

**Stephen F. Austin State University  
Early Childhood Lab  
Parent Handbook**



**2021-2022**

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Dear Parents,

Congratulations! We are excited your precious little one is joining the Early Childhood Laboratory (ECHL) family, as a Little Jack. We are proud you have chosen us to provide high-quality child care for your child. The ECHL takes pride in our students' learning through a constructivist theory approach. Through this approach we look forward to fostering the following program goals: autonomy, integrity, openness, problem solving and emerging academics.

The ECHL has established a number of policies concerning program and classroom practices. These guidelines were developed to comply with state licensing standards, national accreditation criteria, and to reflect input from the SFASU Administration, teachers, and parents. The policies and procedures are written to provide a clear description of expectations for all parties. Our goal is to provide exemplary childcare services to our community's families.

We hope your experience at our ECHL is a good one and that you are secure in the fact that your child is well cared for. Please communicate with us regarding any questions or concerns.

Best Regards,



Crystal Adams  
ECHL Director  
936-468-4006

Mailing Address: PO Box 6105, SFA Station  
Nacogdoches, Texas, 75962  
Website address: [www.sfasu.edu/echl](http://www.sfasu.edu/echl)  
Facebook: @sfaechl

Parents may review a copy of the minimum standards in the front office and our recent licensing report in the office or display case located across from our infant classroom.

Contact information for the local licensing agency  
936.633.3745 office  
Texas Department of Protective and Regulatory Services (TDPRS)  
<https://www.dfps.state.tx.us/>  
Child Abuse Hotline  
1-800.858.5400

## HISTORY

The provision for quality education and care for young children has been a vital aspect of the academic program at Stephen F. Austin State University for many years. In 1969, The Early Childhood Laboratory started as The University Kindergarten and consisted of one classroom. This classroom was used as a laboratory for Elementary Education students who planned to teach in the newly funded state kindergartens. Located in the Manse of the Westminster Presbyterian Church, the SFA University Kindergarten operated on a half-day basis.

The following year the program moved on the SFA campus. From 1970 until 1975, this classroom was housed in an old church building on Baker Street behind Wilson Dormitory. During this period, the kindergarten was expanded to two, half-day kindergarten sessions.

Also operating on this campus during the same time period was a Home Economics Nursery School, which started in 1936. This school served infants through four-year-olds in a half-day format. The Early Childhood Laboratory, which opened in 1975, was designed to serve infants through five-year olds. This new facility met the educational needs of a growing demand for early childhood students in both Elementary Education and Home Economics. The new facility provided the community with provisions for all-day, childcare in an educational setting that was to serve as a model in the field. The Home Economics Nursery School continued to operate until 1979, when the programs merged. At this time, the space in Home Economics became the new primary or first grade classroom expanding the age of children served from infants to first grade.

Ready acceptance of the Early Childhood Laboratory by parents and children, and the rapid growth of the early childhood program, as well as the field of Early Childhood Education, resulted in severe space problems before the building was yet ten years old. In 1983-84, another expansion doubled the size of the Early Childhood Laboratory allowing age groupings to be designed to better serve children and college students.

In 1995, public school educators requested that the Lab be extended to house a Nacogdoches Public School, second-grade classroom. After several years of operation, the Lab's kindergarten, first and second grades plus an additional third and fourth grade became a collaborative charter school between SFASU and Nacogdoches Public Schools. A fifth-grade classroom was added in 2004. During the spring 2008 semester, SFASU applied to the state to be approved for a University Charter. This was by the State Board of Education unanimously approved and opened the University Charter in fall 2008; it serves children kindergarten through fifth grade.

In August 2009, the Early Childhood Lab, SFA Charter School, and Department of Elementary Education moved into the \$30.8 million East Texas Early Childhood Research Center. This state-of-the-art facility allows these three programs as well as other campus departments to play a leading role in research and development in the field of education.

During each long-term semester, more than 2000 college students use the laboratory for observation, participation, and other educational purposes. Using a [Constructivist](#) Curriculum, The Early Childhood Program at SFASU is recognized as one of the most outstanding Early Childhood programs in the nation. The college program is accredited by National Council for the Accreditation of Teachers Education and the children's program is accredited by National Association of the Education of Young Children and Texas Rising Star. Serving over 4000 college students and 130 children each year, this dynamic program continues to meet the demands of a changing university, community, and state.

By Dr. Janice Pattillo

# Stephen F. Austin State University

## Early Childhood Laboratory

### Parent Handbook

*The Early Childhood Lab (ECHL) is an extension of Stephen F. Austin State University (SFASU) in Nacogdoches, Texas.  
Official SFASU policies and procedures pre-empt any ECHL policies or procedures.*

#### PURPOSE

The purpose of this handbook is to familiarize families with current Early Childhood Lab (ECHL) policies, practices, and standards. It is intended to help answer questions for parents and pave the way for a successful childcare program and parent/staff relationship. For a complete compilation of ECHL policies and procedures, visit the ECHL office, located on the first floor of the Early Childhood Research Center.

Policies can change at any time and changes supersede handbook provisions that are not compatible with changes. Parents are notified of updates to this handbook as they occur. Questions regarding expectations, policies, and procedures should be addressed to the ECHL administration.

#### MISSION and ROLE of ECHL

The ECHL is a demonstration and training unit of Stephen F. Austin State University, field-based center for the James I. Perkins College of Education, and a subunit of the Department of Elementary Education that serves two principle functions:

- ✦ model demonstration program of childcare and early childhood education to SFASU students and
- ✦ training site for SFASU students in connection with their academic studies in child development and early childhood education

The ECHL provides classroom facilities and 'hands-on' and observational experiences with children and supervision for students enrolled in courses dealing with children. It serves community families and is licensed by Texas Health & Human Services, Child Care Licensing Division and accredited by the National Association for the Education of Young Children (NAEYC) and Texas Rising Star.

#### PHILOSOPHY and GUIDING PRINCIPLES

##### Early Childhood Lab Program

The ECHL program is based on the following tenets:

- ✦ Children have an intrinsic motivation to act and to organize their actions.
- ✦ A variety of educational opportunities are more intellectually productive than is a specified set of lessons offered in sequential order to all children.
- ✦ Behaviors that reveal autonomy, openness, problem solving ability and personal integrity are critically needed in a modern, technological, democratic society.

The program provides opportunities for children to develop:

- ✦ emerging academics
- ✦ sensory/perceptual/motor functioning
- ✦ inter -and intra-personal competence
- ✦ thinking and reasoning skills
- ✦ functional use of language conceptualizing process

These tenets are the foundation upon which intellectual and personal competences are based. The ECHL program is designed to facilitate the total development of young children. Its curriculum is designed to develop intellectual and personal competence rather than to train children in performing a limited set of academic skills.



## Constant/Primary Caregiver

A critical component of quality care is a primary or constant caregiver. Secure attachment with a constant caregiver can reduce stress for both a child and his/her parents. Children need at least one adult who meets their needs and, ideally, is usually nearby. At home, this is a family member; however, when a child attends a childcare, it is important for a teacher to share this responsibility to support the child's emotional wellbeing. Primary caregiving supports healthy development. It creates predictability and familiarity to help the child feel safe. This approach enhances the caregiver's ability to work in partnership with families, communicating with parents during drop-off and pick-up, learning about the family's cultural values and child-rearing practices, and sharing insights and information about the child's development.

The practice of primary caregiving involves ensuring that each child interacts primarily, but not exclusively, with one or two adults in a childcare setting, rather than going from adult to adult for different activities through the day. This practice gives primary caregivers a chance to build close personal relationships with children in their care. Your child will be cared for by all teachers and staff, but in addition, your child's constant caregiver will be the primary person to help your child during activities such as feeding/eating, napping, medication administration, assessments, and problem solving. Your child's constant caregiver is your primary contact for questions/concerns, parent conferences, and daily feedback.

## NAEYC Code of Ethical Conduct

The NAEYC Code of Ethical Conduct offers guidelines for responsible behavior and sets forth a common basis for resolving the principle ethical dilemmas encountered in early childhood care and education. The ECHL staff adheres to the NAEYC standards and the following *Statement of Commitment* as a professional guide.

### Statement of Commitment

As individuals who work with young children, we commit ourselves to furthering the values of early childhood education as they are reflected in the NAEYC Code of Ethical Conduct. To the best of our ability, we will:

- ✚ Be open to new ideas and be willing to learn from the suggestions of others.
- ✚ Continue to learn, grow, and contribute as a professional.
- ✚ Ensure that programs for young children are based on current knowledge of child development and early childhood education.
- ✚ Honor the ideals and the principles of the NAEYC Code of Ethical Conduct.
- ✚ Maintain high standards of professional conduct.
- ✚ Recognize how personal values, opinions, and biases affect professional judgment.
- ✚ Respect and support families in their task of nurturing children.
- ✚ Respect colleagues in early childhood education and support them in maintaining the NAEYC Code of Ethical Conduct.
- ✚ Serve as an advocate for children, their families, and their teachers in the community and society.

### Statement of Confidentiality

All personal information collected by the ECHL is considered private and confidential to the extent allowed by law. No one but ECHL office personnel and teachers have access to personal files. Upon employment, each employee signs a confidentiality statement that they understand and will uphold the confidentiality policies and procedures.

Client information is used internally in providing resource and referral services. Staff always demonstrates non-judgmental, respectful service delivery in discussing individual cases and in the handling of client records. For reporting purposes and supply-and-demand requests, aggregate data and non-identifying information may be shared.

Mailing lists of clients are never made available to the public, sold for marketing purposes, or distributed without the prior approval by parties involved, unless required by law.

### Statement of Non-Discrimination Commitment

The ECHL does not discriminate against any child or family based on race, color, national origin, sex, religion, or disabilities. Reasonable accommodations are made to provide services to all children enrolled in our program.

The following statement comes from [Non-discrimination Policy](#) on SFASU's Human Resources website.

*Stephen F. Austin State University strives to provide an educational and work environment that affirms the rights and dignity of each individual. It is the policy of the university, in accordance with federal and state law, to prohibit unlawful discrimination on the basis of race, color, religion, national origin, sex, age, disability, genetic information, citizenship and veteran status. Additionally, Stephen F. Austin State University prohibits discrimination on the basis of sexual orientation, gender identity, and gender expression. Unlawful discrimination based on sex includes discrimination defined as sexual harassment.*

## LEADERSHIP INFORMATION

### Administration

Director: Crystal Adams  
[crystal.adams@sfasu.edu](mailto:crystal.adams@sfasu.edu)  
Office: 936.468.4006  
FAX: 936.468.8226  
[echladmin@sfasu.edu](mailto:echladmin@sfasu.edu)

Admin Assistant: Rhonda Lewis  
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Office: 936.468.4006  
FAX: 936.468.8226

Office Assistant/Sub: Ana Olguin  
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Office: 936.468.5316  
FAX: 936.468.8226

### Early Childhood Management Team

The ECHL Management Team is composed of ECHL staff with knowledge in areas of concern, the Department of Elementary Education Early Childhood Undergraduate Coordinator, University faculty members with expertise in areas of concern, SFASU's Department of Elementary Education chair, and the James I. Perkins College of Education dean. This group serves in an advisory capacity to provide support and guidance to the Director.

