POLICY ON METHODS OF PARENTAL NOTIFICATION

Parents will be informed verbally under the following circumstances:

- A child is bitten and the skin is broken
- A child sustains a head injury
- A child falls a height greater than the height of the child
- An injury requiring professional medical care occurs
- A child is ill and needs to be picked up
- There is an aggressive incident between students that needs to be addressed

Parent will be notified by email under the following circumstances:

- An accident occurs and the child has a mark on his/her body as a result
- There is an aggressive incident between students
- First aid applied
- A child does not feel well

Parents will be notified by messaging through our Remini communication app under the following circumstances:

- There is an emergency at the school
- There is an emergency in the building and we have evacuated to our Safe Haven
- Something occurs at the school and we need to communicate quickly with the parents
- A minor incident/accident occurs and the child has a mark on his/her body as a result
- First aid applied

Department of Children and Families
Office of Licensing

INFORMATION TO PARENTS

Under provisions of the ***Manual of Requirements for Child Care Centers (N.J.A.C. 3A:52)***, every licensed child care center in New Jersey must provide to parents of enrolled children written information on parent visitation rights, State licensing requirements, child abuse/neglect reporting requirements and other child care matters. The center must comply with this requirement by reproducing and distributing to parents and staff this written statement, prepared by the Office of Licensing, Child Care & Youth Residential Licensing, in the Department of Children and Families. In keeping with this requirement, the center must secure every parent and staff member's signature attesting to his/her receipt of the information.

Our center is required by the State Child Care Center Licensing law to be licensed by the Office of Licensing (OOL), Child Care & Youth Residential Licensing, in the Department of Children and Families (DCF). A copy of our current license must be posted in a prominent location at our center. Look for it when you're in the center.

To be licensed, our center must comply with the Manual of Requirements for Child Care Centers (the official licensing regulations). The regulations cover such areas as: physical environment/life-safety; staff qualifications, supervision, and staff/child ratios; program activities and equipment; health, food and nutrition; rest and sleep requirements; parent/community participation; administrative and record keeping requirements; and others.

Our center must have on the premises a copy of the Manual of Requirements for Child Care Centers and make it available to interested parents for review. If you would like to review our copy, just ask any staff member. Parents may view a copy of the Manual of Requirements on the DCF website at http://www.nj.gov/dcf/providers/licensing/laws/CCCmanual.pdf or obtain a copy by sending a check or money order for $5 made payable to the "Treasurer, State of New Jersey", and mailing it to: NJDCF, Office of Licensing, Publication Fees, PO Box 657, Trenton, NJ 08646-0657.

We encourage parents to discuss with us any questions or concerns about the policies and program of the center or the meaning, application or alleged violations of the Manual of Requirements for Child Care Centers. We will be happy to arrange a convenient opportunity for you to review and discuss these matters with us. If you suspect our center may be in violation of licensing requirements, you are entitled to report them to the Office of Licensing toll free at 1 (877) 667-9845. Of course, we would appreciate your bringing these concerns to our attention, too.

Our center must have a policy concerning the release of children to parents or people authorized by parents to be responsible for the child. Please discuss with us your plans for your child's departure from the center.

Our center must have a policy about administering medicine and health care procedures and the management of communicable diseases. Please talk to us about these policies so we can work together to keep our children healthy.

Our center must have a policy concerning the expulsion of children from enrollment at the center. Please review this policy so we can work together to keep your child in our center.

Parents are entitled to review the center's copy of the OOL's Inspection/Violation Reports on the center, which are available soon after every State licensing inspection of our center. If there is a licensing complaint

investigation, you are also entitled to review the OOL's Complaint Investigation Summary Report, as well as any letters of enforcement or other actions taken against the center during the current licensing period. Let us know if you wish to review them and we will make them available for your review or you can view them online at https://childcareexplorer.njccis.com/portal/.

Our center must cooperate with all DCF inspections/investigations. DCF staff may interview both staff members and children.

