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## **I. Purpose**

The purpose of the Bosco Catholic School System(BCSS) ABC program is to provide a safe, christian environment for children after school while parents are still at work for the day.

## **II. Admission Policies/Notice of Non-Discrimination**

- A. Students in grades PK-5 may participate in ABC.
- B. Parent/guardian must provide BCSS ABC Program with completed registration forms, including a parent statement of health and immunization record before the child may attend the after school program. This information needs to be updated annually. This includes complete registration through PowerSchool in August.
- C. BCSS ABC Program will not deny enrollment to a child based on race, color, national or ethnic origin or religion.
- D. Parent/guardian agree to pay the established childcare rate. These fees are to be paid monthly.
- E. Medical/Dental Information: BCSS ABC staff shall obtain specific information from the parent/ guardian of students regarding where emergency medical and dental services should be obtained. The parent/guardian of each student will authorize a doctor, dentist and hospital within proximity of the school that can be contacted in the event of an emergency.
- F. Withdrawal from BCSS ABC Program: A family can choose to discontinue use of the after school program at any time with a non-refundable registration fee.

## **III. Program Description**

### **A. Child/Staff Ratios**

- 1. There will be a minimum of 1 caregiver for each 15 children on staff at any time.

B. Toys: BCSS ABC asks that children NOT bring toys and other items from home. This will eliminate misplaced, broken, and lost toys. BCSS ABC Program cannot be responsible for lost or broken toys.

### **C. ABC Schedule:**

- 1. After School Monday, Tuesday, Wednesday, Thursday, Friday 2:15-6:00
- 2. Drop Off
  - a) Children in attendance at St. Joseph will be dropped off at Reuter Hall by a BCSS teacher immediately following dismissal.

- b) Children in attendance at Immaculate Conception will be dropped off by the transfer bus.
- 3. Children will begin with time to play outside. If the weather does not allow, free play inside.
- 4. Snack will be provided at about 3:30.
- 5. If the weather permits children may return outside after snack.
- 6. Pick Up
  - a) Children are to be picked up no later than 6:00 PM
  - b) Parents will need to come to the playground if the group is outside or into the room to sign children out.
  - c) A parent/guardian or adult that is listed on the ABC Application Form must pick up the child. Children WILL NOT be released to any other person unless there has been prior parental consent and will need to show ID.
  - d) If you are going to be late, please call the school as soon as possible to notify the staff and to let your child know so they do not become anxious.

#### **IV. Communication**

- A. Absences: If your child will not be attending ABC on a regularly scheduled day for any reason, we ask that you inform us as much in advance as possible. If your child has a communicable illness we ask that they do not attend ABC. Should a child become ill while at ABC, the parent/guardian will be expected to pick up the child from ABC within one hour. Please keep the staff informed of any changes in your child's health status and/or eating habits (i.e., a child who develops an allergy.)
- B. Accidents/Emergencies:
  - 1. Incidents or accidents resulting in injury to a child or minor changes in health or behavior will be reported on the day of the accident. The written report will be prepared by the staff person who observed the incident, injury or minor change in health or behavior and shall include a general description of the incident and of the action taken, if any, by the staff at ABC.
  - 2. If a child is hurt more severely, the staff will arrange for the transport of the child as quickly as possible to the Emergency Room and contact the parent/guardian. All BCSS ABC Program staff have had the Bloodborne Pathogens training.

C. Change of Address/Phone Number: Please notify the BCSS ABC immediately if you have a change of address or telephone number (home, work, cellular). This information must be kept up-to-date, particularly in the case of an emergency.

D. Dual Parent/Guardian Reporting:

1. According to the Archdiocesan Catholic School Board Policy 5124, in the case of a child whose parent/guardian marriage has been dissolved or a separation of parent/guardian from the home, the name and address of BOTH parent/guardian should be on file.
2. Unless otherwise decreed by a court order, information commonly made available to parents/guardians of any child will be made available to both parent/guardian. In the case of children whose parent/guardian marriage has dissolved, a certified copy of the Order of Dissolution (the portion that pertains to child custody), as well as any subsequent modification or the order, should also be on file. If any major confrontations occur at BCSS during the process families will be asked to leave the program.