## PROGRAM QUALITY

### ACCREDITATION, LICENSING, AND PROGRAM QUALITY

The ECHL aligns our program and curriculum with federal and state guidelines, is licensed by Texas Health & Human Services, and accredited by the National Association for the Education of Young Children (NAEYC) and Texas Rising Star.

## Accrediting and Licensing Agencies

The ECHL is governed by the following entities:

#### Stephen F. Austin State University (SFASU)

The ECHL program is a part of SFASU and all staff members are considered State employees. All SFASU policies and procedures apply to the ECHL and its employees.

#### Texas Health & Human Services (THHS)

THHS regulates childcare centers by enforcing the Minimum Standards for Child Care Facilities. A childcare licensing representative monitors our facility annually.

#### Texas Department of Health (TDH)

The ECHL's primary responsibility to TDH is to enforce the mandated immunizations for children who are enrolled in the program and to report incidents of communicable illness or diseases that TDH deems reportable to their agency.

#### Texas Rising Star

The Texas Rising Star program is "a voluntary, quality-based child care rating system of child care providers participating in the Texas Workforce Commission's subsidized child care program." TRS certification is available to Licensed Centers and Licensed and Registered Child Care Home providers who meet certification criteria. The TRS Provider Certification System offers three levels of certification (Two-Star, Three-Star, and Four-Star) to encourage providers to attain progressively higher certification requirements leading to a Four-Star level. The ECHL is a Four-Star level certification.

#### National Association for the Education of Young Children (NAEYC)

As an accredited center, the ECHL is held to a higher standard than required by THHS Minimum Standards. The ECHL must reapply for reaccreditation every five years to maintain its accreditation status.

### Program Quality

High quality early childhood education benefits children. Children who experience a quality program are more likely to demonstrate greater academic success, enhanced self-esteem, and increased self-control. For more information about program quality, visit the following websites:

**Caring for Our Children (CFOC)** <http://cfoc.nrckids.org/>

**Child Development Associate Council (CDA)** <http://www.cdacouncil.org>

**National Association for the Education of Young Children** <http://www.naeyc.org>

**NAEYC Accreditation, the Right Choice for Kids** <http://www.rightchoiceforkids.org>

**Texas Health & Human Services (THHS)** <http://www.hhs.state.tx>

**Texas Education Agency – Pre-K Curriculum Guidelines (TEA)**

<http://www.tea.state.tx.us/curriculum/early/prekguide.html>

## Hours of Operation

The ECHL is open Monday through Friday from 7:10 a.m. to 5:20 p.m. This center is closed for State holidays, spring break, professional development, and teacher workdays as noted on the online calendar.

**ECHL Closings/Holidays:** The current Agreement Form and ECHL calendar include a list of anticipated Lab closings and holidays. In the event our nation calls a special national day or SFASU closes, the ECHL will notify families of this observance. No refunds are made for ECHL closings.

**Weather/Other Emergency Closings:** The ECHL follows SFASU's observances of school closings in the event of inclement weather conditions or emergencies. The ECHL office staff monitors radio reports during inclement weather to remain aware of changing conditions. Parents must pick-up their child/ren within 30 minutes of an announced closure time to avoid late pickup fees. No refunds are made for Lab closings.

## Building Access and Parking

All parents are issued a swipe card to gain access to the building, classrooms and observation booths. Should you lose your swipe card, a replacement fee of \$25.00, will be assessed. The ECHL loading/unloading entrance door, located on the south side of the ECRC, will unlock with issued swipe cards from 7:10 a.m. to 9:00 a.m. Swipe cards will again work from 3:00 p.m. until 5:20 p.m. If you need in our building between 9:00 a.m. and 3:00 p.m. or are picking up your child after the doors have locked at 5:15 p.m., use the main, front entrance. Parent swipe cards will access the classrooms and observation booths between 7:10 a.m. and 5:20 p.m.

You may temporarily park in the loading and unloading zone. When using this drive, all vehicles must pull forward and avoid blocking the entrance or exit to the drive. Vehicles must be turned off and not left idling except if vehicles need to idle in extreme heat or cold to maintain interior or engine temperatures. If you plan to be in the building for any length of time, please park in the main lot in the front of the building.

## Children's Files

All children's files are stored in the ECHL Records Room. This is a secure area with limited, approved access only.

## Employees

The ECHL employs five Lead Teachers, five Assistant Teachers, one full-time Substitute Teacher/ Office Assistant, one Assistant to the Director, and between 75 and 100 teacher assistants (depending on the semester,) all of whom work under the leadership of the ECHL Director. Numerous SFASU students are employed on a part-time basis.

## Food Services

An institutionally equipped kitchen provides nutritious morning/afternoon snacks to children and hot lunches to children and staff. See page 18 for details about food.

## Gang Free Zone







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

## Guided Supervision

New teaching staff does not work alone with children until 1) they have cleared their THHS Criminal History Check and 2) they have received an initial orientation to the program and their classroom.

## Programs and Ratios

Our program is designed to serve children at five levels of development with stated child-to-adult ratios. All programs, with the exception of After School Care (ASC) and Summer Fun, operate year-round. ASC is offered to school-aged children when SFASU Charter School is in session and Summer Fun operates 7:10 a.m. – 5:20 p.m. during June, July, and part of August.

-  **Infants** (ages 2 – 12 months approximately)  
Ratio: 8 - 10 children/2 teachers and 1- 3 teacher assistants
-  **Toddler I** (ages 13 – 24 months approximately)  
Ratio: 12 - 14 children: 2 teachers and 1 – 3 teacher assistants
-  **Toddler II** (ages 25 – 36 months approximately)  
Ratio: 16 - 18 children: 2 teachers and 1 – 3 teacher assistants
-  **Pre-K I** (age 4-5 years)  
Ratio: 20 – 22 children: 2 teachers and teacher assistants at selected times
-  **Pre-K II** (age 4-5 years)  
Ratio: 20 – 22 children: 2 teachers and teacher assistants at selected times
-  **School Age After School Care** (age 5 years through 5<sup>th</sup> grade)  
Ratio: 25 children: 2 teachers and/or teacher assistants

- ✦ **Summer Fun** (age 5 years through completion of 5<sup>th</sup> grade)  
Ratio: 25 children: 2 teachers and/or teacher assistants

**Ratios must be maintained at all times, including outdoors and when emergency procedures are in effect.**

## ENROLLMENT PROCEDURES

The ECHL enrolls children, ages 8 weeks to five years of age. Parents of prospective students are encouraged to observe the ECHL class appropriate for their child. If interested in enrolling their child in the program, the following procedures must be followed:

### Childcare is Tuition-based

The ECHL is open to the public and is tuition-based; tuition is based on the child's age. Applicants may apply for a classroom position in the month of March during Open Enrollment.

### Open Enrollment

Children are accepted in the ECHL on a first-come, first-served basis. Exceptions include:

1. a child who has a sibling currently enrolled and attending the ECHL is given priority over one who does not
2. a child of a full-time SFASU employee is given priority over one who is not
3. length of time on the wait list is used in allocating positions
4. the ECHL management exercises professional judgment in filling vacancies and consideration is given to the unique makeup of each classroom in order to maintain the highest quality care for all children in the facility

### Application Form and Fee

1. Applications are accepted year-round. The child must be born in order to make an application.
2. Submission of an application form with confirmed application fee payment holds a child's place on the wait list for a one-year period.
3. Renewal each March ensures a child will remain on the list and will hold the current list placement status (or possibly move up if others do not renew their application or decided not to attend.) Renewal is not automatic. (See *Application Renewal* below.)
4. A one-time application fee of \$25.00 is assessed with submittal of the application. An application is not considered complete until the fee is paid and the information on the application form is complete.

### Application Notification and Acceptance

1. Typical ECHL starting dates are June through August.
2. Notification of an available space is normally given one month prior to the starting date. Once notified, an applicant has 48 hours to accept or decline the position.
3. If a position becomes available at another time during the year, the applicant next on the list is notified of the vacancy and given 48 hours to accept or decline the position. Attendance must begin within one week of notification of the available position.
4. Should a parent decide to not take the available position, the child's application is placed on the bottom of the waiting list. The parent must reapply the following year.

### Application Renewal

Application renewal must take place annually to remain on the wait list. Renewals are accepted anytime from March 1st through March 31st. **No renewal fee is required.** Application renewal must be done in person at the ECHL administrative office. An application that is not renewed is considered void and is removed from the wait list. Once an application is removed from the wait list, an applicant must reapply, paying the application fee, and is placed on the wait list as if the applicant is new.

### Contacting Applicants of a Vacancy

Four attempts are made to contact applicants. After 72 hours, if no answer is received by email or at the home or work numbers provided on the application, the ECHL will move to the next name on the wait list to allocate the vacant position. The application is then moved to the bottom of the list.

### Discontinuing Service

The ECHL reserves the right to discontinue services to any child if the

- ✦ parents fail to reasonably cooperate with the ECHL in the provision of educational services to their child;
- ✦ parents fail to reasonably cooperate with the ECHL in adhering to ECHL policies;
- ✦ child is dangerous to self or others;
- ✦ child is destructive of property or so disruptive that the education of other students is significantly impaired;
- ✦ child requires a more appropriate educational setting to better meet the child's individual needs.

### Withdrawal

When parents withdraw their child/ren from the ECHL, a withdrawal form must be completed and submitted to the Director or Assistant to the Director at least 14 calendar days before the child is to withdraw. Charges will cease at the end of the day indicated on the withdrawal form. If advance written notice is not properly submitted, parents agree to pay the additional two weeks of tuition.

## FEES & PAYMENTS

### Absences

The ECHL operates on an enrollment-based budget for its income. For this reason, no reduction of fees is made for absences.

### Late Charges

A late charge of **\$20.00** (per child) is assessed when payment is not received by the 10th of the month. Written notices of delinquent accounts are issued when a payment is 10 days in arrears. Partial payments are not accepted. If the account becomes more than 30 days in arrears, the child's space **IS** forfeited.

### Late Pick-up

The ECHL closes at **5:20 p.m.** Late fees are assessed if you fail to pick up your child on time. The fee is calculated at **\$25.00** per child for any part of the first 5 minutes and an additional **\$20.00** per child for any part of the next 5 minutes, and **\$1.00** per child for each additional minute after **5:30 p.m.** Repeated failures to pick up your child in a timely manner can result in enrollment termination.

**ABANDONMENT** If we have not heard from the parent and we have not been able to contact other authorized persons listed on the child's enrollment form by 6:00 p.m., we are required by law to consider a **child abandoned and we must call the SFASU police.**

### Materials/Supply Fee

A one-time, non-refundable materials/supply fee of \$300.00 per year is charged for all children enrolling during the school year. This fee may be paid in two payments of \$150.00 each. The first is due September 1<sup>st</sup> and the second February 1<sup>st</sup>. A late charge (see Tuition/Late Charge below) is assessed for any fees not paid by the 10<sup>th</sup> of the month due. For children enrolling in the ECHL for the first time, the materials/supply fee is due upon acceptance and is non-refundable. For newly enrolled children, summer materials/supply fee is as follows: enrolling during the month of June \$75.00, July \$50.00, August \$25.00.

### Tuition

The ECHL tuition is based on 12 months enrollment and is due the first of each month. Parents receive a *Parent Agreement Form* that includes a current fee schedule and calendar that indicates ECHL holidays and closings.