Our center must post its written statement of philosophy on child discipline in a prominent location and make a copy of it available to parents upon request. We encourage you to review it and to discuss with us any questions you may have about it.

Our center must post a listing or diagram of those rooms and areas approved by the OOL for the children's use. Please talk to us if you have any questions about the center's space.

Our center must offer parents of enrolled children ample opportunity to assist the center in complying with licensing requirements; and to participate in and observe the activities of the center. Parents wishing to participate in the activities or operations of the center should discuss their interest with the center director, who can advise them of what opportunities are available.

Parents of enrolled children may visit our center at any time without having to secure prior approval from the director or any staff member. Please feel free to do so when you can. We welcome visits from our parents.

Our center must inform parents in advance of every field trip, outing, or special event away from the center, and must obtain prior written consent from parents before taking a child on each such trip.

Our center is required to provide reasonable accommodations for children and/or parents with disabilities and to comply with the New Jersey Law Against Discrimination (LAD), P.L. 1945, c. 169 (N.J.S.A. 10:5-1 et seq.), and the Americans with Disabilities Act (ADA), P.L. 101-336 (42 U.S.C. 12101 et seq.). Anyone who believes the center is not in compliance with these laws may contact the Division on Civil Rights in the New Jersey Department of Law and Public Safety for information about filing an LAD claim at (609) 292-4605 (TTY users may dial 711 to reach the New Jersey Relay Operator and ask for (609) 292-7701), or may contact the United States Department of Justice for information about filing an ADA claim at (800) 514-0301 (voice) or (800) 514-0383 (TTY).

Our center is required, at least annually, to review the Consumer Product Safety Commission (CPSC), unsafe children's products list, ensure that items on the list are not at the center, and make the list accessible to staff and parents and/or provide parents with the CPSC website at https://www.cpsc.gov/Recalls. Internet access may be available at your local library. For more information call the CPSC at (800) 638-2772.

Anyone who has reasonable cause to believe that an enrolled child has been or is being subjected to any form of hitting, corporal punishment, abusive language, ridicule, harsh, humiliating or frightening treatment, or any other kind of child abuse, neglect, or exploitation by any adult, whether working at the center or not, is required by State law to report the concern immediately to the *State Central Registry Hotline, toll free at (877) NJ ABUSE/(877) 652-2873*. Such reports may be made anonymously. Parents may secure information about child abuse and neglect by contacting: DCF, Office of Communications and Legislation at (609) 292-0422 or go to www.state.nj.us/dcf/.

POLICY ON THE RELEASE OF CHILDREN

Each child may be released only to the child's parent(s) or person(s) authorized by the parent(s) to take the child from the center and to assume responsibility for the child in an emergency if the parent(s) cannot be reached.

If a non-custodial parent has been denied access, or granted limited access, to a child by a court order, the center shall secure documentation to that effect, maintain a copy on file, and comply with the terms of the court order.

If the parent(s) or person(s) authorized by the parent(s) fails to pick up a child at the time of the center's daily closing, the center shall ensure that:

1. The child is supervised at all times;
2. Staff members attempt to contact the parent(s) or person(s) authorized by the parent(s); and
3. An hour or more after closing time, and provided that other arrangements for releasing the child to his/her parent(s) or person(s) authorized by the parent(s), have failed and the staff member(s) cannot continue to supervise the child at the center, the staff member shall call the *24-hour State Central Registry Hotline 1-877-NJ-ABUSE (1-877-652-2873)* to seek assistance in caring for the child until the parent(s) or person(s) authorized by the child's parent(s) is able to pick-up the child.

If the parent(s) or person(s) authorized by the parent(s) appears to be physically and/or emotionally impaired to the extent that, in the judgment of the director and/or staff member, the child would be placed at risk of harm if released to such an individual, the center shall ensure that:

1. The child may not be released to such an impaired individual;
2. Staff members attempt to contact the child's other parent or an alternative person(s) authorized by the parent(s); and
3. If the center is unable to make alternative arrangements, a staff member shall call the *24-hour State Central Registry Hotline 1-877-NJ-ABUSE (1-877-652-2873)* to seek assistance in caring for the child.

