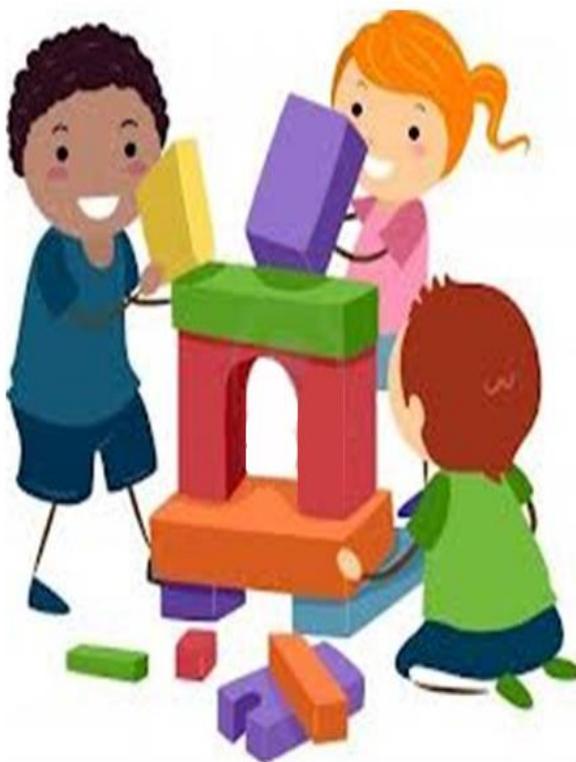




Lincoln Park Public Schools

Crowley GSRP Family Handbook

“Building the Foundation for Life-Long Learning”



These materials were developed under a grant awarded by the Michigan Department of Education.

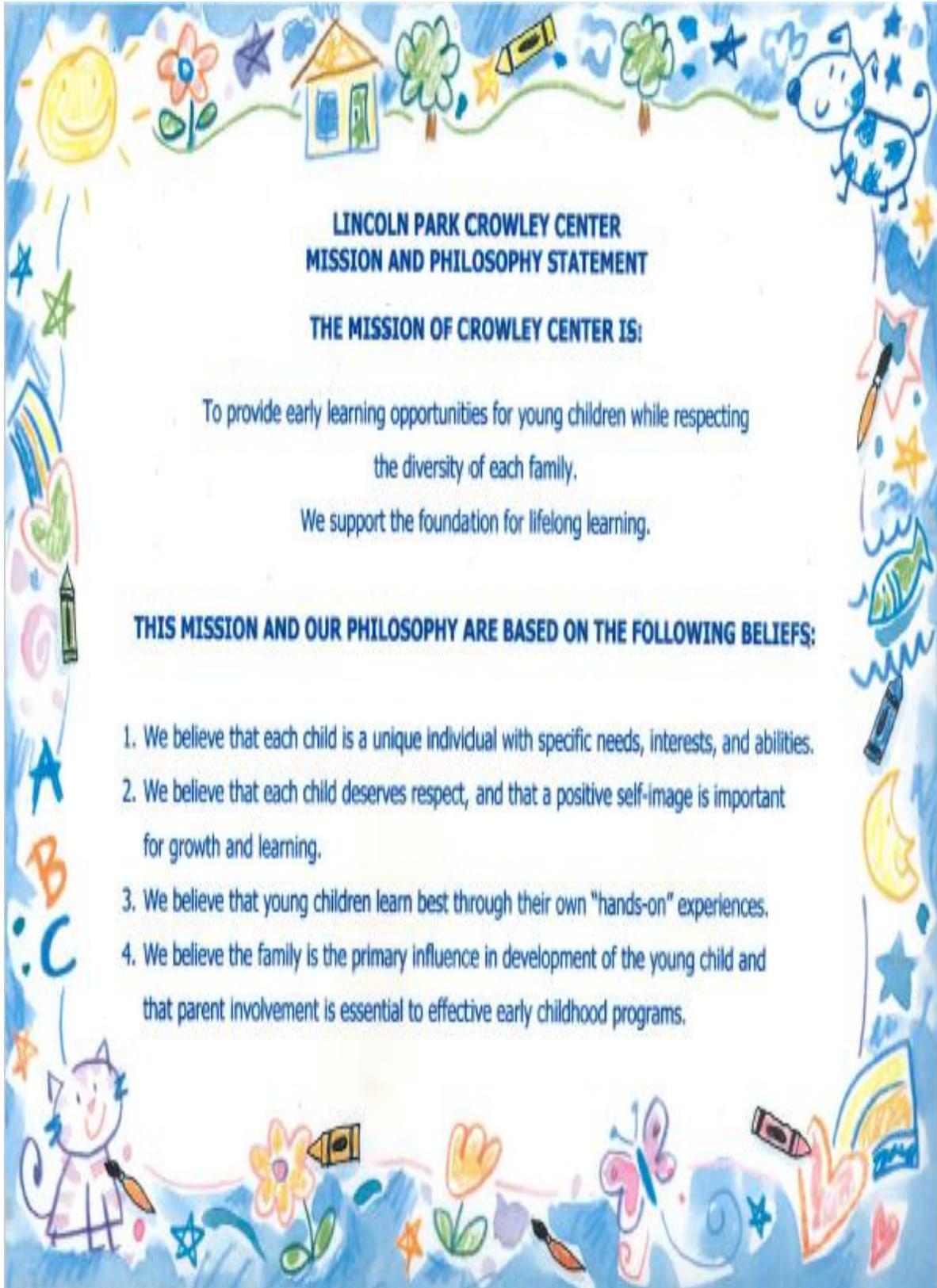
Location:
Crowley Center
2000 Pagel
Lincoln Park, MI 48146
GSRP office: (313) 389-0213

Dear Families,

Welcome to our program! We are looking forward to helping build your child's foundation for life-long learning. We hope to create with you a home and school partnership by supporting you as the most important role model for your child. Families are strongly encouraged to actively participate in their child's education.

Looking forward to our partnership!

~Crowley Team



**LINCOLN PARK CROWLEY CENTER
MISSION AND PHILOSOPHY STATEMENT**

THE MISSION OF CROWLEY CENTER IS:

To provide early learning opportunities for young children while respecting
the diversity of each family.

We support the foundation for lifelong learning.

THIS MISSION AND OUR PHILOSOPHY ARE BASED ON THE FOLLOWING BELIEFS:

1. We believe that each child is a unique individual with specific needs, interests, and abilities.
2. We believe that each child deserves respect, and that a positive self-image is important for growth and learning.
3. We believe that young children learn best through their own "hands-on" experiences.
4. We believe the family is the primary influence in development of the young child and that parent involvement is essential to effective early childhood programs.