### Food Services Fee

The Food services fee is \$85.00 in addition to tuition and covers ECHL food related expenses in Toddler and PreK classrooms. All students with the exception of the infant classroom, are assessed a food fee.

### Registration Fee

The ECHL registration fee is \$300.00 and is due upon acceptance of a position and receiving enrollment paperwork.

**All Payments must be made through SFA Marketplace at [www.sfasu.edu/echlpay](http://www.sfasu.edu/echlpay). Instructions for using Marketplace are included in the enrollment paperwork.**

**Changes in ECHL Fees typically take place on September 1<sup>st</sup> of each year.**

## CHILDREN'S SPECIAL NEEDS and RIGHTS

### Rationale

The ECHL is committed to working with children who may have special rights and needs in accordance with their development. We attempt to meet their needs on an individual basis within the classroom setting. Our goal is to help each child reach a solution that is beneficial to all before drastic measures are taken. We adhere to the Code of Ethical Conduct published by NAEYC, Section 1.

*An ethical responsibility to children – childhood is a unique and valuable stage in the human life cycle. Our paramount responsibility is to provide care and education in settings that are safe, healthy, nurturing, and responsive for each child. We are committed to supporting children's development and learning; respecting individual differences; and helping children learn to live, play and work cooperatively. We are*

also committed to promoting children's self-awareness, competence, self-worth, resiliency, and physical well-being.

## Allergies and Special Dietary Needs

If your child has allergies or special dietary needs, parents must report them to the ECHL office and classroom teachers. For allergies, complete the *Food Allergy and Anaphylaxis Emergency Care Plan*. Should your child require an EPI pen, you must provide one to the ECHL, replacing it when it expires. Allergies are posted in the classroom. For food allergies, the ECHL provides a substitute when possible. You may be asked to provide food alternatives if we are unable to make a suitable substitution. If you are asked to provide a substitution then you will be assessed a prorated food services fee.

## Consulting with Experts and Therapists

The ECHL consults with a variety of experts and therapists for screening referral purposes. Families enrolled in the ECHL consent to these services and understand we may share confidential information with our partners; however, families are always notified in advance when information and/or consultation are/is requested.

### UNIVERSITY STUDENT PARTICIPATION

SFASU students taking classes to work with young children professionally complete university credit assignments in the ECHL under the supervision of professional ECHL staff members or SFASU professors. Parents accept this practice as part of the enrollment agreement.

Parents must complete the *Parent Consent and Release Form* stating their child may be tested, assessed, or evaluated as part of the professional preparation of SFASU students. You must also complete the *Picture, Video Release and General Information Form* that states your child may be photographed, videotaped, recorded, and quoted for educational purposes and can be viewed live, via online streaming.


### HOUSEKEEPING GUIDELINES

## Birthday Celebrations at School

**Birthday party invitations for personal parties hosted by parents or others may be distributed at school through the classroom teacher ONLY if all children in the class are invited.**

You may bring a special snack to school so your child and his/her friends can celebrate his/her special day; however, this is not mandatory! Please make advanced arrangements with teachers and kitchen supervisor so they can prepare accordingly. Cupcakes, cookies, or other ~~store-purchased snacks~~ of individual proportions are recommended so each child receives the same portion. This also makes serving easier. Foods made at home are not accepted.

Rather than bringing party favors/balloons/etc. to the child's classroom, consider donating a book or CD to the Lab in your child's honor. A bookplate will be placed inside the book or on the CD cover to recognize your child and his/her special date. If you do decide to provide a birthday treat for the class, be mindful that:

-  no gifts are to be exchanged
-  no treat bags or party favors are to be distributed

If you do not want your child's birthday celebrated, provide written notification to the classroom teacher prior to the child's birthday. **The child's birthday observance at the ECHL is not intended to take the place of each family's special observance at home.**

## Camera Login

Cameras are located in each of the five classrooms. You will receive a username and password to obtain access to view your child's classroom. Specific guidelines and procedures are distributed separately.

## Celebrations

We observe traditional, national, cultural, and seasonal holidays with activities that are child-centered, developmentally appropriate, and educationally oriented. Every effort is made to be culturally sensitive. Please share any celebrations that are important to your family so these, too, may be included in our classroom planning.

## Cell Phones

**The Lab is considered a NO CELL PHONE zone.**



## Clothing

Children should be dressed in comfortable, casual, washable clothes that are suitable for active play. Clothing with an aggressive theme or nature (i.e. Ninja Turtles, Batman, and Power Rangers) is inappropriate and should not be worn to school. Dress your child to encourage self-help skills. For example, overalls or belts might restrict a young child's ability to care for bathroom needs in a timely manner. Shoes should be well fitting and safe for playground activities. Canvas or leather tennis shoes are recommended. **Boots, cleats, flip-flops, slip on shoes with or without backs, and some sandals are inappropriate for many outside activities and should not be worn to school.**

All items to be left at school require a label with your child's first and last names (jackets, sweaters, blankets, pillows, etc.) A complete change of clothing (properly labeled) is to be stored in your child's cubby at all times. Please replace items as they are used to avoid embarrassment or inconvenience to your child.

## Extracurricular Activities

You agree to get your child ready for extracurricular activities such as gymnastics, dance, soccer, etc.

## Items from Home

Children frequently want to share nature items and treasures from home. Such items are especially welcomed if they support a topic being studied. Check with your child's teacher before bringing objects to school. We **discourage children from bringing toys** from home as it is sometimes difficult for him/her to share and the toy can get lost or broken. Staff is not responsible for lost or damaged items. Some teachers allow soft cuddly stuffed animals or other comfort toys to help a child sleep more comfortably. Ask your child's teacher about comfort toys.

## Weapons and Violent Play

The ECHL does not allow toys of violence like guns, swords, aggressive action figures, nor do we permit children to engage in actions like pushing, pulling, tackling, or wrestling.

## Other Children in the Classroom

In consideration of the health and safety of all ECHL children, we ask that your child's siblings refrain from entering our classrooms or playgrounds when you drop off or pick up your child. Teachers and teacher assistants are glad to assist you with this process.

### ROUTINES

State licensing criteria mandates parents inform the teacher when a child is arriving or departing AND the parent must sign-in/out the child each day. ECHL families use the Brightwheel app to sign-in and sign-out. Please contact the front office if need help accessing your sign-in/out code. In the event the parent (or person delivering the child to the classroom) forgets to sign in his/her child, the classroom teacher will contact the parent and he/she must return to the ECHL and sign in the child within 30 minutes to avoid a fee.

**Parents are asked not to bring children after 9:30 a.m. except in the event of a doctor's appointment, an emergency, or a special family occasion. Please call before bringing your child after 9:30a.m. to allow staff to plan for your child's attendance.**

## Arrival

Children may arrive no earlier than 7:10 a.m. and must be escorted by a parent (or adult listed on the child's *Local Emergency Contacts Form*) to the child's **classroom** and released directly to the teacher. Children may not be dropped off at the door. This allows parents and teachers a brief interaction after the teacher greets the child.

In accordance with Texas State Minimum Standards, *Subchapter R, Health Practices Division 1, Environmental Health, everyone entering the classroom must immediately wash their hands.* "Studies have shown an increase in overall health in a center when programs eliminate the transmission of germs from the home environment to the center by requiring hand hygiene for all entering the center."

- Toddler I, Toddler II, Pre-K I, and Pre-K II classrooms begin curriculum instruction at 9:30 a.m. In order for children to receive the full benefit of our program and to participate with the group activities, we ask you to have your child here by this time. If there is a special circumstance, such as a doctor's appointment requiring arrival after 9:30 a.m., please notify the teacher so he/she will know when to expect your child.
- Arrival time is between 7:10 a.m. and 9:30 a.m. and departure time is between 3:00 p.m. and 5:20 p.m. Children benefit most from the educational aspects of the program when they arrive before 9:30 a.m.
- Call the ECHL (936.468.4006) no later than 9:30 a.m. if your child is going to be absent (9:30 a.m. is the time the daily lunch count is made.)
- If you have made prior arrangements with the teacher for a late arrival, you must sign-in at the front office as well as your child's classroom.

## Naptime

The [Texas Health & Human Services \(THHS\)](#) requires childcare centers to provide a supervised sleep or rest period after lunch for children 18 months or older. Children under the age of 18 months most often sleep according to individual schedules.

- Lunch is served between 11:00 a.m. and 11:30 a.m.
- Rest time takes place between 12:00 p.m. and 2:00 p.m. Please do not bring your child to the center between 11:00 a.m. and 2:00 p.m. because this makes separation from you more difficult and it is disruptive to the rest of the class. DO NOT DROP YOUR CHILD OFF DURING NAPTIME.
- Children are closely supervised and never made to sleep. Even if some children are awake, sleepers are closely monitored.

## Departure

All children must be picked up no later than 5:20 p.m. to avoid a late fee charge. During pick-up time, families and staff are provided another opportunity for brief interactions.

- If you pick up your child/ren between 3:00 p.m. and 5:20 p.m., use the south entrance.
- If you pick up your child/ren after 5:20 p.m., you must enter the building through the front, main entrance.
- Once your child/ren has/have been picked up, you are asked not to return to the classroom. This allows our cleaning crew to begin promptly at 5:20 p.m. and our teaching staff to be free of their duties.

## Brightwheel

The ECHL uses [Brightwheel](#) education software as a tool for digital attendance and sign in/out, daily reporting, parent communication, and assessments. Brightwheel is a classroom management app that helps improve communication and connectivity between teachers and parents. This helps to provide parents with real-time information about their child's day including photos, activity updates, reminders, and more. Daily reports may include details on how long and when a child may nap, eat, take trips to the bathroom and/or take medication.

## ASSESSMENT

### How to Use Assessments

Assessments have multiple purposes: identify individual children's interests and needs, describe their developmental progress and learning, improve curriculum, adapt teaching practices and the environment, help teachers and administration plan for program improvement, formulate individual instructional plans, arrange for developmental screening and referral for diagnostic assessment when indicated, and assist teachers in communicating with families about the progress of their child.

### Assessment and Curriculum

Assessment is congruent with and relevant to the goals, objectives, and content of our program curriculum and assessment are dependent on one another; they are integrated throughout the program because assessments drive the curriculum.

Teachers assess children to determine their learning needs and plan curriculum accordingly. Knowing what children can do, what they can do with assistance, and what they are not quite ready to do aids in planning appropriate activities for each child. Curricular experiences are carried out and assessment occurs again so teachers can evaluate the children's understandings and make further learning plans. Without assessment, curriculum is disorganized and without direction. Teachers continually assess children's development.

### Documentations/Portfolios

Documentation of children's knowledge and skills in authentic environments is a recommended practice for early childhood assessments. Teachers and families continually gather collections of children's works for their portfolios. Based on descriptions of what a child is doing and learning, assessments are conducted as a continuum from early infancy through pre-kindergarten.

Children's work samples are collected and pictures document their creations and learning. This information is maintained in individual assessment portfolios and shared with parents at least twice a year.