For school-age child care programs, no child shall be released from the program unsupervised except upon written instruction from the child's parent(s).

GUIDELINES FOR POSITIVE DISCIPLINE

Positive discipline is a process of teaching children how to behave appropriately. Positive discipline respects the rights of the individual child, the group, and the adult. Methods of positive discipline shall be consistent with the age and developmental needs of the children, and lead to the ability to develop and maintain self-control.

Positive discipline is different from punishment. Punishment tells children what they should not do; positive discipline tells children what they should do. Punishment teaches fear; positive discipline teaches self-esteem.

You can use positive discipline by planning ahead:

- Anticipate and eliminate potential problems.
- Have a few consistent, clear rules that are explained to children and understood by adults.
- Have a well-planned daily schedule.
- Plan for ample elements of fun and humor.
- Include some group decision-making.
- Provide time and space for each child to be alone.
- Make it possible for each child to feel he/she has had some positive impact on the group.
- Provide the structure and support children need to resolve their differences.
- Share ownership and responsibility with the children. Talk about our room, our toys.

You can use positive discipline by intervening when necessary:

- Re-direct to a new activity to change the focus of a child's behavior.
- Provide individualized attention to help the child deal with a particular situation.
- Use time-out -- by removing a child for a few minutes from the area or activity so that he/she may gain self-control. (One minute for each year of the child's age is a good rule of thumb).
- Divert the child and remove from the area of conflict.
- Provide alternative activities and acceptable ways to release feelings.
- Point out natural or logical consequences of children's behavior.
- Offer a choice only if there are two acceptable options.
- Criticize the behavior, not the child. Don't say "bad boy" or "bad girl." Instead you might say "That is not allowed here."

You can use positive discipline by showing love and encouragement:

- Catch the child being good. Respond to and reinforce positive behavior; acknowledge or praise to let the child know you approve of what he/she is doing.
- Provide positive reinforcement through rewards for good behavior.
- Use encouragement rather than competition, comparison or criticism.
- Overlook small annoyances, and deliberately ignore provocations.
- Give hugs and caring to every child every day.
- Appreciate the child's point of view.
- Be loving, but don't confuse loving with license.

Positive discipline is NOT:

- Disciplining a child for failing to eat or sleep or for soiling themselves
- Hitting, shaking, or any other form of corporal punishment
- Using abusive language, ridicule, harsh, humiliating or frightening treatment or any other form of emotional punishment of children
- Engaging in or inflicting any form of child abuse and/or neglect
- Withholding food, emotional responses, stimulation, or opportunities for rest or sleep
- Requiring a child to remain silent or inactive for an inappropriately long period of time

Positive discipline takes time, patience, repetition and the willingness to change the way you deal with children. But it's worth it, because positive discipline works.

POLICY ON THE DISCIPLINING OF CHILDREN

It is our philosophy that discipline is not punishment. At all times, we strive to teach our students to make positive social choices that help them be dynamic members of our community. We work on skills that support the development of positive self-esteem, good communication skills and self-discipline. We always expect kindness and consideration for others and want to instill pride and good feelings in every child.

At Kaplan Preschool you can expect that we WILL

- create a positive "yes" environment for children by ensuring that our guidance is developmentally and age appropriate and focused on promoting positive behaviors
- use a respectful tone when speaking to children and our language is used to praise, encourage and explain and to provide appropriate words to help children solve conflict and express their emotions
- model appropriate behavior for children and provide opportunities for child choice, decision-making and problem-solving. We provide alternatives and redirect children to appropriate behaviors.

At Kaplan Preschool you can expect that we will NOT

- use an inappropriate tone or language to shame, humiliate, threaten or intimidate children. We refrain from name-calling and labeling.
- use corporal punishment or any physical contact as a means of showing disapproval or punishment. (This would include but is not limited to spanking, pushing, pulling, biting, grabbing.)
- use food as a reward or a punishment in any way, nor will we force or withhold sleep.
- withhold or force physical activity.