E. School Closings

1. BCSS ABC will follow the Bosco Catholic School System schedule regarding school closings due to bad weather. BCSS follows Waterloo Public School, but will occasionally call it on their own as well.
2. In the case of an early dismissal due to weather, BCSS ABC will be closed for the afternoon
3. Do not call the school. Listen to KWWL or KCRG, or check their websites. You will also receive a call from School Reach. If you miss the call, please take the time to listen to the message that is left.

F. Parent/Guardian Participation:

1. We encourage you to contact us with any questions. The childcare staff cannot accept verbal messages from the children. Please write a note and include it in their folder, agenda, send an email or leave a message for the staff to return your call.
2. Parents/Guardians are welcome to visit and observe the program in session at anytime, unless parent contact is prohibited by a court order.

## V. Emergency Procedures

- A. Emergency procedures are in order for a number of scenarios. The staff will take the attendance sheet, child emergency information forms, and the first aid kit when leaving the classroom for an emergency. Staff will notify parents using the emergency phone numbers provided by parents. Emergency procedure diagrams are posted for exiting the school building or seeking shelter with the school depending on the scenario.
- B. **Fire Evacuation Procedures:** Call 911. Children and staff will walk in line. Staff will carry immobile children as needed. Staff will take attendance sheet, child emergency information forms and first aid kit. Children and staff will exit classroom through fire exit door. They will proceed to the grassy area to the west of the building. Staff will check off children's names and staff names. Use CPR/First aid as necessary. Notify emergency personnel. If safe, re-enter building. Families will be notified. If not safe, proceed to St. Joseph School building.
- C. **Tornado Procedure:** Children and staff will move into the bathrooms in the basement in an orderly manner. Staff will carry immobile children as necessary. Staff will take attendance sheet, child emergency information forms and first aid kit. Everyone will sit/kneel on the floor covering head with hands. Staff will take attendance of children and staff. Use of CPR/first aid as necessary. Notify emergency personnel of any missing or injured persons. After all clear return to classroom. Families will be notified. If not safe to stay in building, evacuate to St. Joseph or nearby safe area.
- D. **Blizzard Procedure:** Listen to weather report. Stay inside. Keep dry and warm. Check water, food and heat source. Staff will take attendance of children and staff. Families will be notified. Wait for families to pick up children. If children are not picked up within one hour after closing time, keep calling families.
- E. **Building Structural Damage Procedure:** Call 911. Children and staff will sit on the floor under tables or walk into hallway. Staff will carry immobile children as needed. Sit on the floor with hands over head. Staff will take attendance sheets, child emergency information forms and first aid kit. If safe, children and staff will evacuate the building at the safest and nearest exit. Proceed to grassy area away from the building. Staff will take attendance of children and staff. Use CPR/first aid as necessary. Notify emergency personnel of missing or injured persons. Families will be notified.
- F. **Power Failure Procedures:** Office will be notified and they will notify maintenance personnel to research problem. Use flashlights and/or emergency lighting. No candles. Staff will take attendance of children and staff. In case of

emergency call 911 or MidAmerican at 888-427-5632. Stay inside and away from downed power lines. Families will be notified if there is a need for children to be picked up.