## Curriculum

### Overview



The ECHL is firmly entrenched in the constructivist learning theory that states people construct their own knowledge and understanding of the world through interactions with physical and social environments. These interesting and meaningful activities create opportunities for children to function as planners and make choices. Providing children sufficient time to implement plans supports their critical thinking and problem-solving skills. Exploration, interaction, and experimentation with peers and adults are critical components of learning. Teachers recognize they can promote each child's development through acceptance, respect, and trust.

Curriculum is designed to promote children's cognitive, physical, social, emotional, and representational development. Children are encouraged to hypothesize and predict, pose questions, defend and revise ideas, research answers, and solve problems. Great emphasis is placed on the importance of independence and cooperation with reflection to thoughts and actions. We encourage building and supporting relationships in an environment where children discuss different points of view.

## LEARNING PHILOSOPHY

The cornerstone of our learning philosophy is based on the understanding that each young child is a member of his or her family, constructs his/her own knowledge, and learns at his/her own rate. It is our goal to collaborate with family members to build an equal relationship among family, child, and teacher.

- **Young children are active and curious participants** in the construction of their knowledge. Our school is firmly embedded in constructivism, the theoretical view that learners construct knowledge through interactions with their physical and social environments. Teachers challenge children to make predictions, explore, discover, question, represent, and reorganize their ways of thinking.
- **Children are capable and powerful human beings** who have the ability to question and research what they desire to know more about in order to gain a deeper understanding. Teachers are not all-knowing individuals who give all the answers; they encourage children to make their own discoveries through an investigation process.
- **Children's portfolios** are a purposeful compilation of children's work used to document their learning processes and achievements; it demonstrates their growth and development. Portfolios are used in determining whether a child has met learning goals and standards and to gain a deeper understanding of each child's learning. Transcriptions of children's verbal language, photographs of children engaged in activities, and representations of their thinking are composed in notebooks and maintained over time. This documentation serves many purposes: it shows children their work is valued, to heighten parents' awareness of their child's experiences, and to encourage teachers to better understand and evaluate their own work. Additionally, portfolios are a tangible archive, tracing each child's learning processes.
- **Parents as Partners** are critical to a successful program. You are your child's first teacher and we greatly value your input when it comes to what is best for your child. The exchange of ideas between parents and teachers helps us better meet your child's needs. Working together ensures children receive constant care designed to enhance their learning experiences.
- **Professional Development** is critical to program quality and for this reason the ECHL supports its teachers and staff by providing professional development opportunities to continually increase their knowledge.
- **We provide numerous opportunities for exploration, interaction, and experimentation** with peers and adults. Teachers promote each child's development through expressions of acceptance, respect, and trust. They engage in continuous discussion with children about the child's work. Such exchanges provide on-going enrichment. Teachers see themselves as researchers preparing documentation of children's work, who they also consider researchers.

## Transitioning Children to the Next Class

Age is only one criterion used to determine a child's placement into the next age group; a child must be developmentally ready. When teachers determine a child is ready for placement in the next age group classroom and space is available, parents are contacted and may be called in for a conference. The ECHL Director, teachers, and parents decide when a child should be moved to the next classroom based on multiple considerations:

- (1) classroom observations
- (2) child's readiness for experiences with older children
- (3) child's social, emotional, and general cognitive development

Promotion criteria are discussed and arrangements for a smooth, gradual transition into the new classroom are made.

## LEARNING

## Assessment Summary

Teachers administering assessments are trained annually through college classes, professional development, in-service activities, and by working with consultants/mentors. No one is to conduct an assessment without proper training that includes strategies, techniques, and implementation.

Assessments are ongoing and do not stop until the child exits the program. The first assessment takes place within two weeks of the child's entry into the school. Constant caregiver teachers trained in assessment techniques assess children throughout the day using a variety of assessment tools that provide a well-rounded evaluation of each child. Such tools include anecdotal records, time sampling, checklists, informal, and formal observation. Authentic, not contrived, settings are used in assessing children with the exception of children who are easily distracted and must be moved to a quieter location for assessment purposes. Teachers are provided time each week to meet with children in individual or small group settings to assess and nurture children's progress.

Conversations with parents provide valuable insights into how we can best meet their child's needs. Their involvement in planning and implementing assessments is critical to each child's growth and development. For example, one parent shares that his child works best outside because that is how he is nurtured academically at home. Teachers take this into consideration when assessing and planning curriculum for this child. Assessment findings are shared with parents on a formal basis at least two times a year in parent-teacher conferences. Informal conversations, e-mails, and phone conversations are conducted on an as needed basis.

## Lesson Plans

Daily assessments drive weekly lesson plans to develop individual curriculum goals for each child. Plans are designed to build and extend emerging skills and challenge children. Lesson plans are crafted to highlight developmental domains whereby each chosen activity features specific learning objectives, whether inside the classroom or on the playground. While children may appear to be playing, they are actually doing children's work.

A weekly review of the lesson plan is available in your child's classroom. We encourage you to support activities and practice specific skills with your child; it is also helpful for you to read the same books to your child and sing songs and do finger plays listed on the lesson plan; children learn through repetition.

## Excursions and Water Play

The *Excursion/Water Play Agreement Form* is signed at registration. This form permits your child to attend all on/off campus excursions and to participate in water play activities. You will be advised of upcoming excursions. When children take walks on campus, a notice is posted on the classroom door. Teachers strategically plan excursions so they do not coincide with regular arrival and departure times.

## Outdoor Play

Outside play is an integral part of a child's day. Except during extreme weather conditions, all children participate in outside activities. Teachers determine outdoor activities based on temperature, wind chill factor, humidity, and age of children. If a child must remain indoors for medical reasons, other arrangements for childcare should be made. Extra personnel are unavailable to provide one-on-one care.

## Referrals

When teachers suspect a child has a developmental delay or notice a special need, parents are informed in a confidential, thoughtful, and supportive manner. Documentations are shared and an explanation for the concern discussed. Teachers suggest next steps and provide information about resources for further assessment.

Early identification of disabilities or delays can minimize or prevent future problems. As a professional institution, the ECHL assumes responsibility under the Federal Department of Education (34 CFR, Sec. 303.321) and Texas Administrative Code regulation (40 TAC) to refer a child under the age of 3, to Early Childhood Intervention (ECI) **within two working days** of identification of a disability or suspected delay in development. ECI is federally and state funded through the Individuals with Disabilities Education Act and is available in every Texas County.

*All screening referrals are kept strictly confidential and used only to access appropriate care as needed.*

## Technology

We use technology to extend classroom learning to integrate and enrich the curriculum. The use of passive media (television and video) is limited to developmentally appropriate programming. We discourage electronic toys.

## HEALTH & SAFETY

### Asbestos Operation and Management Program

No asbestos or other hazardous materials were used in the building of our facility. Documentation is available for review in the main office.

## Health Care Consultant

We are proud and fortunate to have a *Caring for Our Children (CFOC)* certified health care consultant. Her role is to promote the health and development of children, families, and staff and to ensure a healthy and safe childcare environment. She does not act as a primary care provider as she is not a medical doctor, but she can offer critical services by sharing health and developmental expertise; assessments of children, staff, and family health needs; and other health and developmental specialists. For more information about the CFOC health consultant, visit <http://cfoc.nrckids.org/StandardView/1.6.0.1> or contact the ECHL Director.

## Insurance

All children enrolled in the ECHL program are insured for accidents that may occur while children are in our care.

## EMERGENCIES

### Accidents/Emergencies/First Aid

The ECHL works hard to provide a safe environment for children at all times. However, part of growing up includes bumps and bruises. We are equipped with simple first aid supplies and when a child has a minor accident, staff provides appropriate first aid. Teachers always tell parents about injuries.

### Accidents

In the event a child has an accident while at the ECHL, an *Accident Report Form*, located in each classroom, must be completed. The original report goes home with the child and a copy is kept in the child's permanent file in the office. For minor accidents, when no blood, bruising, swelling, or abrasions are apparent and the child is not complaining, an accident report is completed and put in the child's cubby. For more serious accidents that do not require immediate attention from a physician, the parent is called and front office notified.

### Emergency Drills

Unannounced fire drills are practiced on a monthly basis and unannounced severe weather/tornado drills are conducted quarterly. SFASU's Safety Department monitors some drills each year.

### CPR/First Aid

First Aid skills are among the most likely tools caregivers/teachers need. Minor injuries are common. **All ECHL employees successfully complete a pediatric first aid class and a pediatric CPR course.** Teachers implement and follow the recommended treatment for minor injuries as written in the current American Academy of Pediatrics, which may include, but not be limited to, hydrogen peroxide, first aid antibiotic ointment, and antiseptic wipes.

Any under-immunized child displaying symptoms of a vaccine preventable disease is promptly excluded from other children and parents contacted for medical consultation and release.

### Medical Assistance

In the event medical assistance is required, we call 911 and ask the SFASU Police Department for emergency help. If a child and/or staff member is taken by medical transport, the ECHL Director or designated staff member will accompany the child/adult. An *Accident Report Form* is also completed in this situation. The original report goes home with the child and a copy is kept in the child's permanent file in the office.

A signed authorization for *Emergency Health Care Permission Form* is kept in each child's file. Physician information and emergency telephone numbers must be kept current. Emergency contacts must be local or able to reach the ECHL within 30 minutes of a phone call to avoid a late fee.

In the case of injury or illness during school hours, the following procedures are followed:

1. Staff administers necessary first aid and then attempts to contact parents.
2. If parents cannot be reached, persons designated on the *Local Emergency Contacts* are called.
3. When a child needs immediate medical attention, 911 and the parents are called.

## HEALTH

### Communicable Diseases

If your child is diagnosed with a communicable disease, immediately notify the ECHL. It is important for us to

communicate this to all staff and parents so they can take necessary precautions in preventing others from becoming ill.

## Dental Care

In accordance with Texas State Minimum Standards, *Subchapter Q, Nutrition and Food Service*, the ECHL promotes dental hygiene by providing children twelve months and older a supervised daily opportunity to brush teeth. Infant's gums are cleaned with a disposable tooth wipe after each feeding. Children are required to brush their teeth once a day after lunch.

## Hand Hygiene

Every effort is made to prevent the spread of germs. We strive to maintain the highest standards of cleanliness, which includes instruction in hand hygiene to minimize the spread of germs; and required hand washing for children, teachers, and others who enter the room. Staff members share the importance and benefits of good health and hand washing with children. Children and teachers wash hands regularly throughout the day; specific hand washing times are: upon entering the classroom, before meals, after toileting or diapering, and before setting tables. Children also wash their hands after playing in the discovery table.

## Immunizations

Immunization requirements and hearing and vision screenings follow the [Texas Department of Health Guidelines](#). This includes teachers, staff, and children. The Lab adheres to the [Texas Administrative Code, Title 25, Part 1, Chapter 97, Subchapter B Rule §97.62](#) rule for under-immunized children. Contact administration if your child is under-immunized.

## Medical/Dental Procedures

If a physician orders a special medical management procedure for a child in our care, an adult trained in the procedure must be onsite whenever the child is present.