Crowley Center Curriculum Statement

Crowley Center (GSRP) uses the HighScope Curriculum. The curriculum is divided into eight key areas that address all domains of child development. The Eight areas are: *Approaches to Learning; Social and Emotional Development; Physical Development and Health; Language, Literacy and Communication; Mathematics; Creative Arts; Science and Technology; and Social Studies*. In the HighScope Curriculum young children build or “construct” their knowledge of the world. That means learning is not simply a process of adults giving information to children rather, in a HighScope setting, children participate actively in the learning process. They discover things through direct experience with people, objects, events, and ideas. Children also make plans and follow through on their interests and intentions. This educational approach, in which children and adults share responsibility for learning, builds essential school-readiness and life skills. In addition to addressing traditional academic subjects, the HighScope Curriculum promotes independence, curiosity, decision making, cooperation, persistence, creativity, and problem solving.

Goals for Our Students:

- To actively be engaged in their learning process by planning their daily activities, carrying out their intentions and reviewing what they accomplished.
- To build essential school-readiness and life skills such as independence, decision making, cooperation and problem solving.
- To learn through active involvement with people, materials and ideas.

School-Day Sample Routine

8:30 – 8:45 Arrival/Breakfast/Greeting Time – Children enter the classroom at their own pace. Parents/guardians are encouraged to stay until children are ready for them to leave. Children have choices about whether to eat, spend time with books, or interact with adults and one another. Once all children have arrived, adults share the daily announcements.

8:45 – 9:00 Large-Group Time/Music and Movement – All adults and children participate in activities planned around children’s interests, developmental levels, music and movement, cooperative play and projects; and events meaningful to children.

9:00 – 9:10 Planning Time – Children indicate their plans to adults in a place where intimate conversations can occur and where people and materials are visible. Adults use a range of strategies to support children’s planning (e.g., props, area signs, tape recorders, singing, planning individually, in pairs, in small groups).

9:10 – 10:10 Work Time (children’s hour of uninterrupted Choice Time) – Children always initiate activities and carry out their intentions. Children make many choices about where and how to use materials. During Work Time, adults participate as partners in child-initiated play and encourage children’s problem solving both with materials and during times of social conflict.

10:10 – 10:20 Cleanup Time – Children and adults clean up together keeping the spirit of play and problem solving alive. Children make many choices during clean up. Adults accept children’s level of involvement and skill while supporting their learning.

10:20 – 10:30 Recall Time – Gathered in small group settings, children choose Work Time experiences to reflect on, talk about, and exhibit. Adults provide a variety of materials and strategies to maintain interest as they follow children’s lead and encourage children to share (e.g., individual props such as puppets, telephones or periscopes, group games using a hula hoop, ball or spinner, re-enacting, drawing, showing and describing a structure or painting). Adults are unhurried in their approach and may complete Recall Time with four or five children each day.

10:30 – 10:45 Small Group Time – An adult-initiated learning experience based on children’s interests and development where children explore, play, work with materials, and talk about what they are doing. Individual children explore and use the same set of materials in their own way.

10:45 – 11:30 Outside Time – Children have many choices about how they play in the outdoor learning environment, much as they do during Work Time indoors. Adults supervise children for safety and also join in their active outdoor play, supporting their initiatives and problem solving.

11:30 – 11:40 Bathroom/Wash Hands/Prepare for Lunch – Children assist in preparation and set up. Children choose where they would like to sit and are encouraged to serve themselves.

11:40 – 12:25 Lunch – Family-Style meals support children doing things for themselves (e.g., serve themselves, pour beverages, distribute napkins, wipe up spills). Children choose whether to eat, what to eat, and how much to eat. Adults eat and have meaningful conversations with the children. Children are encouraged to clean their own snack space including disposal of leftovers, wiping of tables, and pushing in their own chairs.

12:25 – 1:25 Quiet/Resting Time – Resting is a time for sleeping or quiet, solitary, on-your-own-cot play. Rest Time plans should be individualized to meet the needs of each child. Quiet play could include books, soft music, baby dolls, or fine motor manipulatives.

1:25 – 1:55 Wake/Bathroom/Snack – As children wake up, adults and children work together to put away cots and set up for snack. Children are encouraged to clean their own snack space including disposal of leftovers, wiping of tables, and pushing in their own chairs.

1:55 – 3:00 Plan/Work/Cleanup/Recall – (refer to AM descriptions).

3:00 – 3:30 Outside Time/Dismissal (refer to AM descriptions).

***This is just a sample. Your child’s actual classroom schedule will be given to you during the first home visit.

Diversity Statement

Valuing diversity is a critical success factor for our GSRP program. Diversity includes race, ethnicity, disabilities, sexual orientation, gender, religion, culture, hierarchy, physical and mental ability, language, physical appearance, lifestyle, and geographical origin. Lincoln Park GSRP values and supports diversity within children, families, staff and the community. It is mandatory that all Lincoln Park GSRP staff demonstrate a respect for and appreciation of diversity.

Special Needs Plan

As our program philosophy states, we believe is child is a unique individual with specific needs, interests, and abilities. Our primary approach is to learn and understand each child's interests and developmental progress through interaction with the family and child. In gathering information about the child, we problem-solve as a team with the family to create and implement strategies and routines that best fit the child's needs. Communication between school and the family is key in this process. Other factors we consider in our special needs plan include environment, schedule, routine, medical information, social interactions, and other possible influential components in the child's life. If the teacher and family feel is it necessary to request additional support from the LPPS special education department, then a written request is completed and a determination is made by the team.

Family Rights

You have the right to:

1. Be treated with dignity and respect.
2. Be informed about community resources concerned with the health, education and the improvement of family life.
3. Be informed regularly about your child's progress.
4. Be welcomed into your child's classroom, family events and on field trips.
5. Attend parent advisory meetings and offer input into program activities.
6. Volunteer in your child's classroom (must pass background check).
7. Be recognized as your child's first and most important teacher.

Family Responsibilities

You are responsible for:

1. Completing all required paperwork.
2. Welcoming staff into your home during home visits to discuss program information, goals for your child and other important information regarding your child.
3. Keeping staff updated on family changes or changes in your child's health that could affect your child's behavior at school.
4. Keeping your child's emergency card information updated at all times.
5. Attending two home visits, three parent-teacher conferences, and any other meetings needed by staff to discuss your child's progress.
6. Calling the GSRP office (313) 389-0213 when your child is going to be absent from school or tardy.
7. Notifying the GSRP office immediately if your child has a contagious disease or head lice.
8. Keeping updated about school events and information by reading all classroom and school newsletters, flyers and other forms of communication.

