent and guardian.
4. Medication Errors:
  - a. Medication errors e.g. failure to administer a medication at the prescribed time, administering an incorrect dosage of medication or administering the wrong medication shall be recorded in the child's record.
  - b. The parent shall be immediately notified and notified in writing of a notification error or a suspected adverse reaction to a medication.

## **CHILD HEALTH SERVICES**

**Immunizations** will be required according to the current schedule recommended by the U.S. Public Health Services and the American Academy of Pediatrics. Every January,

the Director/Nurse will check with the public health department of the American Academy of Pediatrics for updates of the recommended immunization schedule. The State Health Department regulations regarding attendance of the children who are not immunized due to religious or medical reasons will be followed. Children not immunized will be excluded during outbreaks of vaccine preventable illness as directed by the state health department.

Routine Preventive Health Services will be required according to the current recommendations of the American Academy of Pediatrics ([www.aap.org](http://www.aap.org)). Documentation of an age appropriate health assessment should be obtained before, but is required no later than, six weeks after the child starts receiving care. Parents or legal guardians are responsible for assuring that their children are kept-up-to-date and that a copy of the results of the child's health assessment is given to the program. A visit to the doctor for a special health assessment or new documentation is not required for admission if documentation of an age-appropriate health assessment is provided. Questions raised about the child's health will be directed to the family or (with permission of the parent or legal guardian) to the child's health care provider for explanation and implications for childcare. The Director or nurse will check annually with the public health department or the American Academy of Pediatrics for updates of the schedule for routine preventive health services.

Children will not be excluded for failure to be immunized if they have an appointment for immunizations and have their immunizations initiated.

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## **EMERGENCY PLAN**

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### **First-Aid Kits**

First-Aid-Kits will be located in the individual classrooms. Kits are kept inaccessible to children and will be restocked following use.

### **Emergency Phones Numbers**

All caregivers will have immediate access to a device that allows them to summon help in an emergency. The telephone numbers of the Fire Department, Police Department, Hospital and Poison Control will be posted by each phone number with an outside line. Emergency contact information for each child and staff member will be kept readily available.

### **Lost or Missing Children**

1. To prevent lost or missing children, staff will count children frequently while on a field trip. A staff person will be responsible for performing a "sweep" of the area or vehicle the children are leaving to be sure that no child is overlooked. Staff will identify and implement specific systems for speedy recovery of missing children such as: uniform, brightly colored T-Shirts, accessible identification and contact information for the children, and instructions to older children about what to do if they separate from the group. Staff will not make the child's name visible to a stranger who might use the child's name to lure the child from the group.

2. If it is determined that a child is missing or lost, the director or designated staff will immediately notify the local police or sheriff, the program director, the parents or legal guardian and authorities as required by state regulation. If on a trip, the staff will notify the facility management to assist in the search for the child.

## **Injuries or Illnesses Requiring Medical Attention**

### **A. Medical Conditions Under Which Emergency Care and Treatment is Warranted**

Medical emergencies that would require immediate medical care by a health care professional include the conditions listed below.

- a. Nose Bleeds
- b. Asthma
- c. Black Out
- d. Head Trauma
- e. Severe Physical Trauma
- f. Vomiting Blood
- g. Unequal Pupils
- h. Seizures
- i. Neck or Back Injuries
- j. Stiff Neck
- k. Hives
- l. Very Sick Child Who Seems to Be Getting Worse Quickly
- m. Forceful Vomiting
- n. Severe Abdominal Pain
- o. Possible Broken Bones
- p. Shock
- q. Severe Bleeding
- r. Breathing Difficulties
- s. Semi-Consciousness
- t. Loss of Consciousness

The caregiver who is with the child and who has had pediatric first aid training will provide first aid.

1. Designated staff will activate the Emergency Medical Services (EMS) system by dialing 911 when immediate medical help is required. The emergency facility is Richland Memorial Hospital. Emergency transport is provided by Richland County EMS.
2. A staff member will accompany the child and remain with the child until the parent or legal guardian assumes responsibility for the child. Child:staff ratios will be maintained at all times for the children remaining at the facility. Teacher assistants will substitute for the missing caregiver in such emergencies.
3. The caregiver will complete and injury report form as soon after the incident as possible. The form will be signed by the parent or legal guardian. Copies will be distributed to the parent or legal guardian, the child's record at the facility,

and the facility's Injury Log.

### **Serious Illness, Hospitalization and Death**

The director will immediately DHEC, state agency or health department of a serious illness, hospitalization or death of a child or staff member that occurs related to childcare during the childcare day. The director will plan and carry out communication with staff, families, children and the community as appropriate.

### **Media Inquiries**

Refer all media inquiries to the Director. Do not allow access by the media to the facility during a crisis situation. Media access will be prearranged at times when staff and families have been informed and when such visits will cause the least amount of disruption to the program.