## Medications to be administered at School

A medication is a substance that is taken into or placed on the body that does one of the following things:

1. cures a disease or condition. *For example, antibiotics are given to cure an infection.*
2. treats a medical condition. *For example, diaper rash cream is given to treat diaper rash.*
3. relieves symptoms of an illness or condition. *For example, pain relievers are given to reduce pain.*
4. prevents diseases or conditions. *For example, the Flu Vaccine helps to prevent the person from complications of having the flu.*

All medications (except emergency medications) are kept under lock and key. Readily available emergency medications are kept in a closed cabinet, on a high shelf, away from children's reach. Medications, including over-the-counter medications, to be administered at school, must have a pharmacy label that includes:

- **child's first and last name**
- **current prescription date**
- **name of attending physician**
- **instructions on how to administer** and **store** the medication
- **medication expiration date**

**The medication must be in the original container!**

*Daily Medicine Forms* are available in each classroom and must be completed by the parent and handed to the classroom teacher. *(This includes items such as diaper rash cream, sunscreen, special lotions, etc.)*

The following schedules are followed when administering medication to children:

Directions	Schedule
2 times per day	not administered at school
3 times per day	1 <sup>st</sup> dose at home 2 <sup>nd</sup> dose at ECHL w/lunch 3 <sup>rd</sup> dose at home
4 times per day	1 <sup>st</sup> dose at home 2 <sup>nd</sup> dose with lunch 3 <sup>rd</sup> dose with 2:30 snack 4 <sup>th</sup> dose at home

## Safety Monitoring of Children

Teachers and/or staff constantly monitor children via direct visual and/or auditory means. Rooms are strategically arranged to accommodate these criteria. This includes outside playgrounds and sleeping arrangements.

## ILLNESS POLICY

Childcare facilities face challenges in preventing illness. One of the best ways to thwart the spread of disease is to have strictly enforced standards regarding the exclusion of ill children. An ill child belongs at home, not in a well-child childcare center where respiratory and gastrointestinal diseases spread rapidly from person-to-person under the best of preventative precautions.

### Communicable Disease Notification

In the event your child is diagnosed with a communicable disease/illness, notify the ECHL immediately so other parents can be notified.

### Ill Child Notification

If any of the following conditions occur while your child is in our care, you will be notified and your **child must be picked up from the ECHL within 30 minutes of notification to avoid late fees.**

- illness prevents the child from participating comfortably in activities
- illness results in a greater need for care than the staff can provide without compromising the health, safety, and supervision of the other children
- child has one or more of the following:
  - ✚ oral temperature 100.4 degrees or greater, rectal temperature 101.4 degrees or greater, armpit temperature 99.4 degrees or greater
  - ✚ signs/symptoms of possible severe illness (such as lethargy, uncontrolled breathing, diarrhea and/or vomiting, rash with fever, mouth sores with drooling, wheezing, behavior change, or other unusual signs
  - ✚ symptoms of an infectious disorder such as ringworm, pink eye, head lice, etc.

### Protecting Children from Contagious Illnesses

Adhering to the following guidelines protects children and others from contagious illnesses. An ill child is not accepted for care if one or more of the following exists:

- child has one or more of the following:
  - ✚ illness that requires greater need for care than can be provided without compromising the health, safety, and supervision of other children
  - ✚ inability to participate comfortably in activities
  - ✚ oral temperature 100.4 degrees or greater, rectal temperature 101.4 degrees or greater, armpit temperature 99.4 degrees or greater
  - ✚ signs/symptoms of possible severe illness such as lethargy, uncontrolled breathing, diarrhea and/or vomiting, rash with fever, mouth sores with drooling, wheezing, behavior change, or other unusual signs
  - ✚ symptoms of an infectious disorder such as ringworm, pink eye, head lice, etc.
- the child has been diagnosed with a communicable disease (refer to the Communicable Disease Chart for Child Care Centers [www.tdprs.state.tx.us](http://www.tdprs.state.tx.us))

### Return to Childcare

Children who have been ill may return to childcare when the following conditions are met:

- the child is free of illness or fever for more than 24 hours without taking fever-reducing medications
- the child is free of vomiting or diarrhea for more than 24 hours
- a medical evaluation indicates the child is no longer contagious and may participate in the facility's activities (refer to the Communicable Disease Chart for Childcare Centers [www.tdprs.state.tx.us](http://www.tdprs.state.tx.us).)

#### THE 24-HOUR 'SYMPTOM FREE' RULE

**The ECHL's policy requires that your child be free of symptoms of illness: fever, diarrhea or vomiting for at least 24 hours before returning to school.**

**Fever-free means without medication for fever reduction.**

Please keep in mind that if we send your child home because of illness, he or she will not be admitted into the ECHL the next day because the **24-hour period** will not have elapsed. Do not rush a child's return to school following an illness. The ECHL reserves the right to require a doctor's statement before the child can return to school.

### Well-child Childcare Facility

The ECHL is a **well-child childcare facility** and is not equipped to care for ill children. We realize this can be an inconvenience and trust you understand and appreciate the necessity for such a policy. Help by making other arrangements for childcare when your child is sick. **Do not bring an ill child to the ECHL. When your child becomes ill at the ECHL, pick up your child within 30 minutes of notification to avoid a late fee.**

## FOOD PROGRAM

The ECHL follows the U.S. Department of Agriculture (USDA) *Child and Adult Care Food Program* (CACFP) in determining the types and amounts of foods to be provided to children for meals and snacks. In accordance with federal and other applicable food safety standards; and based on recommendations of our program's health consultant, nutrition consultant, and/or sanitarian; our food program reflects and documents all considerations.

The SFASU Charter School administration oversees the food program. Monthly menus are planned to encompass all food groups and to incorporate at least half the daily-recommended servings based on age. Input from children, parents, and teachers is used to plan menu choices.

### Breastfeeding

We actively support a family's right to breastfeed their child while in our care by providing a comfortable and private place for mothers to feed their child. Breast milk brought to the center must be labeled with the infant's full name and the date/time the milk was expressed. Any unfinished/unrefrigerated formula or breast milk is discarded after one hour.

### Candy Rule

Our goal is to maintain the quality of your child's daily nutrition so we ask you to join us in this effort to promote healthy children. The ECHL enforces a **no candy rule** in the classrooms except for special occasions.

### Feeding Reports

Infant consumption is recorded and shared in a daily report with parents. Children with special feeding needs also receive a daily consumption report.

### Family Style Dining

Mealtime in a childcare facility is an active learning time, an opportunity for discovery, risk-taking, and child-initiated behaviors. Offering family style dining allows children to eat their meals and snacks in a manner that promotes the type of beneficial activities they might experience in their homes, including activities that encourage decision-making, self-help skills, sharing, and social skills.

During mealtimes, children help set tables, self-serve food from bowls on their table, and assist with cleanup. Children and teachers use mealtime to interact and build classroom community. Teachers model and encourage manners and good food choices.

According to the Texas Department of Health, children develop these skills through interaction with adults and other children. Language and social skills are developed through conversations with others; an adult at the table encourages language development by talking about food, where it comes from, good eating habits, and table manners. Children setting the table, serving their own plates, and passing food dishes to others develop motor skills.

Family-style meals may also have a positive effect on the picky eater. When children sit together and serve themselves, the picky eater sees others partaking in foods and may decide to try the foods as well, especially if the adult encourages him or her to taste the food.

### Foods From Home

Should you need to provide your child with special foods and/or drinks because of documented reasons, each must be labeled with your child's name, date, and expiration date. Cold foods are placed in the classroom refrigerator. This link provides you with USDA's CACFP food guidelines so you can send appropriate foods to school.

<https://health.gov/dietaryguidelines/2015/guidelines/>

Parents sometimes bring foods to share with their child's classmates. The ECHL only accepts whole fruits or commercially prepared packaged foods in factory-sealed containers. Children are NOT to bring food, gum, or candy to the ECHL.

### Food Preparation

All foods and drinks are prepared, served, and stored in accordance with the USDA's Child and Adult Care Food Program guidelines. Drinks, meals, and snacks are prepared with food safety in mind. Fruits and vegetables are thoroughly washed to remove pesticides and bacteria.

## Food Safety

Food safety is everyone's responsibility, not just that of food service staff. Teachers come in contact with foods children are served and are familiar with safe food handling practices.

Teachers do not offer children younger than four years of age the following foods:

- hard pretzels
- hot dogs (whole or sliced into rounds)
- nuts
- popcorn
- raw carrot chunks
- raw peas
- meat larger than cannot be swallowed whole. Food is cut into pieces no larger than ¼ inch-square for infants and ½ inch-square for toddlers, according to each child's chewing and swallowing capabilities.
- whole grapes
- spoonful of peanut butter

## Menus

Eating a well-balanced diet is the foundation of good health. Weekly rotation menus are posted in each classroom and available online.

## Nutrition

A nutritionist reviews our menus to ensure we provide healthy options and foods our children will enjoy.

## Snacks and Meal

The ECHL is responsible for feeding children in its care. When in session, two snacks and one meal are served to children. The morning snack is meant to help children get through the morning; it does not replace breakfast, so please feed your child before he/she comes to school. DO NOT bring your child's breakfast to school. Lunches are child-friendly. An afternoon snack is served to help children get through the afternoon.

## Special Diets

Should your child require a special diet or diet modifications (food allergies,) you must immediately advise the ECHL director and your child's teachers. A letter outlining specific needs from the child's physician must be in the child's permanent file in the office. The ECHL makes special dietary accommodations when substitutes are readily available. When suitable substitutions cannot be made, you will be asked to provide food.

## HOME – SCHOOL CONNECTIONS

It is important for you to know what is happening in your child's classroom and at the ECHL, so please make every effort to stay informed; you are your child's best advocate and his/her most important teacher. Daily interactions allow teachers to share their knowledge about your child's particular needs and special experiences.

The ECHL Team may assist you with questions or concerns you have about the ECHL. Additionally, full-time substitute teachers, the secretary, and our master and lead teachers are happy to answer your questions.

## Classroom Information Boards

A bulletin board is located on or beside each classroom door; it contains general and specific parent information. Make a habit of checking the information on the board each day. This helps us connect to you at your convenience.

## ECHL Newsletters

Each classroom provides a weekly newsletter through Brightwheel regarding important information to you.

## Emergency Communications

SFASU sends an alert, ECHL faculty and staff are notified, ECHL family is notified via SFASU website, and when possible, Facebook and/or email/phone call. Like our Facebook page at <https://www.facebook.com/sfasuechl/>

## On-site Observations

We encourage you to take frequent advantage of the opportunity to observe your child from the observation booth. Feel free to discuss your observations with your child's teacher. Parents are informed of classroom activities through weekly lesson plans and upcoming events in newsletters.



## Parent Concerns

When you have a concern, please remember:

- ✚ teachers want parents to be satisfied with the care their child is receiving.
- ✚ NOT to allow concerns to build up. As concerns occur, share them with the teachers. It is disturbing to find out later that a parent had a number of concerns and never expressed them.
- ✚ contact teachers directly about classroom issues and provide them the opportunity to correct minor infractions.
- ✚ REALIZE that if you have a concern with a teacher, the director will need to investigate and talk with the teacher about your concern in order to deal with the issue in a straightforward and professional manner.
- ✚ sometimes we cannot make the changes you request due to other restrictions, but we ALWAYS want to hear your suggestions. We promise to consider them seriously and respond to you in a timely manner.
- ✚ schedule a conference with your child's teacher to discuss issues in depth, and **not** try to discuss them during drop-off and pick-up times.
- ✚ use the *Solution/ Resolution Worksheet* found in the Appendix of this *Parent Handbook* to facilitate verbal communication.