- G. **Bomb Threat Procedure:** Call 911. Children and staff will line up. Staff will carry immobile children as needed. Staff will take attendance sheets, first aid kit and child emergency forms. Children and staff will exit the building by the safest and nearest exit. Proceed to grassy area far from building. Lead teacher will take attendance of children and staff. Notify emergency personnel of missing or injured persons. Use CPR/first aid as necessary. Wait for instructions from emergency personnel. Return to building after cleared for safety. If not safe proceed to St. Joseph School or nearby safe area. Families will be notified.
- H. **Chemical Spill Procedure:** Call 911. Keep children safely away from spill area. Identify chemical spilled. Follow directions from the fire department Hazardous Material Emergency Team.
- I. **Missing Child Procedure:** Call 911. Lead teacher will do attendance. Staff will check with the office to see if child was signed out by the parent/guardian. Staff will alert all other staff in the building and proceed to search bathrooms, classrooms, church, outside, etc. Families will be contacted.
- J. **Intoxicated Pick-Up Person Procedure:** Ask person if they are able to take the child. Tell them that they need to have someone else pick up the child. If the person insists on taking child, call 911 to report pick up person.
- K. **Intruder in Building Procedure:** Call 911. Close and lock the classroom door. Lead teacher will take attendance of children and staff. Close all doors in proximity to classroom. Close blinds. If threatened, protect self.

## VI. Discipline/Dismissal

- A. Kind, consistent, but firm discipline with positive redirection will be used. There will be no physical punishment. If necessary, time away from the activity to regain self-control will be used.
- B. If a child is showing negative behaviors such as consistent discipline problems, biting, or behaviors that are creating consistent disruption in the classroom routine or if the child is showing signs of inconsistent potty training abilities the procedure for addressing these concerns is as follows:
  - 1. The staff will notify the parent/guardian about the behavior/issue in writing.
  - 2. The staff will make a phone call to the parent/guardian regarding the issue.
  - 3. The staff will set up a meeting to talk with the parent/guardian face to face in order to work on the behavior/issue.

- C. After following this procedure, if the child's behavior and attitude continues to be disruptive to the group or to other children's welfare, BCSS ABC reserves the right to ask you to withdraw the child from our program.

## **VII. School Dress Code and Good Grooming**

- A. Children may bring a change of clothes to allow them to play freely without concern for their school uniform clothes.

## **VIII. Health/Safety Issues**

- A. Injury and Medical Emergency Procedure/Policy: If an injury occurs during preschool, an incident report will be completed and filed. Parent(s)/guardian(s) will be notified as soon as possible by phone or email. In the case of an emergency, Bosco Catholic School System will follow the emergency contact protocol provided by parent(s)/guardian(s).
  1. **Medical Emergencies:** In case of an emergency, we will secure such emergency medical care as your child might require by calling 911. The staff will notify parents and/or the child's physician as listed on your health review form. If it is necessary to have the child transported to a hospital, we will call an ambulance to take the child to the hospital listed on your child's information form or the nearest hospital, unless instructed otherwise by the physician or parent. The parent will be charged for the cost of the emergency medical care. Should this ever happen, a staff member would ride along in the ambulance with your child, and the parent would be contacted. The staff member would take the child's file in the ambulance (with the health care information and numbers on it), and stay with the child until the parent/guardian arrives. The staff member remaining in the classroom will call a supervisor who will arrange for a substitute in the classroom and a ride back for the staff member who rode in the ambulance.
  2. If a **dental emergency** occurs (such as a chipped or knocked out tooth), the teacher or staff member will rinse the area and apply an ice pack to the face to reduce swelling. The parent/guardian is notified and the parent/guardian will notify the dentist to secure further treatment if needed.

## B. Medication:

1. If at all possible medications should be given at home or if necessary before the end of the school day.
2. Dispensing of prescription drugs will be administered by a designated party with training and with the written consent of parent/guardian. All medications must be in the original container. A record of each dose of medication administered will be documented in the pupil's health record.
3. Because administration of medication in school is a safety hazard, medication administration will be limited to situations where an agreement to give medicine outside school hours cannot be made. Whenever possible, the first dose of medication should be given at home to see if the child has any type of reaction. **Medications should be brought directly to school by the parent or care provider, not sent to school with the child.**