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## **SECURITY AND EVACUATION PLAN, DRILLS AND CLOSINGS**

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### **Security Plan**

1. Entrances will be protected from unauthorized access by keeping all doors into the facility locked (to the outside). Parents or legal guardians will be given a pass to enter the building between the hours of 7 a.m. to 6 p.m. Under no circumstances are passes to be used by unauthorized persons.
2. In the event of an admission of an individual who is subsequently demonstrates threatening behavior, a code will be used to notify another adult to call the police and all caregivers to avoid the area where the threatening individual is located.

### **Evacuation Procedure**

1. Child:staff ratios will be maintained, and the children will be evacuated according to the posted evacuation plan.
2. Children who cannot walk out of the building on their own will be evacuated as planned in consultation with a fire safety professional: Method used for children with disabilities.
3. The Director will check that each staff member knows a specific assignment as stipulated in the evacuation plan.
4. Staff will count the children in each group being evacuated and count the children again when they reach the evacuation destination.
5. Staff will give children clear simple instructions about exiting the facility. Children will stop their activities immediately at the sound of the alarm and proceed to the exit door.
6. GACDC Lead Teachers/ caregivers will carry attendance and emergency contact information from the facility to the assigned evacuation area and will compare attendance to the attendance sheet to be sure no children or staff had been left behind.
7. To assure complete evacuation has occurred, the last person to leave each part

of the facility will conduct a final, thorough “sweep” of all areas accessible to children (whether or not children are allowed in those areas). The facility will post a list of all areas to be checked as part of the “sweep” in each part of the facility. The last person to leave will use the list of accessible areas to be sure each area is checked, then take the list to the director. Each person who conducted a “sweep” will sign the list of areas checked and give the list to the director. If a child is who should have been evacuated with the group is located as a result of the final “sweep” during an evacuation drill, the director will investigate the circumstances that led to the failure to evacuate that child and will plan how to avoid such problems in the future.

8. If re-entry into the building is not possible, children will be another building on the campus. The caregivers should remain calm and speak to the children in a reassuring manner.
9. The temporary shelter will be stocked with supplies and materials necessary for the program to take children until parents, legal guardians or designated persons can take the children home
10. Families will be notified by telephone and/or radio: Radio broadcast 95.3 or 101.3; television broadcast WISTV Channel 10 and/or WLTX Channel 19.
11. Evacuation procedures will be posted in each classroom and through the facility.
12. Evacuation drills will be held monthly. The timing of the drills will be varied to include early morning, mealtimes and nap times. Children will be appropriately prepared and reassured during drills. The director will complete the Evacuation Drill Log at the end of each drill.
13. At least one drill per year will be observed by a representative of the Fire Department or equivalent emergency or disaster planning personnel.

### **Fire or Risk Explosion**

Children will participate in monthly fire drills at the Center. All adults and children are required to advance to a designated area outside the building. Parents arriving or leaving while the drill is in progress must remain outside of the building. Upon completion of the drill, parents may then sign their children in or out.

### **Power Failures**

The following measures will be considered in the event of power failure:

- Caregivers will comfort the children.
- Unless the power failure is accompanied by an emergency situation requiring evacuation (e.g., flood, fire, etc.) children will be kept inside. Should it be necessary to leave the building, staff will follow emergency evacuation procedures. Staff will look for and avoid any downed power lines.
- If weather conditions do not permit the maintenance of safe temperatures within the facility, families will be notified by telephone, radio or television broadcast. Please tune into radio 95.3 or 101.3; WISTV channel 10 or WLTX Channel 19 regularly.

- Flashlights are stored in each classroom.

### **Inclement Weather**

#### **(Snow Storms, Floods, Tornados, Hurricanes, Earthquakes, Blizzards or other Catastrophes)**

- If the director decides prior to opening hours not to open the facility, families will be notified by email, telephone, radio or television broadcast. Closings will be modeled by Richland County School District One.
- If the facility must close during operating hours because of snow or storm, the director will notify families by telephone, radio or television broadcast.
- If weather conditions prevent a parent, legal guardian or emergency contact from reaching the facility to recover a child, the lead teacher will care for the child (maintaining proper child:staff ratios) until such time as the parent or legal guardian can safely reclaim the child. If the parent, legal guardian or emergency contact person cannot reclaim a child within two hours of closing announcement, the child will be cared for by a designated staff of GACDC, where the child will receive food, warmth and have a place to rest. If children must remain at the childcare facility, the lead teachers will use a three-day supply of emergency food, water, clothes, blankets, flashlights, diapers and other necessary articles stored to care for such children.
- The Director is responsible for contacting local Emergency Preparedness Authorities and obtaining written instructions for what to do in the event of emergency that may occur in the region.
- Anyone who learns about a significant health or safety hazard will notify the director by calling 803.445.1752 so appropriate actions can be taken.
- Staff will follow the appropriate, posted Emergency Procedures for the catastrophe and wait for authorities to arrive.

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## **AUTHORIZED CAREGIVERS**

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### **Documentation of Authorized Caregivers**

The administrative assistant will maintain the files, written authorization by the child's parent or legal guardian of the names, addresses and telephone numbers of individuals whom the parent or the legal guardian have approved to care for the child, to pick up the child for them and to take the child out of the facility on trips.