## Parent Involvement

We encourage you to become involved in your child's education in formal and informal ways. For example, formally you may choose to share a talent, your family culture, or read a book to the class; informally, you might visit the classroom, go on excursions, help with special events, or be a room parent. Bringing your family to school functions shows your support of your child and our program.

## Parent Meetings and Classes

The ECHL holds group parent meetings throughout the year. This includes general meetings, new parent orientations, and program or classrooms' Open House. Periodically, evening parent classes are held in the fall and spring. These classes address a variety of topics related to the ECHL's program and/or the development of young children.

## Parent Resources

The ECHL maintains a resource area for our parents in the main office. Additionally, each classroom has specific developmental information available on a variety of early childhood care and education topics. Other helpful resources are located on the following websites:

- [www.parentinginformation.org](http://www.parentinginformation.org)
- <http://www.zerotothree.org>
- [www.iamyourchild.org](http://www.iamyourchild.org)
- [www.collabforchildren.org](http://www.collabforchildren.org)

## Parent-Teacher Conferences

You are invited to participate in parent-teacher conferences, held at least twice each year, and upon request at a convenient time for parents and teachers. The purposes of conferences are to discuss your child's individual developmental progress, set goals, and to plan for your child's future growth and development. Should a concern arise, either the parent or teacher may request a parent-teacher conference. If a teacher requests an additional conference with you, respect this request with prompt attention and we will do the same.

## Parent-Teacher Organization (PTO)

All parents of children enrolled in the ECHL and all ECHL employees are encouraged to join PTO. This organization typically meets each month, offers ideas and suggestions to the ECHL Team, and plans social and community events promoting families and young children.



# Stephen F. Austin State University

## Early Childhood Laboratory

### Positive Guidance and Discipline Policy

#### PURPOSE

The purpose of all discipline at the ECHL is to help children become self-directing and socially responsible through positive, non-punitive methods. Responses to each child are directed towards improving his/her understanding of socially acceptable expectations, developing appropriate ways of behaving, and understanding cause-and-effect of his/her feelings and actions.

#### Goal

Our goal is to ensure each child's development is nurtured through caring, patience, and understanding. While your child is in our care, we will do everything in our power to see he/she is treated fairly, with respect, and given every opportunity to develop his/her own self-managing skills. We aim to respond to all children's misbehaviors and ongoing challenging behaviors.

#### Positive Approach

We believe children's inappropriate interactions create opportunities to teach them the requisite skills in becoming self-directing. Our approach is a positive one that is demonstrated by:

- (1) individualized and consistent treatment of each child
- (2) appropriate responses to the child's level of understanding
- (3) redirecting the child toward acceptable behaviors and self-control.

#### Methods of Discipline

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

- (1) encouraging good behavior instead of focusing upon unacceptable behavior
- (2) daily reminders of expectations by using clear, positive statements
- (3) redirecting misbehavior using positive statements
- (4) using brief supervised separation 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

#### Prohibited Practices

At no time is punishment (psychological, physical, coerced, or verbal) acceptable in the ECHL. There will be no harsh, cruel, or unusual treatment of any child. Forbidden practices include:

1. physical punishment
  - biting
  - excessive tickling
  - forcing a child to do an action (eat, sleep, clean up)
  - hitting a child
  - jerking
  - kicking
  - related to food, naps, toilet training
  - squeezing
  - pinching
  - pulling of arms, hair, or ears
  - putting anything in or on a child's mouth
  - requiring a child to remain inactive for a long period of time
  - shaking
  - slapping
2. psychological mistreatment
  - bullying/name calling
  - frightening a child
  - humiliation
  - ostracism
  - rejecting
  - threats
  - ridiculing
  - sarcasm
  - shaming
  - subjecting child to harsh/abusive/profane language
  - withholding affection

3. coercion of any kind
  - rough handling (shoving, pulling, pushing, grasping any body part)
  - forcing a child to sit, lie, or stay down, except when restraint is necessary to protect the child from harm
  - placing a child in a locked or dark room, bathroom, or closet with closed door
  - requiring a child to remain silent or inactive for inappropriately long periods of time for the child's age

## Dealing with Challenging Behaviors

When a child's challenging behavior begins to interfere with his or her success or becomes hurtful or dangerous to another person, we act to resolve the issue as quickly as possible.

1. Teachers assess the function of the behavior: what is it the child wants or needs? Once determined, teachers work to resolve the conflict.
2. If the behavior persists, teachers privately discuss the issue(s) with parents.
3. When challenging behaviors continue, teachers call a parent/teacher conference to discuss the issue. You are encouraged to take an active role in your child's growth and development and to help establish a plan of action for your child. Teachers may offer suggestions about ways you can help your child resolve the issue(s). This includes positive behavior support strategies like removing materials or rearranging the schedule to prevent triggers causing the behavior. A list of community resources is available if you choose to seek help from other professionals. We welcome outside professionals you secure into the school, where they can observe and work with the child.
4. When the child's behavior continues, another conference is called and the director may attend.
5. Should parents refuse to work with the teacher or if we cannot resolve the situation, parents will be asked to make other child care arrangements that are better suited for their child.
6. When the situation requires greater care needs than we can provide, the child's enrollment is subject to termination.

The ECHL *Positive Guidance and Discipline Policy* complies with the Texas Administrative Code and rules in *Subchapter L* of Minimum Standards <https://hhs.texas.gov/>

## Supporting Children with Challenging, Persistent, and Serious Behaviors

The ECHL works to assess and provide care for the child with special needs while also meeting other children's needs. For children who demonstrate challenging, persistent, and serious behaviors, teachers, ECHL administration, families, and other professionals work as a team to develop and implement an individualized plan of action to support the child's inclusion and success.

1. When a teacher detects a child may have a special right/need, he/she and his/her co-teacher meet with ECHL administration to discuss options for increased classroom support and/or the need for a professional evaluation.
2. Teachers then meet with the child's parents to develop a plan of action.
3. Once a plan of action is in place, parents and ECHL staff must follow-through with the plan.
4. Teachers update parents, referencing the child's assessment documentations.
5. If either party deviates from the plan, parties reconvene and redefine the plan of action to ensure proper follow-through.
6. Should the situation develop beyond the scope of our teachers' expertise, referral information is provided to the family.
7. Discontinuing Services
  - If the ECHL staff and/or the child's parents determine the current situation is not meeting the child's needs, parties can agree to terminate enrollment.
  - If parents are negligent in the plan of action follow-through, the ECHL can terminate enrollment.
  - After attempts have been made to meet a child's individual needs, any child who demonstrates an inability to benefit from the care or whose presence is detrimental to other children may be discharged from the facility.
  - Care of a child may be discontinued if the provider and parents cannot establish a mutually satisfactory working relationship.

### Special Circumstances

In the event of unusual circumstances, such as the COVID-19 pandemic, there may be university, local, state, or federal guidelines that override the policies and practices stated in this handbook. In those situations, changes in protocol will be posted on the Early Childhood Lab website.

# APPENDIX

# Early Childhood Laboratory Food Allergy & Anaphylaxis Emergency Care Plan

<b>FARE</b> <small>Food Allergy Research &amp; Education</small>		<b>FOOD ALLERGY &amp; ANAPHYLAXIS EMERGENCY CARE PLAN</b>	
Name: _____		D.O.B.: _____	
Allergic to: _____			
Weight: _____ lbs.		Asthma: <input type="checkbox"/> Yes (higher risk for a severe reaction) <input type="checkbox"/> No	
<b>NOTE: Do not depend on antihistamines or inhalers (bronchodilators) to treat a severe reaction. USE EPINEPHRINE.</b>			
<b>Extremely reactive to the following allergens:</b> _____ <b>THEREFORE:</b> <input type="checkbox"/> If checked, give epinephrine immediately if the allergen was <b>LIKELY</b> eaten, for <b>ANY</b> symptoms. <input type="checkbox"/> If checked, give epinephrine immediately if the allergen was <b>DEFINITELY</b> eaten, even if no symptoms are apparent.			
<p style="text-align: center;"><b>FOR ANY OF THE FOLLOWING:</b></p> <p style="text-align: center; font-size: 1.2em;"><b>SEVERE SYMPTOMS</b></p> <div style="display: grid; grid-template-columns: 1fr 1fr 1fr 1fr; gap: 10px;"> <div style="text-align: center;">   <b>LUNG</b>            Shortness of breath, wheezing, repetitive cough         </div> <div style="text-align: center;">   <b>HEART</b>            Pale or bluish skin, faintness, weak pulse, dizziness         </div> <div style="text-align: center;">   <b>THROAT</b>            Tight or hoarse throat, trouble breathing or swallowing         </div> <div style="text-align: center;">   <b>MOUTH</b>            Significant swelling of the tongue or lips         </div> <div style="text-align: center;">   <b>SKIN</b>            Many hives over body, widespread redness         </div> <div style="text-align: center;">   <b>GUT</b>            Repetitive vomiting, severe diarrhea         </div> <div style="text-align: center;">   <b>OTHER</b>            Feeling something bad is about to happen, anxiety, confusion         </div> </div> <p style="text-align: center; margin-top: 10px;"><b>OR A COMBINATION of symptoms from different body areas.</b></p> <ol style="list-style-type: none"> <li>1. <b>INJECT EPINEPHRINE IMMEDIATELY.</b></li> <li>2. <b>Call 911.</b> Tell emergency dispatcher the person is having anaphylaxis and may need epinephrine when emergency responders arrive.</li> <li>• Consider giving additional medications following epinephrine:             <ul style="list-style-type: none"> <li>» Antihistamine</li> <li>» Inhaler (bronchodilator) if wheezing</li> </ul> </li> <li>• 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.</li> <li>• If symptoms do not improve, or symptoms return, more doses of epinephrine can be given about 5 minutes or more after the last dose.</li> <li>• Alert emergency contacts.</li> <li>• Transport patient to ER, even if symptoms resolve. Patient should remain in ER for at least 4 hours because symptoms may return.</li> </ol>		<p style="text-align: center; font-size: 1.2em;"><b>MILD SYMPTOMS</b></p> <div style="display: grid; grid-template-columns: 1fr 1fr 1fr 1fr; gap: 10px;"> <div style="text-align: center;">   <b>NOSE</b>            Itchy or runny nose, sneezing         </div> <div style="text-align: center;">   <b>MOUTH</b>            Itchy mouth         </div> <div style="text-align: center;">   <b>SKIN</b>            A few hives, mild itch         </div> <div style="text-align: center;">   <b>GUT</b>            Mild nausea or discomfort         </div> </div> <p style="text-align: center; margin-top: 10px;"><b>FOR MILD SYMPTOMS FROM MORE THAN ONE SYSTEM AREA, GIVE EPINEPHRINE.</b></p> <p style="text-align: center; margin-top: 10px;"><b>FOR MILD SYMPTOMS FROM A SINGLE SYSTEM AREA, FOLLOW THE DIRECTIONS BELOW:</b></p> <ol style="list-style-type: none"> <li>1. Antihistamines may be given, if ordered by a healthcare provider.</li> <li>2. Stay with the person; alert emergency contacts.</li> <li>3. Watch closely for changes. If symptoms worsen, give epinephrine.</li> </ol>	
<p style="text-align: center; font-size: 1.2em;"><b>MEDICATIONS/DOSES</b></p> <p>Epinephrine Brand or Generic: _____</p> <p>Epinephrine Dose: <input type="checkbox"/> 0.1 mg IM <input type="checkbox"/> 0.15 mg IM <input type="checkbox"/> 0.3 mg IM</p> <p>Antihistamine Brand or Generic: _____</p> <p>Antihistamine Dose: _____</p> <p>Other (e.g., inhaler-bronchodilator if wheezing): _____</p> <p>_____</p>		<p>PATIENT OR PARENT/GUARDIAN AUTHORIZATION SIGNATURE _____</p> <p>DATE _____</p> <p>PHYSICIAN/HCP AUTHORIZATION SIGNATURE _____</p> <p>DATE _____</p> <p style="font-size: 0.8em;">FORM PROVIDED COURTESY OF FOOD ALLERGY RESEARCH &amp; EDUCATION (FARE) (FOODALLERGY.ORG) 5/2020</p>	