Enrollment

Vacancies in the program are filled from the waiting list of applicants and prioritized by the use of selection criteria, including household size and income.

Emergency Card

We must be able to reach you at all times. Your child's emergency card **MUST** be completely filled out with addresses and phone numbers and contain accurate information that is kept updated at all times. The emergency card shall contain the name(s) and current phone number(s) of a local person(s), other than parents or guardians, who may be contacted in case of an emergency when parents or guardians are unable to be reached. **ANYONE** who picks your child up from school must be listed on the emergency card and show picture I.D. at pick up time. We may refuse someone from picking up your child if that person is not listed on the emergency card.

Child Custody Issues

According to the law, we must release children to their parents or legal guardians, unless we have a copy of a legal court order stating otherwise. The document should include a judge's signature and date. Please make certain we have any such documents on file.

Document Request

Should a family need to request a document from our main office, we advise that you allow at least a **72 hour window** for completion by program coordinator or director. Document requests include, but are not limited to: copy of child's birth certificate or health physical, letter of confirmation for child enrolled, or letter of confirmation for parent volunteer hours.

Communication

We strive to communicate with families using a variety of methods. A large portion of our families speak Spanish. We will do our best to provide information to families in English and Spanish. If your family speaks a language other than English or Spanish, please inform the GSRP office, and we will attempt to find a way to communicate with you in your native language. We communicate with families throughout the school year with: flyers, notes, monthly calendars, monthly food service menus, phone calls, e-mails, monthly parent meetings, parent information boards, conferences and classroom newsletters.

GSRP Program Hours

All classrooms operate Monday-Thursday, 8:30 a.m. to 3:30 p.m. Children do not attend school on Fridays. All classrooms are staffed with a qualified lead teacher, a qualified associate teacher, and a classroom assistant teacher. Each classroom will maintain an enrollment of eighteen children.



Drop off & Pick Up

It is expected and required for families to be **ON TIME** for drop off (8:30) and pick up (3:30).

Our program grant funds children to attend a FULL seven hour day (8:30-3:30), and families who do not comply will jeopardize their child's enrollment.

All children must be escorted into school and signed in by an **adult (at least age 18)**. Only **adults (at least age 18)** on the emergency card can pick up a child from school and sign him or her out. Late pickups worry children and cause an inconvenience to staff. If a parent, guardian or other adult picking up a child appears to be intoxicated or impaired, GSRP staff will strongly suggest that it is not safe for the child to leave with the person at this time and offer to call someone else. If the adult refuses, the staff will inform the police of the situation.

Fee Schedule

The Lincoln Park Great Start Readiness Program is offered free of charge to families with children who meet the birth date requirement and eligibility guidelines established by the Michigan Department of Education.



Snow Days

If Lincoln Park Public Schools are closed due to poor weather conditions, then our GSRP program will be closed too. Please check local news stations for closures. The Lincoln Park School District **might** contact you by phone if schools are closed. Our GSRP program will not contact you.



School Calendar (When Does School Start?)

Our preschool program usually starts late September or early October and runs until the last week of May or early June. The grant requires at least 30 weeks of school. Staff returns to work in September. Teachers will begin to call families around the second or third week in September to set up the first home visit appointment. Our program follows the same school calendar as the Lincoln Park Public School District for school breaks and staff professional development days. **This includes early release days.** Please see the list below of days school is **dismissed at 2:30 p.m.** (one hour early).

Dates of Early Release:

September 26, 2017
October 10, 2017
October 24, 2017
November 28, 2017
December 12, 2017
January 23, 2018
January 30, 2018
February 13, 2018
February 27, 2018
March 13, 2018
March 27, 2018
April 24, 2018
May 8, 2018
May 22, 2018

Copies of the district calendars and other important information can be found on the district website:

<http://www.lincolnparkpublicschools.com>.

We will notify you in advance of any days the school will be closed.



Home Visits

Two home visits are required by the Great Start Readiness Program grant. The first home visit will take place before school starts in September. The purpose of the first home visit is for the teachers and families to meet in a setting that is most comfortable for you and your child. Children are most at ease in their home. During the home visit, the teachers will share information about their classroom and ask for some specific information about your child. The second home visit usually takes place in March.



Parent-Teacher Conferences

At least two 45-minute parent-teacher conferences are required by the Great Start Readiness Program grant. The teachers will schedule a conference with you in November and June to discuss your child's progress in school.

Child Abuse & Neglect

It is required by law that all Lincoln Park GSRP staff MUST report suspected cases of child abuse or neglect. The State of Michigan Centralized Intake number is toll free (855) 444-3911. All of our staff have been fingerprinted and background checked.

Confidentiality

Our program maintains a strict code of confidentiality. We will not discuss information about a child, including enrollment status, with anyone without written permission from a parent or legal guardian. GSRP staff will not discuss with you any other child or parent in our program.

Child Attendance Policy

Our program records attendance for each child on a daily basis. The Lincoln Park Great Start Readiness Program is comprehensive, designed to assist families with young children in many ways. To ensure that children and families receive the maximum benefit from the program, **regular attendance is essential and required!** The Department of Education expects that we will be fully enrolled and fully attended. For this goal to be achieved, it is important that your child attend school every day.

Our program grant funds children to attend a FULL seven hour day (8:30-3:30), and families who do not comply will jeopardize their child's enrollment.

- If a child is absent due to illness, we request a doctor note.
- If a child is absent due to a death in the family, we request documentation from funeral home or services facility.

Tardiness

School starts at 8:30 a.m. If you are unable to bring your child to school on time, you MUST call the office (313-389-0213) to let us know that your child will be arriving to school late. If you **do not** call the office, then your child will not be counted for lunch.

- After 8:35 a.m., child will be marked tardy.
- Three tardies will equal one absence.
- Three absences may cause the child to be dropped from the program.

Withdrawal Policy

If your child has been absent from school and we have not heard from you, we will attempt to contact you. If your child has three (3) absences, your child may be dropped from the program. We maintain a waiting list of families willing to cooperate with the attendance policy.

Drops

Families may drop from the program at any time per their request. We ask that the family contact their child's teachers or the office in advance if they are moving or are no longer interested in participating in the program. We also ask parents to share with us the reason for leaving. Most likely, issues or problems can be resolved to the satisfaction of all.