And changes to custody status, of a child attending GACDC, are to be submitted in the form of a court order or written notarized and witnessed statement of the custodial parent.

### **Sign-In/Sign-Out Procedure**

You are required to sign your child in and out of the program each day. This record is proof that your child is on site and is used in emergency situations. If a child is to be picked-up by someone other than a legal guardian, prior written notification is required. As a legal guardian, you should provide the Center with at least two names of persons authorized to pick-up your child in case of illness or emergency. A photo ID

is required for anyone picking-up a child. Care giving adults who bring the child to, or remove the child from, the facility will sign children in and out of the facility (parents, legal guardians and staff). This policy will be provided to families at the time of enrollment and will be strictly enforced.

### **Court Ordered Access of Students**

Parents will have full and free access to their children while at the center. Only court-ordered documents will prevent parents from this access. Access to children will follow court orders in regards to time, criteria of visitation, etc.

### **Policy for Handling and Unauthorized Person Seeking Custody**

Telephone authorization to release a child to someone who does not usually pick up the child will be accepted only in concert with prior written authorization from the custodial parent or legal guardian for such an exceptional release. The staff person who accepts such authorization will call the previously documented phone number of the parent to verify that the parent is activating a phone authorization for release of the child. The staff person will document the results of this call in the child's record, as well as the time and to whom the custodial parent or legal guardian gave telephone authorization for release of the child.

Any person other than the parent or legal guardian will be required to provide photo identification such as a driver's license, work or school ID before the child is released. The custodial parent or legal guardian may provide a photograph of authorized persons for pickup of the child, which will be kept in the child's record at the facility.

The director will notify the police if an unauthorized person seeks custody of the child.

### **Policy for Handling Persons Who May Pose a Safety Risk**

*Includes abusive parents or legal guardians and any adults who cannot take the child safely from the facility or has been identified as a threat to the child.*

1. The child will not be released to anyone who cannot safely care for the child.
2. The Director will notify the police by calling 911 to manage an adult under the apparent influence of drugs/alcohol or an individual who poses a safety risk.
3. The Director will contact the emergency contact person to make arrangements for the child's transport to a place of safety. If no one is available to care for the child, the director will contact child protective services for guidance.

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## **SAFETY SURVEILLANCE**

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### **Hazard Identification and Correction**

The director, staff and PTO representative will conduct monthly inspections of the facility for hazards. The results of the site inspections will be reviewed by the director

to arrange for correction of hazardous conditions identified. Written reports of the inspection and corrections will be kept in the program files.

***Escape Hazards:*** The director will maintain and review with the staff annually a list of potential high-risk locations/situations where a child might escape unnoticed from the group. Staff will use the list to plan for increased supervision in these high-risk locations and situations. If such a high-risk escape hazard is identified between annual reviews, staff will take action immediately.

***Evacuation Hazards:*** The director will be responsible for establishing and updating a checklist of locations to be assessed during evacuation to assure complete surveillance of the building before an evacuation is declared complete. The checklist will identify usual and likely to-be-forgotten locations such as: under a cot, behind a sofa, in a toy bin, in a closet, kitchen or toilet room.

### **Review of Injury Reports**

Whenever an injury occurs, a copy of a completed Injury Report Form will be filed in the Injury Log. The Injury Log will be reviewed by the director and by the health consultant at least every three months to identify hazards for corrective action.

### **Meals and Snacks**

The Center provides breakfast, lunch and a pm snack daily. All juices served are 100% fruit juices and all milk served is either 1% or Skim. The food served meets the guidelines of the Child and Adult Care Food Program under the U.S. Department of Agriculture. Menus are posted in the classrooms and throughout the center for parental review.

Meals at the Center are served family style and are used as an opportunity for developing appropriate social behaviors, conversation skills, good nutrition habits and ecological attitudes that discourage food waste.

### **Birthday Celebrations**

Many families eagerly anticipate their young children's birthdays and enjoy making it a memorable day for the family. GACDC welcomes birthday celebrations, but ask that classroom parties remain age appropriate and simple. Snacks must be store bought and commercially packaged. Parents may want to commemorate their child's birthday by presenting a book, puzzle or other age appropriate education items to the classroom in their child's honor. Teacher's birthdays maybe recognized in a similar manner as children's birthdays.

### **SMOKING, PROHIBITED SUBSTANCES AND GUNS**

The indoor and outdoor environment and vehicles used by the program are designated as nonsmoking areas. The use of tobacco in any form, alcohol or illegal drugs is prohibited on the facility premises. Signs to this effect will be kept posted around the facility. Possession of illegal substances or unauthorized potentially toxic substances are prohibited. All childcare providers and staff will maintain sobriety while providing childcare. Caregivers, staff or other adults who are inebriated, intoxicated or otherwise under the influence of mind-altering or polluting substances will be required to leave the premises immediately. No guns or other lethal weapons will be allowed in

GACDC.

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