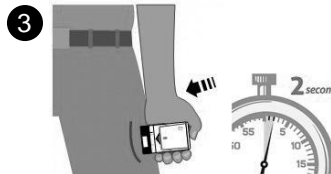


**FARE**  
Food Allergy Research & Education

## FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN

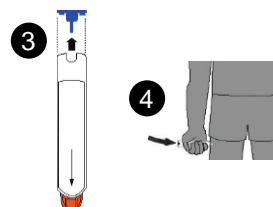
### HOW TO USE AUVI-Q® (EPINEPHRINE INJECTION, USP), KALEO

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



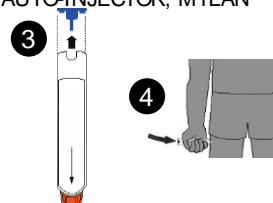
### HOW TO USE EPIPEN® AND EPIPEN JR® (EPINEPHRINE) AUTO-INJECTOR, MYLAN

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.
3. With your other hand, remove the blue safety release by pulling straight up.
4. Swing and push the auto-injector firmly into the middle of the outer thigh until it 'clicks'.
5. Hold firmly in place for 3 seconds (count slowly 1, 2, 3).
6. Remove and massage the injection area for 10 seconds.
7. Call 911 and get emergency medical help right away.



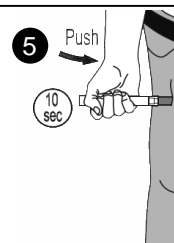
### HOW TO USE EPINEPHRINE INJECTION (AUTHORIZED GENERIC OF EPIPEN®), USP AUTO-INJECTOR, MYLAN

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



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

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



### 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-out er 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: \_\_\_\_\_

FORM PROVIDED COURTESY OF FOOD ALLERGY RESEARCH & EDUCATION (FARE) (FOODALLERGY.ORG) 3/2018

# Home Visits



What happens when a child's family welcomes teachers in their home?

Families are experts when it comes to their children. Teachers are the experts in the classroom. Parent-Teacher Home Visits are voluntary appointments designed to build a relationship between equal partners (parents and teachers,) so the most important adults in a child's life, at home and at school, can work together to support the child's learning and growth.



## Parent – Child – Teacher Home Visits

- increase children's academic and developmental growth
- build relationships between teachers and families
- improve school climate, attendance, and learning
- increase cultural competence and connection
- build community support

**Everyone plays on the same team to help the children succeed!**

*"On the visit, the teacher asked me, and I'll never forget this, she said, 'What are your hopes and dreams for your child?' And I knew that if anybody was going to come into my home, in a nonjudgmental way, and ask me that question, they must really care! After my first home visit, we worked together to help my daughter and she learned so much by the end of the year."*  
*Parent Praise*



**Due to COVID-19, virtual home visits are being scheduled in lieu of in person home visits.**



# Stephen F. Austin State University

## Early Childhood Laboratory

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### Infant/Toddler Safe Sleep Policy

#### **PURPOSE**

The purpose of the *Infant/Toddler Safe Sleep Policy* is to maintain a safe sleep environment that reduces the risk of Sudden Infant Death Syndrome (SIDS) and Sudden Unexpected Infant Deaths (SUIDS) in children less than one year of age. Licensed childcare facilities that provide care for children less than one year of age must implement and maintain a written safe sleep policy in accordance with the most recent safe sleep recommendations of the American Academy of Pediatrics (AAP). Childcare licensing rules require licensed childcare facilities to provide parents and/or guardians who have infants in childcare, a copy of the facility's safe sleep policy.

#### **SUDDEN INFANT DEATH SYNDROME**

SIDS is the sudden death of an infant less than one year of age that cannot be explained after a thorough investigation has been conducted, including a complete autopsy, an examination of the death scene, and a review of the clinical history.

SUIDS is the sudden and unexpected death of an infant less than one year of age in which the manner and cause of death are not immediately obvious prior to investigation. Causes of sudden unexpected infant death include, but are not limited to, metabolic disorders, hypothermia or hyperthermia, neglect or homicide, poisoning, and accidental suffocation.

Childcare providers can maintain safer sleep environments for infants that help lower the chances of SIDS. Our goal is to take proactive steps to reduce the risk of SIDS in childcare and to work with parents to keep infants safer while they sleep. To do so, this facility will practice the following safe sleep policy:

#### **SAFE SLEEP POLICY**

1. Infants, less than one (1) year age, are always placed on their backs to sleep. No sleep positioners are used at any time unless required by a physician (written proof must be posted in the sleep area.) When, in the opinion of the infant's licensed health care provider, an infant requires alternative sleep positions or special sleeping arrangements, the provider must give written instructions to the facility, signed by the infant's licensed health care provider, detailing the alternative sleep positions or special sleeping arrangements. Caregivers will put the infant to sleep as specified in the written instructions.
2. If infants arrive to the school asleep, or fall asleep, in equipment not specifically designed for infant sleep, the infant is removed and placed in appropriate infant sleep equipment.
3. The AAP recommends infants be placed on their back to sleep, but when infants can easily turn over from their back to their stomach, they may adopt their sleep preference position.
4. Sleeping infants and toddlers have a supervised nap/sleep period. The caregiver is positioned where he or she can hear and see the infant or toddler and frequently checks on the child while he/she is sleeping and remains in close proximity to children, even when engaging with awake children. This allows the caregiver the opportunity to hear/see a child who may have difficulty napping/sleeping or when waking.
5. Equipment such as a sound machine that may interfere with the caregiver's ability to see or hear a child who may be distressed is prohibited.
6. Steps are taken to keep children from overheating by regulating room temperature, avoiding excessive bedding, and not over-dressing or over-wrapping an infant. Children should be dressed appropriately for the environment, with no more than one (1) layer more than an adult would wear to be comfortable in the same environment. Caregivers conduct physical checks of the infant to ensure the child is not overheated or distressed.
7. The lighting in the room must allow the caregiver/teacher to see each child's face, to view the color of an infant's skin, and to check on the infant's breathing and placement of the pacifier (if used.)
8. All caregivers receive in-person or online training on infant safe sleep based on AAP safe sleep recommendations. This training must be completed within 30 days of employment or volunteering and is repeated every three years.



## SAFE SLEEP ENVIRONMENT

1. Room temperature will be kept at no less than 68°F and no more than 85°F when measured two feet from the floor. Infants are supervised to ensure they are not overheated or chilled.
2. Children's heads and faces are never covered during sleep. Infants' cribs do not have blankets or bedding hanging on the sides of the crib. **We may use sleep clothing (i.e. sleep sack, sleepers) that is designed to keep an infant warm without the possible hazard of covering the infant's head or face during sleep/nap time.**
3. No blankets, loose bedding, comforters, pillows, bumper pads, or any object that can increase the risk of entrapment, suffocation, or strangulation are used in infant cribs, playpens, or other sleeping equipment.
4. Toys and stuffed animals will be removed from the crib when the infant is sleeping. **When indicated on the *Infant and Toddler Feeding and Care Plan* or with written parent consent, pacifiers will be allowed in infants' cribs while they sleep. The pacifier cannot have cords or attaching mechanisms.**
5. Only an individually assigned safety-approved crib, portable crib, or playpen with a firm mattress and tight-fitting sheet will be used for infants napping or sleeping. Toddlers sleep on safety-approved cots, low to the ground.
6. Only one infant will occupy a crib or playpen at one time; only one toddler can occupy a cot at one time.
7. Sitting devices, such as car safety seats, strollers, swings, infant carriers, infant slings, and other sitting devices, will not be used for sleep/naptime. Infants who fall asleep anywhere other than a crib, portable crib, or playpen must be moved to their crib or playpen for the remainder of their sleep or nap time.
8. When infants arrive to the program asleep or when they fall asleep in equipment not specifically designed for infant rest, the infant is removed and placed in appropriate infant sleep equipment.
9. A person never uses a home monitor or commercial device marketed to reduce the risk of SIDS in place of supervision while children are napping and sleeping.
10. At enrollment, parents/guardians of infants and toddlers are informed of and provided a copy of the *Infant/Toddler Safe Sleep Policy*.
11. To promote healthy development, infants who are awake are given supervised "tummy time" for exercise and for play.

# Early Childhood Laboratory

## Preventing and Reporting Suspected Child Abuse and/or Neglect

### PURPOSE

The purpose of this commitment statement is to ensure every adult's awareness of his/her legal obligation and responsibility to prevent and report suspected child abuse and neglect.

Much of the information in this commitment statement comes directly from the Texas Department of Family and Protective Services [website](#).

### The Law

**All adults are required by State law to report any suspected child abuse or neglect** to a law enforcement agency, Child Protective Services (CPS,) or appropriate state agency (e.g. state agency operating, licensing, certifying, or registering a facility) within 48 hours of the event that led to the suspicion. Reports to CPS can be made to a local office or to the Texas Abuse Hotline (800-252-5400). Under State law, any person reporting or assisting in the investigation of reported child abuse or neglect is immune from liability unless the report is made in bad faith or with malicious intent.

**Failure to report suspected child abuse may result in prosecution for the commission of a Class B Misdemeanor.** In addition, a certified employee's failure to report suspected child abuse may result in disciplinary procedures by State Board of Educator Certification for a violation of the [Code of Ethics and Standard Practices for Texas Educators](#).

### Immunity

Staff who report suspicions of child abuse/neglect are immune from discharge, retaliation, or other disciplinary action for making such a report, unless it is proven that the report was made in bad faith or with malicious intent.

### Methods for Increasing Employee/Parent Awareness of Prevention Techniques

Prevention programs are more effective when they involve parents as partners in all aspects of program planning, implementation, and evaluation. Parents are more likely to make lasting changes when they are empowered to identify solutions that make sense for them.