This policy is to aid your child's social/emotional growth. All the teachers at Kaplan have training in Early Childhood Education and developmentally appropriate practices.

My signature below indicates that I have read, understand and will comply with this discipline policy.

_____ _____

Signature of parent Date

updated Jul/26

EXPULSION POLICY

NAME OF CENTER: _____

Unfortunately, there are sometimes reasons we have to expel a child from our program either on a short term or permanent basis. We want you to know we will do everything possible to work with the family of the child(ren) in order to prevent this policy from being enforced.

The following are reasons we may have to expel or suspend a child from this center:

IMMEDIATE CAUSES FOR EXPULSION:

- The child is at risk of causing serious injury to other children or himself/herself.
- Parent threatens physical or intimidating actions toward staff members.
- Parent exhibits verbal abuse to staff in front of enrolled children

PARENTAL ACTIONS FOR CHILD'S EXPULSION:

- Failure to pay/habitual lateness in payments.
- Failure to complete required forms including the child's immunization records.
- Habitual tardiness when picking up your child.
- Verbal abuse to staff.
- Other (explain)

CHILD'S ACTIONS FOR EXPULSION:

- Failure of child to adjust after a reasonable amount of time.
- Uncontrollable tantrums/ angry outbursts.
- Ongoing physical or verbal abuse to staff or other children.
- Excessive biting.
- Other (explain)

SCHEDULE OF EXPULSION:

If after the remedial actions above have not worked, the child's parent/guardian will be advised verbally and in writing about the child's or parent's behavior warranting an expulsion. An expulsion action is meant to be a period of time so that the parent/ guardian may work on the child's behavior or to come to an agreement with the center. The parent/guardian will be informed regarding the length of the expulsion period and the expected behavioral changes required in order for the child or parent to return to the center. The parent/guardian will be given a specific expulsion date that allows the parent sufficient time to seek alternate child care (approximately one to two weeks' notice depending on risk to other children's welfare or safety). Failure of the child/parent to satisfy the terms of the plan may result in permanent expulsion from the center.

A CHILD WILL NOT BE EXPELLED IF A PARENT/GUARDIAN:

- Made a complaint to the Office of Licensing regarding a center's alleged violations of the licensing requirements.
- Reported abuse or neglect occurring at the center.
- Questioned the center regarding policies and procedures.
- Without giving the parent sufficient time to make other child care arrangements.

PROACTIVE ACTIONS THAT CAN BE TAKEN IN ORDER TO PREVENT EXPULSION:

- Try to redirect child from negative behavior.
- Reassess classroom environment, appropriateness of activities, supervision.
- Always use positive methods and language while disciplining children.
- Praise appropriate behaviors.
- Consistently apply consequences for rules.
- Give the child verbal warnings.
- Give the child time to regain control.
- Document the child's disruptive behavior and maintain confidentiality.
- Give the parent/guardian written copies of the disruptive behavior that might lead to expulsion.
- Schedule a conference including the director, classroom staff, and parent/guardian to discuss how to promote positive behaviors.
- Give the parent literature of other resources regarding methods of improving behavior.
- Recommend an evaluation by professional consultation on premises.
- Recommend an evaluation by local school district study team.

POLICY ON THE USE OF TECHNOLOGY

The Kaplan Preschool (KPS) provides an activity-focused early learning environment. We believe children learn best through active participation, hands-on experiences, interactive conversation and exploration. For this reason, KPS does not allow any "screen time" for the children.

The school uses a family communication and documentation application called Remini. Each class has a school issued iPad loaded with the Remini application to be used by the teachers for attendance logs and to take photos of the children and their work. The iPads may be used occasionally to research a question that arises during a classroom discussion or for visual materials to enhance the curriculum. Only the school assigned iPads or school cameras will be used for all pictures taken of the students and their work.