## C. Hand Washing Practices:

1. BCSS ABC program ensures that staff will assist children in personal hygiene sufficiently to prevent or minimize the transmission of illness or disease.
2. Hand washing is the most important way to reduce the spread of infection. Many studies have shown that unwashed or improperly washed hands are the primary carriers of infections. All BCSS ABC staff, volunteers, and children shall follow these guidelines for hand washing at the following times:
  - a) Upon arrival for the day.
  - b) Before and After
    - Eating or handling food
    - Giving medications
    - Playing in water that is used by more than one person
  - (c) After
    1. Playing outside
    2. Using the toilet or helping a child use the toilet
    3. Handling bodily fluid (mucus, blood, vomit), from sneezing, wiping and blowing noses, from touching mouths or sores.
    4. Handling pets and other animals/cleaning cages
    5. Playing in sandboxes
    6. Cleaning or handling garbage.

#### D. Communicable Illnesses

1. AIDS: Children diagnosed as having AIDS, or with laboratory evidence of infection with the AIDS associated virus (HIL.V-III/LAV) and receiving medical attention may attend classes in an unrestricted educational setting in accordance with Archdiocesan Board of Education Policy 5141.2
2. Fever: If a child has a temperature of 100°F and exhibits any of the below conditions will be sent home immediately.
3. Respiratory Distress: If the child has a temperature elevation (unless temperature elevation is due to recent immunization) the child shall not be brought to ABC. This shall also be the case if the child get red or blue in the face or makes a high-pitched croup or wheezing sound after the child coughs.
4. Diarrhea and Vomiting: If there is any diarrhea or vomiting, the child may not be brought to ABC. If the child has any loose stools while at ABC, or if the child vomits at ABC, he/she will be sent home. The child may return if he/she has been free from diarrhea or vomiting for 24 hours. If there is diarrhea or vomiting for several days, a physician should be notified.
5. Eye Infections: If the child has eyes that are mattered or draining, the child shall not be brought to ABC. The child may return after he/she is on antibiotic ointment for 24 hours or the eye has shown marked improvement.
6. Impetigo: A child with impetigo shall be excluded from ABC for 24 hours after treatment has begun. The return shall depend upon the location of the infected area and if the area is dried and healing.
7. Ear Infection: If there is drainage from the ear; your child shall not be at ABC (Exception: if the child has tubes and has been on an antibiotic for 24 hours.) A child with a diagnosed ear infection with no drainage must be on medication or a release must be obtained from a physician stating that the child is free from communicable disease.
8. Scabies: When scabies is suspected in a child, the child shall be restricted from ABC until after initial treatment with appropriate medication. It is advisable that family members also be treated.
9. Ringworm: When ringworm is diagnosed in a child, that child shall be restricted from ABC until the day after appropriate medication has been initiated. All clothing worn by child prior to treatment should be laundered. It is advisable that family members also be treated.

10. Chicken Pox: The child may not attend ABC until the sores have stopped seeping and are scabbed over.

#### E. Fire and Tornado Drill:

1. Unannounced drills are conducted at various times during the year in accordance with Iowa Codes. Students are expected to leave in an orderly fashion, without talking, according to the directions of the teacher and return the same way. One tornado drill and one fire drill is practiced each month.
2. Lead in Drinking Water: During 1991 all schools of the Archdiocese were tested for lead in the drinking water. The test results indicated the lead levels were below the established safety levels. Based upon these results and the rules of the Iowa Department of Health no additional testing for lead is required.
3. Chemical Right to Know Law requires all schools in the nation to prepare a list of chemicals that are known to be present in their buildings and to maintain material safety data sheets (MSDS) on them. The law further states that all chemicals are to be appropriately labeled, storage areas are to be posted for the hazardous chemicals, and employees that work with the chemicals are to be trained in the safe handling of these chemicals. The school is also to acquaint the local fire department with the location of hazardous chemicals in the school. If you want to know what chemicals are used in the school and where they are stored, please contact the principal.
4. Asbestos: Federal regulations and Archdiocesan Board of Education policy 7113 require us to inform you that there is asbestos in the St. Joseph School Building.
5. Radon Testing: During 1991, all schools of the Archdiocese were tested for radon. The test results indicated the rooms were below the established safety levels.
6. Tobacco/Smoke Free Campus: St. Joseph School has been designated as a Tobacco/Smoke Free Campus. There is to be no tobacco or smoking on school grounds at any time.