(A) Strategies for coordination between the center and appropriate community organizations and common activities of prevention programs include:

- Family resource centers, which work with community members to develop a variety of services to meet the specific needs of the people who live in surrounding neighborhoods
- Home visiting programs that provide support and assistance to expecting and new mothers in their homes
- Parent education programs to help parents develop positive parenting skills and decrease behaviors associated with child abuse and neglect
- Parent mentor or leadership programs that provide role models and support to families in crisis
- Parent support groups, where parents work together to strengthen their families and build social networks
- Public awareness campaigns, such as posters and brochures that promote healthy parenting, child safety, and how to report suspected maltreatment
- Respite and crisis care programs, which offer temporary relief to caregivers in stressful situations by providing short-term care for their children
- Skills-based curricula that teach children safety and protection skills, such as programs that focus on preventing sexual abuse

(B) Actions that the parent of a child who is a victim of abuse or neglect should take to obtain assistance and intervention; You can make a tremendous difference in the life of an abused child, especially if you take steps to stop the abuse early. When talking with an abused child, the best thing you can provide is calm reassurance and unconditional support. Let your actions speak for you if you are having trouble finding the words. Remember that talking about the abuse may be very difficult for the child. It is your job to reassure the child and provide whatever help you can.

(C) If a teacher or staff member is accused of child abuse or neglect, required reporting will be done and an investigation will begin immediately. The staff member will be reassigned so he/she does not come in direct contact with children. Confidentiality of both the child and staff member will be protected to the extent permitted by law.

## Staff Training

In accordance with State law, the ECHL requires all employees to be trained in preventing and responding to abuse and neglect of children, including:

- (A) at least one annual training for all employees
- (B) training and assisting all childcare custodians (teachers, licensed childcare workers, foster parents, and social workers) in methods for increasing employee and parent awareness of issues regarding child abuse and neglect, including warning signs that a child may be a victim of abuse or neglect. There are often certain recognizable physical and behavioral indicators of child abuse or neglect. The following signs, by themselves, may not be conclusive evidence of a problem, but serve as indicators of the possibility that a problem exists.

### Signs of Physical Abuse

- bruising, welts or burns that cannot be sufficiently explained; particularly bruises on the face, lips, and mouth of infants or on several surface planes at the same time
- withdrawn, fearful or extreme behavior
- clusters of bruises, welts or burns, indicating repeated contact with a hand or instrument
- burns that are insufficiently explained, for example, cigarette burns
- injuries on children where children are not usually injured (e.g. torso, back neck, buttocks, or thighs)

### Signs of Sexual Abuse

- difficulty walking or sitting
- pain or itching in the genital area
- torn, stained or bloody underclothing
- frequent complaints of stomachaches or headaches
- venereal disease
- bruises or bleeding in external genitalia
- feeling threatened by physical contact
- inappropriate sex play or premature understanding of sex
- frequent urinary or yeast infections

### Signs of Emotional Injury

- speech disorders
- inability to play as most children do
- sleeping problems
- anti-social behavior or behavioral extremes
- delays in emotional and intellectual growth

### Signs of Neglect

- Lack of medical or dental care
- Chronically dirty or unbathed
- Lack of adequate school attendance
- Lack of supervision; for example, young children left unattended or with other children too young to protect or care for them
- Lack of proper nutrition
- Lack of adequate shelter
- Self-destructive feelings or behavior
- Alcohol or drug abuse

Each case of child abuse or neglect is individual. The child who has been hurt is always the victim. If you believe a child may be the victim of abuse or neglect, contact the Child Abuse Hotline at **1-800-252-5400**.

## Reporting Suspected Abuse and/or Neglect

If you suspect a child is being abused, it is critical to speak up. But reporting child abuse seems so official. Many people are reluctant to get involved in other families' lives. However, child abuse is NOT merely a family matter, and the consequences of staying silent can be devastating for the child. Please speak up. Report:

- **By Phone: 1-800-252-5400**
- **Online: [Texas Abuse Hotline External Link](#)**
- Call the Abuse Hotline toll-free 24 hours a day, 7 days a week, nationwide, or report with the secure website and get a response within 24 hours.

Reporting child abuse can bring up a lot of difficult emotions and uncertainty. You may ask yourself if you are doing the right thing, or question if your voice will even be heard.

[https://www.dfps.state.tx.us/Child\\_Protection/Child\\_Safety/reporting\\_abuse.asp](https://www.dfps.state.tx.us/Child_Protection/Child_Safety/reporting_abuse.asp)

## Staff Reporting Suspected Abuse and/or Neglect

First, report suspected abuse and/or neglect to the appropriate law enforcement agency then report your concerns to the ECHL Director. Simply reporting your concern to the ECHL Director does not relieve you of the **requirement to report to the appropriate State agency**. You must cooperate with child abuse and neglect investigators. Interference with a child abuse investigation by denying an interviewer's request to interview a child at school or requiring the presence of a parent or school administrator against the desires of the duly authorized investigator is prohibited.

## Tips for Communicating Effectively in Difficult Situations

- **Try to be as specific as you can.** For example, instead of saying, "The parents are not dressing their children right," say something like, "I saw the child running outside three times last week in subzero weather without a jacket or hat. I saw him shivering and uncomfortable. He seemed to want to come inside." However, remember that it is not your job to "prove" abuse or neglect. If suspicions are all you have, you should report those as well.
- **Understand that you may not learn the outcome.** Due to confidentiality laws in the U.S., unless you are a mandated reporter in an official capacity, Child Protective Services (CPS) probably will not update you about the results of their investigation. The family may not broadcast that they have been mandated services, either—but that does not mean they are not receiving them.
- **If you see future incidences, continue to call and report them.** Each child abuse report is a snapshot of what is going on in the family. The more information that you can provide, the better the chance of getting the best care for child.

# Stephen F. Austin State University

## Early Childhood Laboratory

### Solution and Resolution Worksheet for Parents and Staff

What is the issue?

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How does the issue affect/involve you?

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Who needs to be involved in solving/resolving the issue/reason for their involvement?

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Schedule a meeting; list the date & time

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During the Meeting: brainstorm with everyone present ideas for solving/resolving the issue

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Describe the plan to be implemented

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List the action step(s) to be taken, the person(s) responsible for the action step(s) & the date set for the completion of the action step(s)

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List the date and time for a follow up meeting

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#### **Communications with Parents/Guardians**

This letter informs parents and guardians of requisite provisions in the Emergency Operations Plan.  
A copy of this letter is given to parents of newly enrolled children and at least once per year to all parents.

To the Parents of Children attending the Early Childhood Lab:

This letter assures you of our concern for the safety and welfare of all children housed in the Early Childhood Research Center. Our *Emergency Operations Plan* provides for responses to all possible emergencies. Depending on the circumstance of the emergency, we use one of the following protective actions:

- **Immediate Evacuation** – in the event of a fire, children are evacuated to a safe area on the Early Childhood Research Center campus.
- **In-house Sheltering** – occurrences such as extreme weather conditions or hazardous materials may indicate the best response is to take shelter inside the building.
- **Evacuation** – total evacuation of the facility may become necessary if there is a danger in the building or nearby. ECHL staff will escort children to our Relocation Facility at Grace Bible Church, located at 2211 Raguet Street (directly across from the ECRC.)
- **Modified Operations** – Cancelling, postponing, or rescheduling normal activities may be necessary. Such actions are normally taken in case of a winter storm or building problems that make it unsafe for children (such as utility disruptions,) but may also be necessary in other situations.

Listen to the SFA notification system for announcements relating to the emergency actions listed above. For campus emergencies, go to the SFASU website for updated information.

[www.sfasu.edu](http://www.sfasu.edu)

We ask that you not call during an emergency. This keeps the main telephone line free for us to make emergency calls and relay information. An alternate phone number (i.e. cell phone number) may be provided for use in an emergency event.

The *Local Emergency Contacts Form* designating persons to pick up your child is included with this letter and in the *Enrollment Packet* for you to complete and return to the ECHL office no later than one week from receiving it. We refer to this form every time your child is released to someone other than you. Please ensure that only those persons you list on the form attempt to pick up your child.

I specifically urge you not to attempt to make different arrangements during an emergency. This only creates additional confusion and diverts staff's attention from their assigned emergency duties. In order to assure the safety of your child and staff, I ask for your understanding and cooperation. Should you have additional questions regarding our emergency operating procedures, contact me at [crystal.adams@sfasu.edu](mailto:crystal.adams@sfasu.edu).

Sincerely,



Crystal Adams  
ECHL Director

# KNOW WHAT TO DO

## EVACUATE

**Leave your building immediately!**



WHEN? If there is a danger inside or near your building  
VIA JackAlert and/or the fire alarm system in your building

ACTIONS:

- leave the building; assist those with disabilities
- take valuables and cell phone with you
- proceed to the assembly area outside
- wait for official notice to re-enter the building/area

## SHELTER IN PLACE

**Find a safe building immediately!**



WHEN? If severe/dangerous weather, an active emergency, or an environmental hazard outdoors is imminent

VIA JackAlert. Outdoor sirens will activate using the appropriate tone.

ACTIONS:

- seek shelter inside a building/remain in safe location
- keep tuned to media
- wait for official notice to resume normal activities

## LOCK DOWN

**RUN - HIDE - FIGHT**

WHEN? Active emergency or other violence on campus

VIA JackAlert. Outdoor sirens will activate using the appropriate tone.

ACTIONS (RUN-HIDE-FIGHT as appropriate for your safety)

- call 911 if you have information for police
- warn others if possible
- depending on situation, run away or hide/barricade or lock

doors, turn out lights, remain quiet

- as a last resort, fight to defend yourself
- wait for official notice to resume normal activities

**YOU MUST REGISTER ON mySFA to RECEIVE JackAlerts**

For more information: [www.sfasu.edu/dps](http://www.sfasu.edu/dps)

SFASU Police: 911 from campus phone or 934-468-2608 from other phone

**Stephen F. Austin State University**  
**HELPFUL LINKS**

**Annual Campus Security and Fire Report**

Updated each October with data from the preceding year, this [report](#) provides information relative to campus safety and safety protocols; it is posted when submitted to the USDE.

**Annual Crime Statistics**

Crime statistics are compiled and posted each year by the United States Department of Education. Click [here](#) to view stats for SFASU. For up-to-date information on the SFASU crime log, click [here](#).

**Armed Subjects Protocol**

Click [here](#) for protocol for armed subjects.

**Automatic Electronic Defibrillators (AED)**

Click [here](#) for information about SFASU AEDs.

**Bomb Threat [Procedures](#) and [Checklist](#)**

**Concealed Carry on Campus**

Campus Carry Law went into effect August 1, 2016. For more information about this law, click [here](#).

**Emergency Operations Plan**

Click [here](#) to learn more about SFASU's Emergency Operations Plan.

**Eyewitness Text Tips**

Learn more about how to anonymously [report](#) information to SFASU UPD.

**JackAlert Campus Notification System**

Click [here](#) to learn more about SFASU's JackAlert Campus Notification System.

**Lumberjack Guardian App**

Faculty, staff, and students can download the [Lumberjack Guardian](#) mobile phone app for either iPhone or Android phones by selecting the Rave Guardian app in the appropriate app store. To create your personal profile the user must enter their SFASU issued email address for the profile setup.

**Mental Health Community Providers**

Click [here](#) for a list of mental health community providers.

**Sexual Offender Registry**

For information about the State of Texas Sexual Offender Registry, click [here](#).

**Sexual Harassment**

Click [here](#) for information that defines sexual harassment and outlines the complaint process.

**Timely Warning Procedure**

Click [here](#) for information about the Timely warning Procedure.

**SFASU UPD Services**

For more information about the services SFASU UPD offers, click [here](#).