SOCIAL MEDIA POLICY

This policy includes (but is not limited to) the following technologies:

- *Social networking sites (i.e. Facebook, Instagram, Twitter/X, TikTok, Snapchat), Blogs, Discussion forums, Collaborative online spaces, Media Sharing services (e.g. YouTube)*
- *Kaplan Preschool Website*

Kaplan Preschool aims to ensure that our school, students, educators or families are not compromised on any form of social networking or related website. However, we acknowledge that social media can play an important role in maintaining communication with families and the local community in today's current society.

The Kaplan Preschool **Facebook page** is used as an additional means of communication between our school and the families we serve. The following conditions are put in place to ensure the privacy, dignity and rights of the preschool, our students, staff, and families.

- *Only use first names on our page*
- *Respect the rights and confidentiality of others*
- *Do not impersonate or falsely represent another person.*

SOCIAL MEDIA

The posting of confidential and identifying information about the children, parents, or staff at KPS on social media (e.g., Facebook, Instagram, Twitter, etc.) is strictly prohibited. In no way does KPS wish to abridge the rights of its employees to engage in critical commentary and observations that may relate to KPS and its operations; however, when such commentary and observations occur within a public forum and contain confidential information, it may result in disciplinary action for the employee.

The posting of non-confidential information (promotional materials and the like) shall be restricted to official channels of communication (the Kaplan Preschool website/Facebook page, etc.), unless prior written approval from the Director has been obtained.

Signature_____ Date_____

REST AND SLEEP REQUIREMENTS FOR CHILDREN IN EARLY CHILDHOOD PROGRAM

As per state licensing requirements, in early childhood programs such as Kaplan Preschool (KPS) we provide opportunities for daily rest and sleep as follows:

- For children over the age of 18 months and under the age of four years, KPS shall provide:
    - Daily rest or sleep for each child who attends KPS for four or more consecutive hours;
    - Daily rest or sleep for each child who attends KPS for fewer than 4 consecutive hours, but whose individual physical needs call for a rest period while the child is at KPS;
    - An alternative quiet activity for each child who has rested or slept for 30 minutes and does not appear to need additional rest or sleep.

- Each child that is resting will be provided with a cot/rest mat that is licensing-approved and also meets the following requirements:
    - Each cot or mat that is used for rest and sleep shall be covered with a sheet, blanket or other covering. An additional covering shall be provided for use as a covering for each child.

Policy on the Management of Communicable Diseases

If a child exhibits any of the following symptoms, the child should not attend the center. If such symptoms occur at the center, the child will be removed from the group, and parents will be called to take the child home.

- Severe pain or discomfort
- Acute diarrhea
- Episodes of acute vomiting
- Elevated oral temperature of 101.5 degrees Fahrenheit
- Lethargy
- Severe coughing
- Yellow eyes or jaundiced skin
- Red eyes with discharge
- Infected, untreated skin patches
- Difficult or rapid breathing
- Skin rashes in conjunction with fever or behavior changes
- Skin lesions that are weeping or bleeding
- Mouth sores with drooling
- Stiff neck

Once the child is symptom-free, or has a health care provider's note stating that the child no longer poses a serious health risk to himself/herself or others, the child may return to the center unless contraindicated by local health department or Department of Health.

EXCLUDABLE COMMUNICABLE DISEASES

A child or staff member who contracts an excludable communicable disease may not return to the center without a health care provider's note stating that the child presents no risk to himself/herself or others.

Note: If a child has chicken pox, a note from the parent stating that all sores have dried and crusted is required.

If a child is exposed to any excludable disease at the center, parents will be notified in writing.

COMMUNICABLE DISEASE REPORTING GUIDELINES

Some excludable communicable diseases must be reported to the health department by the center. The Department of Health's Reporting Requirements for Communicable Diseases and Work-Related Conditions Quick Reference Guide, a complete list of reportable excludable communicable diseases, can be found at:

http://www.nj.gov/health/cd/documents/reportable_disease_magnet.pdf.