Problem Solving Procedure for Families

Occasionally, a problem will arise between a family and the program. By keeping open lines of communication between families and staff, issues or problems usually can be resolved. Families are encouraged to first discuss any concerns they might have with their child's teachers in a confidential manner. If the family is not satisfied that the concern or issue is being addressed, the parent should contact the GSRP office. The Program Coordinator and/or Director will work with the family and the teachers to resolve the issue or concern. If GSRP staff is unable to resolve the issue or concern, the family can write a formal grievance within 10 days that is dated and signed and submitted to the Program Coordinator or the Director. A copy of the complaint will be forwarded to the Lincoln Park School District Superintendent.

Occasionally, a problem will occur between a family and another community agency. In such a situation, please speak with the GSRP Program Coordinator, sharing the problem and the steps taken to resolve the situation. The Coordinator may be able to help brainstorm possible additional actions. We are an advocate for children and families.



Family Resources

Our program maintains a list of community resources for families who may be in need of food, counseling, health services or other services. Please speak with the Program Coordinator if you are interested in a list of resources.

What Should My Child Wear to School?

While at school, your child will have opportunities to be involved in activities that are fun and sometimes messy!! Please send your child to school in clothing that can potentially get wet, spilled on, paint on, glue on, play dough or marked on. We do our best to protect children's clothing by using smocks but sometimes mishaps happen. If your child likes to wear dresses please put leggings or tights underneath the dress during cool/cold weather and shorts during warm weather. Foot wear is important too! Please have your child wear shoes that he/she can take off and put on by her/himself. Velcro type shoes are the best since young children generally cannot tie shoes yet. Sandals must cover toes and have a strap in the back (like Crocs), no flip-flops please. Flip-flops do not protect children's feet when running on playground woodchips.



Outdoor Clothing & Play

Please dress your child appropriately for outdoor play; a light jacket for fall and spring weather and a heavier jacket with a hood or hat and gloves for winter play. Boots and snow pants may be needed too. Students will go outside everyday as long as the weather is suitable and the temperature and wind chill are 25 degrees or above. **If your child has asthma or an allergy to cold, in order for your child to stay inside and not play outside he/she MUST have a note from a doctor that states the outside temperature the child cannot play in.**



Nutrition Plan, Meals & Snacks Policy

Full day sessions will be served breakfast, lunch, and afternoon snack provided by the school, free of charge to families. All food served is in compliance with nutritional guidelines set forth by the National School Lunch Program (NSLP) and Child and Adult Care Food Program (CACFP). A monthly breakfast/lunch calendar will be sent home. We provide 1% milk and water daily. Food is served inside the classroom in a family style set up. Children will be encouraged to try new foods, but will not be forced to eat. During meals, staff members sit with the children modeling and encouraging healthy eating habits, appropriate table manners, conversation and self-help skills such as self- serving and cleaning up after oneself. A crucial component of family style eating is that all children partake in eating the same foods served around the table. Additionally, our grant expects that we provide all components of the program, food included. Therefore, our center does **NOT** allow outside food brought in for breakfast, lunch, or snack. Birthday treats are not allowable between 8:30-3:30. If a treat is sent to school, the treat will be distributed to families during 3:30 dismissal.



Illnesses

Our center is a place for children to make new friends, try new things and unfortunately sometimes catch germs that make them sick. Staff is required to maintain a clean classroom and sanitize tables before food is served. Children are required to wash their hands before they eat. Children are also taught how to properly “catch” a sneeze and a cough (only in the elbow, never in the hand). No matter how hard we try to keep our school clean, germs are unavoidable. If your child should become ill, please keep your child home. If your child has a fever, he/she must remain fever free for **24 hrs**. If your child has diarrhea, please keep her/him home until stool is normal. You are required to call the Crowley GSRP office and leave a message if your child is absent from school. Our number is **313-389-0213**.

Please see the following information regarding *communicable diseases*. All communicable diseases **MUST** be reported to our office as soon as your child is diagnosed.

ILLNESS Guidelines

When a child is ill, it is always best that he or she remains home from school. The child is more comfortable and it prevents the spread of illness to other students and staff. Many times, it is difficult to determine if your child is sick enough to stay home. If your child has vomiting, diarrhea, fever, green or profuse nasal drainage, cough or a rash, he/she should remain home until the symptoms are gone or until his/her physician has documented for the school that they are well enough to attend and are not contagious. The following are guidelines that may help parents decide when to keep their child home and will also give the criteria we will follow in making a decision to send a student home from school.

DIARRHEA

If diarrhea occurs at home and is not the result of medication for constipation, your child should remain home. Your child will be sent home:

- If there are three episodes of diarrhea in a four hour period at school with no other symptoms
- One episode of diarrhea accompanied by fever, vomiting, or abdominal pain or cramping
- If there are no clothes available for changing or adequate cleaning is not possible

If diarrhea becomes chronic, in the absence of a known medical condition, a physician evaluation with clearance to return to school will be requested. If your child has a known medical condition that causes diarrhea, please notify the school.

FEVER

The normal range for temperature is 96.6 F to 99.6 F when taken orally. If the temperature is taken rectally, a degree is subtracted. If the temperature is taken under the arm (axillary), a degree would be added. If your child has a temperature over 100.0 F, please keep him/her home. Your child will be sent home if the temperature is above 100.0 F.

VOMITING

Vomiting can be a symptom of illness and your child should be kept home. He/she will be sent home from school if:

- there is repeated vomiting in the absence of any other symptoms

- one episode of vomiting accompanied by fever, abdominal pain, or diarrhea
- clean clothes are not available or adequate cleaning is not possible

RASH

Rashes can be caused by illness, allergies, or medical reactions. Because a rash can be a symptom of a communicable disease, children with a rash should be evaluated by their physician. Any child that is found to have a rash will be sent home from school and a physician evaluation will be requested. A clearance from the physician must be obtained before the child may return.

COLDS, COUGHS, NASAL DRAINAGE

Colds and other respiratory infections are easily spread by coughing, sneezing, and hand-to-hand contact. Frequent congested coughing and profuse nasal drainage is reason to keep your child home. He/she will be sent home from school if:

- there is uncontrollable coughing or sneezing
- there is a cough or congestion accompanied by fever
- there is persistent green nasal drainage
- there is white or clear nasal drainage that is profuse enough that it cannot be controlled

Over-the-counter medications to treat any of the above symptoms will not be given at school unless there is a Lincoln Park Public Schools consent form signed by the parents and physician. Medications must be in original packages with clear instructions from the physician.

Your child needs to be symptom free for 24 hours before returning to school. This means 24 hours from the last episode of vomiting, diarrhea, or fever free, without the use of medication, for 24 hours. Every attempt will be made to determine a cause for the symptoms before you are called to pick your child up from school. The education of your child is important to us, but if your child is not feeling well, learning becomes more difficult.