#### IX. Biting Policy

1. Caregiver will calmly respond to the child, letting them know that biting is not ok. In addition the following steps will be taken:
  - a. The staff will remove the child from the situation and focus caring attention on the child who was bitten.

- b. Encourage the biter to help take care of the child that was bitten (hold ice pack, comfort the child).
    - c. The caregiver should talk to the child who bit (if able to communicate) and talk about different strategies that the child can use next time (give them appropriate words-if able) instead of biting. This should be done in a short simple way.
  2. Staff will work with parents to gather information about the child's behavior and begin observations to determine the reasons for biting. Examples of some triggers would be: communication deficits, transitions, hunger, lack of sleep, need for oral stimulation or teething pain. Once triggers are identified, staff can work on prevention strategies and start teaching replacement skills. Below are some examples of how the teacher will begin this assessment.
    - a. The staff will examine the context in which the biting is occurring and look for patterns. The staff will document asking the following questions:
      - Was the space too crowded
      - Were there too few toys
      - Was there too little to do, or too much waiting
      - Was the child who bit getting the attention and care he/she deserved at other times, other than when he/she was biting
    - b. The staff will change the environment, routines or activities if necessary.
    - c. The staff will work with the child who is biting to resolve conflicts and frustrations in more appropriate manners, including using words, if they are capable of them.
    - d. The staff will observe the child, to get an idea of why and when they are likely to bite.
    - e. The staff will identify children likely to be bitten and make special efforts to reduce their chance of being bitten.
    - f. The staff, parent, and administration will meet regularly to regulate an action plan and to measure the outcome of these changes.
    - g. If biting continues the staff will observe the group more closely and work with the parents to seek out additional resources as necessary to shadow the child who is biting.
3. First Aid in response to biting (both child and adult)
  - a. Wear gloves, clean the wound with soap and water. Run water over wound for 5 minutes.

- b. Apply ice or cool compress to help reduce the pain or swelling.
- c. Bandage the wound as necessary.
- d. Write a detailed incident report for both children involved with the incident.

4. First Aid if bite breaks the skin. (both child and adult)

- a. Wear gloves, clean the wound with soap and water. Run water over the wound for 5 minutes.
- b. Control the bleeding.
- c. Cover the wound with sterile dressing and bandage.
- d. Contact the parent of BOTH children involved and encourage them to contact their healthcare provider to determine if they need to be seen.
- e. Write a detailed incident report for both children involved with the incident.

A. When children bite, their parents are informed personally and privately the same day. All information is confidential and names of the children involved in the incident are not shared between parents. In addition, biting is always documented on our standard incident form which is completed and signed by the teacher, parents and an administrator is notified. One copy is given to the parent and one copy is kept in a locked file cabinet in the office.

- a. When biting occurs, here's what you can expect from us:
  - We will put the child's safety first and provide first aid as well as comfort, support and advice to any child who is bitten.
  - We will provide appropriate programming for children to help prevent biting.
  - We will make current information and resources on biting available to you.
  - We will provide teachers with adequate knowledge and training to deal properly and effectively with biting.
  - We will take your concerns seriously and treat them with understanding and respect.
  - We will tell you what specific steps we are taking to address biting and explain the reasoning behind those steps.
  - We will respond to your questions, concerns and suggestions—even when our response to some suggestions is no.