Medication Administration in Child Care Policy and Procedures

PURPOSE: ***This policy was written to encourage communication between the parent, the child's health care provider and the child care provider to assure maximum safety in the giving of medication to the child who requires medication to be provided during the time the child is in child care.***

INTENT: ***Assuring the health and safety of all children in our Center is a team effort by the child care provider, family, and health care provider. This is particularly true when medication is necessary to the child's participation in child care. Therefore, an understanding of each of our responsibilities, policies and procedures concerning medication administration is critical to meeting that goal.***

GUIDING PRINCIPLES and PROCEDURES:

1. When ever possible, it is best that medication be given at home. Dosing of medication can frequently be done so that the child receives medication prior to going to child care, and again when returning home and/or at bedtime. The parent/guardian is encouraged to discuss this possibility with the child's health care provider.

2. The first dose of any medication should always be given at home and with sufficient time before the child returns to child care to observe the child's response to the medication given. When a child is ill due to a communicable disease that requires medication as treatment, the health care provider may require that the child be on a particular medication for 24 hours before returning to child care. This is for the protection of the child who is ill as well as the other children in child care.

3. Medication will only be given when ordered by the child's health care provider and with written consent of the child's parent/legal guardian. A "Permission to Give Medication in Child Care" form is attached to this policy and will hereafter be referred to as Permission Form. All information on the Permission Form must be completed before the medication can be given. Copies of this form can be duplicated or requested from the child care provider.

4. "As needed" medications may be given only when the child's health care provider completes a Permission Form that lists specific reasons and times when such medication can be given.

5. Medications given in the Center will be administered by a staff member designated by the Center Director and will have been informed of the child's health needs related to the medication and will have had training in the safe administration of medication.

6. Any prescription or over-the-counter medication brought to the child care center must be specific to the child who is to receive the medication, in its original container, have a child-resistant safety cap, and be labeled with the appropriate information as follows:
   - ✓ Prescription medication must have the original pharmacist label that includes the pharmacists phone number, the child's full name, name of the health care provider prescribing the medication, name and expiration date of the medication, the date it was prescribed or updated, and dosage, route, frequency, and any special instructions for its administration and/or storage. It is suggested that the parent/guardian ask the pharmacist to provide the medication in two containers, one for home and one for use in child care.
   - ✓ Over-the-counter (OTC) medication must have the child's full name on the container, and the manufacturer's original label with dosage, route, frequency, and any special instructions for administration and storage, and expiration date must be clearly visible.
   - ✓ Any OTC without instructions for administration specific to the age of the child receiving the medication must have a completed Permission Form from the health care provider prior to being given in the child care center.

7. Examples of over-the-counter medications that may be given include:
   - ✓ Antihistamines
   - ✓ Decongestants
   - ✓ Non-aspirin fever reducers/pain relievers
   - ✓ Cough suppressants
   - ✓ Topical ointments, such as diaper cream or sunscreen

8. All medications will be stored:
   - ✓ Inaccessible to children
   - ✓ Separate from staff or household medications
   - ✓ Under proper temperature control
   - ✓ A small lock box will be used in the refrigerator to hold medications requiring refrigeration.

9. For the child who receives a particular medication on a long-term daily basis, the staff will advise the parent/guardian one week prior to the medication needing to be refilled so that needed doses of medication are not missed.

10. Unused or expired medication will be returned to the parent/guardian when it is no longer needed or be able to be used by the child.

11. Records of all medication given to a child are completed in ink and are signed by the staff designated to give the medication. These records are maintained in the Center. Samples of the forms used are attached to this policy and include:

- ✓ Permission to Give Medication in Child Care
- ✓ Universal Child Health Record
- ✓ Emergency Contact Sheet
- ✓ Medication Administration Log
- ✓ Medication Incident/Error Report

12. Information exchange between the parent/guardian and child care provider about medication that a child is receiving should be shared when the child is brought to and pick-up from the Center. Parents/guardians should share with the staff any problems, observations, or suggestions that they may have in giving medication to their child at home, and likewise with the staff from the center to the parent/guardian.

13. Confidentiality related to medications and their administration will be safeguarded by the Center Director and staff. Parents/guardians may request to see/review their child's medication records maintained at the Center at any time.