WAYNE COUNTY DEPARTMENT OF PUBLIC HEALTH DISEASE CONTROL DIVISION Communicable Disease Reference Chart

The following chart contains general recommendations involving uncomplicated cases of commonly encountered communicable diseases. The recommendations are for use by school administration to exclude and re-admit children who are ill or are suspected of being ill. Contacts without symptoms need not be excluded. The "Exclusion Period" is a minimum amount of time and covers the Communicability Period. A child may need a longer convalescent period because of his/her physical disability. It should be noted that these diseases are primarily transmitted by direct contact with the infected individual through coughing,

sneezing, direct transfer or unsanitary conditions. Books, papers and other school equipment usually do not act as vehicles for transmission of diseases.

*NOTE: PLEASE NOTIFY THE DEPARTMENT OF PUBLIC HEALTH IMMEDIATELY AT (734) 727-7079 OR (734) 727-7078 IF YOU ARE AWARE OF AN UNUSUAL OCCURRENCE OF A DISEASE OR AN UNUSUAL NUMBER OF CASES OF ONE TYPE OF DISEASE ON A GIVEN DAY.

ANIMAL/HUMAN BITES (BACTERIA, VIRUSES & FUNGI)	VARIABLE, RABIES IN MAN FROM AN ANIMAL IS 9 DAYS TO OVER 7 YEARS; USUALLY 3-8 WEEKS.	VARIABLE DEPENDING ON ORGANISM INVOLVED.	SEEK MEDICAL ATTENTION IMMEDIATELY. REPORT ANIMAL BITES TO LOCAL ANIMAL CONTROL CENTER.
CHICKEN POX & HERPES ZOSTER (SHINGLES) (VIRUS)	2-3 WEEKS; COMMONLY 14-16 DAYS.	AS LONG AS 5 BUT USUALLY 1-2 DAYS BEFORE ONSET OF RASH AND NOT MORE THAN 1 WEEK AFTER FIRST CROP OF LESIONS APPEAR.	EXCLUDE UNTIL ALL LESIONS HAVE DRIED AND CRUSTED, USUALLY ABOUT 6 DAYS AFTER ONSET OF RASH. EXCLUSION IS NOT RECOMMENDED WITH HERPES ZOSTER LESIONS IN AREAS THAT ARE NORMALLY COVERED BY CLOTHING.
COMMON COLD (VIRUSES)	BETWEEN 12 HOURS AND 5 DAYS; USUALLY 48 HOURS.	USUALLY 25 HOURS BEFORE ONSET OF SYMPTOMS TO 5 DAYS AFTER ONSET.	EXCLUDE UNTIL ACUTE SYMPTOMS RESOLVE OR UNTIL THE FEVER IS GONE FOR 24HOURS
CONJUNCTIVITIS (PINK EYE) (BACTERIA, VIRUSES)	VARIABLE DEPENDENT UPON INFECTING AGENT, USUALLY 24 TO 72 HOURS	DURING COURSE OF ACTIVE INFECTION	EXCLUDE UNTIL UNDER MEDICAL CARE AND DRAINAGE FROM EYES HAS CLEARED.
FIFTH DISEASE (HUNGARIAN MEASLES; ERYTHEMA INFECTIOSUM) (VIRUS)	VARIABLE; 4-20 DAYS	GREATEST BEFORE ONSET OF RASH AND PROBABLY NOT COMMUNICABLE AFTER ONSET OF RASH.	EXCLUSION NOT RECOMMENDED IF FIFTH DISEASE OCCURS IN HEALTHY HOST.
HAND, FOOT AND MOUTH DISEASE (VIRUS) HAND,FOOT AND MOUTH DISEASE	3-7 DAYS	AS LONG AS ORGANISMS ARE PRESENT	IN SEVERE CASES ESPECIALLY IF ASSOCIATED WITH DROOLING, EXCLUDE UNTIL FEVER IS GONE AND LESIONS HAVE BEGUN TO HEAL. EXCLUSIN NOT RECOMMENDED FOR MILDER CASES.
HEPATITIS TYPE A (VIRUS)	15-50 DAYS; AVERAGE IS 28-30 DAYS.	2 WEEKS BEFORE ONSET OF SYMPTOMS TO A MAXIMUM OF 2 WEEKS AFTER ONSET.	EXCLUDE UNTIL 2 WEEKS AFTER ONSET OF SYMPTOMS OR 7 DAYS AFTER JAUNDICE ONSET IF IT OCCURS.
HEPATITIS TYPE B (VIRUS)	45-180 DAYS; AVERAGE IS 60-90 DAYS.	SEVERAL WEEKS BEFORE ONSET OF SYMPTOMS UNTIL BLOOD IS NO LONGER POSITIVE FOR EVIDENCE OF VIRUS.	USUALLY NO EXCLUSION NEEDED. RESTRICTION FROM CERTAIN BLOOD EXPOSURE ACTIVITIES SHOULD BE CONSIDERED INDIVIDUALLY.
HERPES SIMPLEX TYPE I (VIRUS)	2-12 DAYS.	USUALLY AS LONG AS LESIONS ARE PRESENT. HAS BEEN FOUND IN SALIVA FOR AS LONG AS 7 WEEKS AFTER MOUTH LESIONS	NO EXCLUSION RECOMMENDED FOR NORMAL SCHOOL ACTIVITIES. ALL CHILDREN SHOULD BE ADVISED TO AVOID DIRECT AND