- We will work to schedule conferences about biting with you at a time you can attend.
  - We will keep your child’s identity confidential if he or she bites. This helps avoid labeling or confrontations that may prolong the behavior.
- B. We wish we could guarantee that biting will never happen in our program, but we know there is no such guarantee. You can count on us to deal appropriately with biting so it will end as quickly as possible. We want the best for all the children in our program. If you want more information on biting or have questions or concerns, please let us know-we are here to help you and your child on their journey to independence!

## **X. Access**

- A. Any person in the center who is not an owner, staff member, substitute, or subcontracted staff or volunteer who has had a record check and approval to be involved with child care **shall not** have “**unrestricted access**” to children for whom that person is not the parent, guardian, or custodian, nor be counted in the staff to child ratio.
- Persons who do not have unrestricted access will be under the direct “**supervision**” and “**monitoring**” of a paid staff member at all times and will not be allowed to assume any child care responsibilities. The primary responsibility of the supervision and monitoring will be assumed by the ABC director unless he/she delegates it to the co-director or assistant due to a conflict of interest with the person.
  - Center staff will approach anyone who is on the property of the center without their knowledge to ask what their purpose is. If staff is unsure about the reason they will contact their Site Manager or other management staff to get approval for the person to be on site. If it becomes a dangerous situation staff will follow the “intruder in the center” procedures. Non-agency persons who are on the property for other reasons such as maintenance, repairs, etc. will be monitored by paid staff and will not be allowed to interact with the children on premise.
  - A sex offender who has been convicted of a sex offense against a minor (even if the sex offender is the parent, guardian, or custodian) who is required to register with the Iowa sex offender registry (Iowa Code 692A):
    1. Shall not operate, manage, be employed by, or act as a contractor or volunteer at the child care center.
    2. Shall not be on the property of the child care center without the written permission of the center director, except for the time

reasonably necessary to transport the offender's own minor child or ward to and from the center.

- The center director is not obligated to provide written permission and must consult with their DHS licensing consultant first.
- If written permission is granted it shall include the conditions under which the sex offender may be present, including:
  - The precise location in the center where the sex offender may be present.
  - The reason for the sex offender's presence at the facility.
  - The duration of the sex offender's presence.
  - Description of how the center staff will supervise the sex offender to ensure that the sex offender is not left alone with a child.
  - The written permission shall be signed and dated by the director and sex offender and kept on file for review by the center licensing consultant.

## **XI. Snacks/Foods and Nutrition**

- A. Attitudes toward food develop early in life. The food children eat affects their well-being, their physical growth, their ability to learn, and their overall behavior. We have an opportunity to help children learn about foods, to enjoy a variety of foods, and to help them begin to appreciate that their bodies need to be strong, flexible, and healthy. Eating moderately, eating a variety of foods, and eating in a relaxed atmosphere are healthy habits for young children to form.
- B. Children attending BCSS ABC will be provided a nutritionally balanced snack incorporating 2 food groups.
- C. Milk or 100% juice will be provided each day.
- D. A snack from the grain food group will be provided each day.
- E. Occasionally a protein, fruit or vegetable will be provided as the 2nd food group.
- F. For each child with special health care needs, food allergies, or special nutritional needs, the child's health care provider should provide the program and individualized care plan prepared in consultation with family members and specialists involved in the child's care. Children with food

allergies shall be protected from contact with the problem food. With written family consent, the programs posts information about the child's allergies in the areas of the facility the child uses as a visual reminder to all adults who interact with the child during the day.

- G. BCSS ABC staff will provide supervision and will encourage and model good table manners and appropriate social interactions while eating.

## **XII. Staff Requirements**

- A. In accordance with DHS Requirements, Staff of the ABC program will have the following:
  - 1. Current Mandatory Reporter Training.
  - 2. Current First Aid and CPR Training.
  - 3. Annual training in Universal Precautions/Bloodborne Pathogen.
  - 4. Background Check every 2 years.
  - 5. Fingerprinting every 4 years.
  - 6. Physical every 3 years.
  - 7. 10 module Essential Training.
  - 8. 10 hours of training in the first year and 6hours annually thereafter.