14. Parent/guardian will sign all necessary medication related forms that require their signature, and particularly in the case of the emergency contact form, will update the information as necessary to safeguard the health and safety of their child.

15. Parent/guardian will authorize the Director or Director Designee to contact the pharmacist or health care profiver for more information about the medication the child is receiving, and will also authorize the health care provider to speak with the Director or Director's designee in the event that a situation arises that requires immediate attention to the child's health and safety particularly is the parent/guardian cannot be reached.

16. Parent/guardian will read and have an opportunity to discuss the content of this policy with the Director or Director's designee. The parent signature on this policy is an indication that the parent accepts the guidelines and procedures listed in this policy, and will follow them to safeguard the health and safety of their child. Parent/guardian will receive a copy of the signed policy including single copies of the records referenced in this policy.

17. The Medication Administration in Child Care Policy will be reviewed annually by the following:

18.

- ❑ Child Care Director _____
- ❑ Licensing Consultant _____
- ❑ Child Care Health Consultant _____
- ❑ Parent/guardian _____
- ❑ Other(specify) _____
- ❑ Other(specify) _____

EFFECTIVE DATE OF THIS POLICY:	PARENT SIGNATURE:	DATE:
	PARENT SIGNATURE:	DATE:
	CENTER DIRECTOR/DESIGNEE SIGNATURE:	DATE:

REFERENCES: *Information for the Medication Administration in Child Care Policy was derived from the current* ***Manual of Requirements for Child Care Centers*** *in New Jersey and* ***Caring For Our Children—The National Health and Safety Performance Standards for Out-of-Home Child Care Programs,*** *second edition.*

The 5 Rights to Giving Medications to Children in Child Care

The 5 Rights	
CHILD **"Is this the right child—even though you think you know—you must check?"**	• Do you know the child's first and last name? • Is this the same child whose full name appears on the: ✓ Health care provider form ✓ Parental permission form ✓ Medication container label • When unsure as to the identity of the child: ✓ Photo record of child to verify identity with the Director of the child care agency, or designee who knows the child to confirm the Identity of the child
MEDICINE **"Is this the correct Medicine?"**	• Does the label on the medication container match the name of the medication as it appears on the Permission to Administer Medication form? ✓ The health care provider communication section ✓ The parental permission section • What is the expiration date on the medication container label? Has the medication expired?
DOSE **"Are you giving the exact amount of medicine?"**	• Does the dose follow the directions on the permission form and the medication container label? ✓ The health care provider communication section ✓ The parental permission section ✓ The medication container • Is the dose clearly stated? • Do you have the correct measuring device to give the medication?
ROUTE **"Are you using the proper method to give the medicine?"**	• How is this medication to be given? (By mouth, ear, eye, nose or applied to the skin) • Does the route of administration match in all the appropriate places? ✓ The health care provider communication form ✓ The parental permission form ✓ The medication container
TIME **"Is it the correct time to give the medicine?"**	• When was the last time the medicine was reported to have been given by the parent? • When was the last time the medicine was given as recorded on the Medication Administration Record? • Does the time match the instructions in all the appropriate places? ✓ The health care provider communication form ✓ The parental permission form ✓ The medication container • Are there specific instructions as to when or how the medication is to be given? Such as with food, on an empty stomach, or before/after eating. • If the medicine is to be given "as needed", does the child have symptoms that match the directions on the health care provider communication and parental permission forms?

POLICY ON PARENT NOTIFICATION

We are required to notify parents directly when one of the following occurs at the school. We will make every effort to contact a parent by phone. If we are not able to reach you, we will email parents. If a parent does not respond within 15 minutes we will make another attempt to reach a parent by phone.

- **Child is bitten** - Skin is broken
- **Child sustains head or facial injury**
- **Child falls greater than the height of the child**
- **If a child requires professional attention** - We will call parents immediately, if one parent is not reached - we will follow up with their emergency contact.

My signature below indicates that I have read, understand and will comply with this notification policy.

_____ _____

Signature of parent Date