			INDIRECT (E.G. SHARING CUPS AND BOTTLES) ORAL CONTACT WITH OTHER CHILDREN AND TO WASH THEIR HANDS. EXCLUSION FROM SKIN TO SKIN CONTACT ACTIVITIES WHEN ORAL AND SKIN LESIONS ARE NOT COVERED.
IMPETIGO (BACTERIA)	VARIABLE, INDEFINITE; COMMONLY 4-10 DAYS.	WHILE SORES ARE DRAINING OR A CARRIER STATE PERSISTS.	EXCLUDE UNTIL 24 HOURS AFTER TREATMENT HAS BEEN INITIATED.
INFLUENZA (VIRUSES)	SHORT, USUALLY 1 TO 3 DAYS.	PROBABLY UP TO 3-5 DAYS FROM CLINICAL ONSET IN ADULTS; UP TO 7 DAYS IN CHILDREN	EXCLUDE UNTIL ACUTE SYMPTOMS RESOLVE OR UNTIL FEVER IS GONE FOR 24 HOURS.
MENINGITIS (ASEPTIC/VIRAL) (VIRUSES)	DEPENDS ON TYPE OF INFECTIOUS AGENT.	DEPENDS ON TYPE OF INFECTIOUS AGENT.	EXCLUDE UNTIL PHYSICIAN APPROVES RETURN.
MENINGITIS (HAEMOPHILUS INFLUENZAE) OR (NEISSERIA MENINGITIDES)(BACTERIA)	2-10 DAYS; COMMONLY WITHIN 3-4 DAYS. H. INFLUENZAE 2-4 DAYS.	AS LONG AS ORGANISMS ARE PRESENT; 24 HOURS AFTER APPROPRIATE TREATMENT. H. INFLUENZAE 24-48 HOURS AFTER.	EXCLUDE UNTIL UNDER TREATMENT & PHYSICIAN APPROVES RETURN.
MONONUCLEOSIS (VIRUS)	FROM 4-6 WEEKS	COMMUNICABILITY MAY PERSIST UP TO A YEAR.	NO EXCLUSION. FREQUENT HAND WASHING AND AVOID DRINKING BEVERAGES FROM A COMMON CONTAINER TO MINIMIZE CONTACT WITH SALIVA.
MUMPS (VIRUS)	ABOUT 15-18 DAYS; RANGE IS 14-25 DAYS.	AS LONG AS 6 DAYS BEFORE GLAND INVOLVEMENT TO 9 DAYS AFTER ONSET. MOST INFECTIOUS 2 DAYS BEFORE ONSET TO 4 DAYS AFTER.	EXCLUDE FOR 9 DAYS AFTER APPEARANCE OF PAROTID GLAND (NECK AREA) SWELLING.
PEDICULOSIS (HEAD LICE) (INSECT) PEDICULOSIS	EGGS HATCH IN 7-10 DAYS.	UNTIL LICE AND VIABLE EGGS ARE DESTROYED.	NO EXCLUSION IF THE CHILD IS HEALTHY. DISCOURAGE FROM CLOSE DIRECT HEAD CONTACT WITH OTHERS.
PERTUSSIS (WHOOPIING COUGH) (BACTERIA)	COMMONLY 4-21 DAYS.	7 DAYS AFTER EXPOSURE TO 3 WEEKS AFTER ONSET IF NOT TREATED OR 5 DAYS AFTER TREATMENT.	EXCLUDE UNTIL 3 WEEKS FROM DISEASE ONSET IF NOT TREATED, OR AFTER 5 DAYS OF TREATMENT WITH A 14 DAY APPROPRIATE REGIMEN.
PINWORMS (ENTEROBIASES) (ROUNDWORM)	LIFE CYCLE IS 2-6 WEEKS.	AS LONG AS EGGS ARE LAID.	EXCLUDE UNTIL AT LEAST ONE TREATMENT IS COMPLETED; A 2 ND TREATMENT 2 WEEKS AFTER THE 1 ST .
RINGWORM (FUNGI)	4-14 DAYS.	AS LONG AS LESIONS ARE PRESENT.	EXCLUDE FROM GYMNASIUMS, SWIMMING POOLS, AND OTHER

			ACTIVITIES LIKELY TO LEAD TO EXPOSURE OF OTHERS WHILE UNDER TREATMENT.
RUBELLA (GERMAN OR 3-DAY MEASLES) (VIRUS)	12-23 DAYS.	FROM 1 WEEK BEFORE TO 7 DAYS AFTER ONSET OF RASH.	EXCLUDE UNTIL 7 TH DAY AFTER ONSET OF RASH.
RUBEOLA (HARD OR 10-DAY MEASLES) (VIRUS)	7-21 DAYS; USUALLY 14 DAYS WHEN RASH APPEARS	BEGINNING OF COLD SYMPTOMS TO 4 DAYS AFTER RASH ONSET.	EXCLUDE UNTIL 4 TH DAY AFTER ONSET OF RASH.
SALMONELLA (BACTERIA)	7-72 HOURS; COMMONLY 12-36 HOURS.	DURING THE COURSE OF INFECTION AND UNTIL ORGANISMS ARE NO LONGER IN FECES.	EXCLUDE UNTIL SYMPTOMS HAVE GONE. ACTIVITY EXCLUSION BASED ON WCDPH RECOMMENDATIONS.
SCABIES (INSECT)	FIRST TIME INFECTION 2-6 WEEKS; SUBSEQUENT INFECTIONS 1 TO 4 DAYS.	UNTIL MITES AND EGGS ARE DESTROYED.	EXCLUDE UNTIL 1 ST 24 HOURS TREATMENT IS COMPLETED. A 2 ND TREATMENT MAY BE NEEDED.
SCARLET FEVER & STREP THROAT (BACTERIA)	1-3 DAYS USUALLY.	IF UNTREATED, 10-21 DAYS OR LONGER, IF TREATED WITHIN 24 HOURS.	EXCLUDE UNTIL UNDER TREATMENT FOR 24 HOURS.
SHIGELLA (BACTERIA)	12-96 HOURS; COMMONLY 1-3 DAYS	DURING COURSE OF INFECTION AND UNTIL ORGANISMS ARE NO LONGER IN FECES.	EXCLUDE UNTIL SYMPTOMS HAVE GONE. ACTIVITY EXCLUSION BASED ON WCDPH RECOMMENDATIONS. CLEARANCE WITH 2 NEGATIVE STOOLS 48 HOURS AFTER TREATMENT.



Physical Exam and Immunizations

Michigan State Laws and the Department of Education requires that every child have a physical exam, complete with appropriate immunizations for enrollment in our program. We do not require but strongly suggest that your child see a dentist for an oral exam. A dental examination may occur at our school during the course of the school year by a mobile dentist. Our program will offer your child, free of charge, a vision and hearing screening done at school. Vision and hearing exams are required for kindergarten enrollment.



Medication Policy

This facility will administer medication to children with written approval of the parent and an order from a health provider for a specific child. Because administration of medication poses an extra burden for staff, and having medication in the facility is a safety hazard, whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction. Parents or legal guardians may administer medication, at the facility, to their own child during the school day.

The program coordinator (or director in program coordinator's absence) may administer medication only if the parent or legal guardian has provided written consent; the medication is available in an original labeled prescription container or in a manufacturer's container (i.e. sun screen). The facility must have on file the written instructions of a licensed clinician to administer the specific medication. For prescription medications, parents or legal guardians will provide caregivers with the medication in the original child-resistant container that is:

- labeled by a pharmacist with the child's name
- the name and strength of the medication
- the date the prescription was filled
- the name of the health care provider who wrote the prescription
- the medication's expiration date
- administration, storage and disposal instructions

For **over-the-counter medications**, parents or legal guardians will provide the medication in a child-resistant container. The medication will be labeled with the child's first and last names; specific, legible instructions for administration and storage supplied by the manufacturer; and the name of the health care provider who recommended the medication for the child.

A **Medication Log** will be maintained by the facility staff to record the instructions for giving the medication, consent obtained from the parent or legal guardian, amount, the time of

administration, and the person who administered each dose of medication. Spills, reactions, and refusal to take medication will be noted on this log.

Medication errors will be controlled by checking the following 5 items each time medication is given:

- | | |
|----------------------------------|---------------------------------------|
| a. Right child | When a medication error occurs, the |
| b. Right medicine | Regional Poison Control Center and |
| c. Right dose | the child's parents will be contacted |
| d. Right time | immediately. The incident will be |
| e. Right route of administration | documented in the child's |
| | Medication Log at the facility. |



Medical Emergency Procedures

Teachers will inform families of any minor injuries that occur to a child while in school. When an accident or injury occurs that requires professional attention, 911 will be contacted first then the child's family. In the event the immediate family cannot be reached, *the emergency contact person* on the child's emergency card will be called. A written accident report will be completed by school staff and placed in the child's file.



Hand Washing Procedures

Signs will be posted at each sink with the hand washing steps to follow. All staff, volunteers, and children will wash their hands at the following times:

- upon arrival for the day
- coming in from outdoors/playground
- before and after eating and handling food
- after using the bathroom
- before and after giving medication
- handling bodily fluids (mucus, blood and vomit) and wiping noses, mouths, sores
- cleaning or handling garbage

All staff, volunteers, and children will wash hands as follows:

- Moisten hands with water and apply liquid soap.
- Rub hands with soap and water for at least 10 seconds.
- Include between fingers, under and around nail beds, backs of hands and any jewelry.
- Rinse hands well under running water with fingers down so water flows from wrist to finger tips.
- Leave the water running and dry hands with paper towel then use towel to turn off water.
- Dispose paper towel in garbage can.



Facility Cleaning Routines

The facility will be maintained in a clean and sanitary condition. When a spill occurs, the area will be made inaccessible to children. When surfaces are soiled by **body fluids** or other potentially infectious material, they will be disinfected after they are cleaned with soap and water to remove all organic material. Surfaces will be disinfected using a (non-toxic) sanitizer solution. To disinfect, the surface will be sprayed until glossy. The sanitizer solution will be left on for at least 2 minutes before it is wiped off with a clean paper towel, or it may be allowed to air dry. All staff in the facility have passed blood borne pathogen training which includes cleaning techniques, proper use of protective barriers such as gloves, and proper handling and disposal of contaminated materials.

Cleaning, Sanitizing/Disinfecting and Laundering

Cleaning, rinsing, and sanitizing/disinfecting are required on most surfaces in child care facilities, including tables, counters, toys, etc. Cots are washed, rinsed, and sanitized weekly, before use by a different child, after a child has been ill, **and** as needed. All children's bedding is laundered at the center, once per week.

This 3-step method helps maintain a more sanitary child care environment and healthier children and staff.

1. **Cleaning** with soap and water removes a large portion of germs, along with organic materials - food, saliva, dirt, etc. – which decrease the effectiveness of sanitizers/disinfectants. We use a spray bottle with 3 drops of liquid soap in water. Then wipe surface with a paper towel or single-use cloth.
2. **Rinsing** further removes the above, along with any excess soap. We use a spray bottle with clean water sprayed on surface and wiped with paper towel or single-use cloth.
3. **Sanitizing/Disinfecting** kills the vast majority of remaining germs. We use a spray bottle for sanitizing/disinfecting surfaces that contains a sanitizer solution then wipe surface with a clean paper towel or single use cloth.

Exposure to Blood and Other Potentially Infectious Materials

Staff will follow the standard precautions for child care recommended by the Centers for Disease Control and Prevention in handling any fluid that might contain blood or other body fluids. Standard precautions require treating all blood, fluids that may contain blood or blood products, and other bodily fluids as potentially infectious. To limit risk associated with potentially infectious blood/body fluids, the following precautions are always taken:

1. Any open cuts or sores on children or staff are kept covered.
2. Whenever a child or staff comes into contact with any body fluids, the exposed area is washed immediately with soap and warm water, rinsed, and dried with paper towels.
3. All surfaces in contact with body fluids are cleaned immediately with soap and water, rinsed, and disinfected with an agent used for disinfecting body fluids.
4. Gloves and paper towels or other material used to wipe up body fluids are put in a plastic bag, tied closed, and placed in a covered waste container. Any brushes, brooms, dustpans, mops, etc. used to clean-up body fluids are washed in soap and water or detergent, rinsed, and soaked in a disinfecting solution for at least 2 minutes and air dried. Machine washable items, such as mop heads, are washed with hot water and soap in the washing machine.
5. All items are hung off the floor or ground to dry. Equipment used for cleaning is stored safely out of children's reach in an area ventilated to the outside.

6. A child's clothes soiled with body fluids are put into a closed plastic bag and sent home with the child's parent/guardian.
7. Hands are washed after handling soiled laundry or equipment, after removing gloves.



Injury Prevention

1. Proper supervision is maintained at all times, both indoors and outdoors. Staff members position themselves to observe the entire play area.
2. The site is inspected weekly for safety hazards by director or program coordinator. Staff members review their rooms daily and remove any broken or damaged equipment.
3. The playground is inspected daily for broken equipment, environmental hazards, garbage, animal contamination, and required depth of cushion material under and around equipment by director or program coordinator and/or custodian on duty.
4. Toys are age appropriate, safe, and in good repair. Broken toys are discarded. Mirrors are shatterproof.

We routinely get updates on recalled items and other safety hazards on the Consumer Products Safety Commission Website: www.cpsc.gov

Building Safety Procedures

The school doors will be locked from 8:35 am until 3:25 pm. Late arrivals and visitors must ring the doorbell at the front door (on the right hand side) near the flag pole.

Parking

Parking is available in front of the school on the west side of the street only (but not on Thursdays-garbage day) and the Pagel street lot next to the field. All children must be escorted into the building. Please use caution when entering / exiting the parking lots, as children may dart in front of cars. NO CELL PHONE USE PLEASE.

Cell Phone Policy

It is important to refrain from using your cell phone or other electronic device in the parking lot or inside the school building, as we need your full attention in creating safe situations. We thank you for helping keep all children and families safe! Please kindly end your call or text before drop off, pick up, office interactions, or classroom interactions.



Fire Procedures

- Rooms 100, 102, 104, 101, 103, Gym, and Office are to exit out the building using the WEST exit doors (Hazel Street) and meet near the corner of Pagel and Hazel streets.
- Rooms 106, 108, 110, 105, 107, and 109 are to exit our the building using the NORTH exit doors (Hazel parking lot) and proceed past the crosswalk and fire hydrant area, to the field edge.
- Room 112 and Kitchen are to exit out the Pagel parking lot doors and meet near the corner of Pagel and Hazel streets.
- Lead Teacher is responsible for taking the classroom's emergency bag, including class emergency cards, attendance clipboard, and first aid bag.
- Each teacher is responsible for counting the children **before** leaving the room and verifying the number with each other. Each teacher is responsible for counting children **after** arriving at designated meeting place and verifying the number with each other. Cross reference using the attendance sheet.
- Both teachers are responsible for retrieving their cell phones. Cell phones will be used to contact families if directed to do so.
- Fire extinguishers are located in each hallway, the kitchen, and boiler room.



Severe Weather Procedures

- All classrooms 100-110 are to take cover inside the room's restroom or washroom.
- The gym (114-116), community room (112), and kitchen are to take cover inside the group restrooms adjacent to kitchen and room 120.
- Staff and children cover their heads with arms until the all clear signal.

Evacuation and Relocation Procedures

- Rooms 100, 102, 104, 101, 103, Gym, and Office are to exit out the building using the WEST exit doors (Hazel Street) and meet near the corner of Pagel and Hazel streets.
- Rooms 106, 108, 110, 105, 107, and 109 are to exit our the building using the NORTH exit doors (Hazel parking lot) and proceed past the crosswalk and fire hydrant area, to the field edge.
- Room 112 and Kitchen are to exit out the Pagel parking lot doors and meet near the corner of Pagel and Hazel streets.
- Lead Teacher is responsible for taking the classroom's emergency bag, including class emergency cards, attendance clipboard, and first aid bag.
- Each teacher is responsible for counting the children **before** leaving the room and verifying the number with each other. Each teacher is responsible for counting children **after** arriving at designated meeting place and verifying the number with each other. Cross reference using the attendance sheet.
- Both teachers are responsible for retrieving their cell phones. Cell phones will be used to contact families if directed to do so.
- **Relocation site is Meijer, 3710 Dix Hwy, Lincoln Park, MI 48146.**
- **Staff and children will walk to Meijer using Hazel Street.**



Head Lice Policy

Please review the ***MDCH and MDE Recommended Head Lice Policy*** on the following three pages. If you discover that your child has lice, please contact the GSRP office immediately.



No Biting Policy

Our staff tries very hard to keep every child safe. Unfortunately incidents do occur, like biting. We strongly disapprove of a child biting another child or adult. If a biting incident occurs the staff will:

- Remain calm
- Immediately comfort and care for the injured child. The wound, if any, will be assessed and cleansed with soap and water and bandaged if the bite broke the skin.
- The biter will be removed from the situation and the child will be reminded that biting hurts people and makes them sad. The staff will encourage the biter to help give care to the injured child.
- Both families will be notified by staff of the biting incident.
- Confidentiality of all children involved will be maintained.

If biting continues by the same child staff will:

- Hold a conference with the family of the biting child to develop a written plan of action.
- Schedule follow-up meetings or telephone conversations as needed.

Discipline Policy

We believe that through positive discipline, guidance and role modeling, children will begin to develop the necessary skills that will help them to become a **Respectful, Responsible** and **Safe** student. **In the classroom staff will:**

- Set boundaries and establish expectations
- Guide and support children's actions and activities they CAN do rather than focus on what they cannot do.
- Encourage children to express their feelings to each other.
- Redirect unacceptable behavior.
- Use High Scope's Conflict Resolution Method (6 steps listed below).

6 STEPS IN RESOLVING CONFLICTS

- **Approach calmly, stopping any hurtful actions.** Place yourself between the children, on their level.
- **Acknowledge children's feelings.** Say something simple such as "You look really upset." Let children know you need to hold any object in question.
- **Gather information.** Ask "What's the problem?" Do not ask "Why" questions.
- **Restate the problem.** "So the problem is..."
- **Ask for ideas for solutions and choose one together.** "What can we do to solve this problem?"
- **Be prepared to give follow-up support.** Acknowledge their accomplishments (e.g., "You solved the problem!") Stay nearby in case anyone is not happy with the solution and the process needs repeating.

Disruptive Behavior:

If a child's behavior consistently causes a disruption to the learning environment and or bullies, intimidates or endangers another child or adult, the child might be excused from school until the family and staff meets to discuss a ***School and Home Behavior Plan***.

It is against the law for school staff or volunteers to inflict any type of corporal punishment such as hitting, shaking, biting or pinching, humiliating, shaming or confining a child to an enclosed area. Children will never be deprived of food, rest or necessary toilet use.

Our program has developed a set of rules that are used school wide and in every classroom. Our rules can easily transfer into home use as well. As educators and parents, it is our duty together to teach children how to be **Respectful, Responsible** and **Safe**.

Crowley Center Rules:



BE RESPECTFUL

Use Manners

Say kind words

Follow directions

Listen when someone is speaking

Keep hands off other people and their things



BE RESPONSIBLE

Clean up

Wash hands

Take care of toys

Wipe your nose with a tissue

Cover your cough with your elbow



BE SAFE

Walk in school

Stay with teachers

Keep feet on the floor

Only teachers open doors

Use hands to help someone not to hurt



GSRP Volunteers

Our school welcomes all who want to volunteer. However, all persons who volunteer will be at least 18 years of age. *According to Lincoln Park School District policy, all volunteers must submit their driver's license number for ICHAT background check before volunteering. Anyone with a felony is unable to volunteer in the school or on field trips. Any volunteer who has contact with children four (4) or more hours for at least two consecutive weeks must have a TB test on file in the school office.*

We request that you sign in and out of the parent volunteer log in the main office. All volunteers will be supervised by classroom staff. Classroom staff will maintain a “line-of-sight” observation of the volunteer at all times per DHS request. Volunteers will not have unsupervised contacts with children. Volunteers will not assist children with any bathroom/personal needs unless it is their own child. The duties and responsibilities of classroom volunteers will be determined by the lead teacher in each classroom.

The following are **PROHIBITED** during any program activities:

- Offensive language: sexual, racial, or ethnic slurs, cursing, or name calling.
- Violating confidentiality.
- Smoking in or on school grounds or during any school related function.
- Sexual harassment.
- Neglecting, endangering or abusing children.
- Possession of drugs or alcohol.
- Being under the influence of drugs or alcohol.
- Verbal or physical threats.
- Damaging or stealing of school or personal property.
- Possession of a weapon.