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INTRODUCTION

The Children’s Center at USC values inclusion and diversity and strives to include families from the greater Columbia area who represent a wide range of educational and economic backgrounds. It welcomes all children who can participate in, and benefit from, programming with a diverse and well-qualified staff. The Center fulfills a very exciting mission on the USC-Columbia Campus and in South Carolina’s childcare community. It offers full time, high quality childcare and education for young children, ages six weeks through pre-kindergarten with afterschool, holiday and summer programming for children up to 8 years of age.

The Center reflects current standards of best practice as articulated by the National Association for the Education of Young Children (NAEYC) and adheres to all SC ECE licensing regulations. The NAEYC Code of Ethical Conduct guides all decisions regarding programming and relationships. The Code can be accessed on-line. Go to NAEYC.org → Resources → Position Statements → Code of Ethical Conduct and Statement of Commitment.

Parents¹ are recognized and valued as active members of the Center’s team and are partners in guiding the care and educational needs of their children. Families and Staff are will engage in respectful, professional communication and partnership for the benefit of children.

The Center is governed by a Governing Board, comprised of the Children’s Center Director, the CEO of University Foundations, one current parent, one past parent, and two researchers from the University of South Carolina.

The Center plays an important role in University research and teaching efforts and provides a model of “best practice” for South Carolina’s early childhood professionals at all levels of the professional ladder. The Center welcomes graduate and undergraduate students studying in a variety of fields: education, music, art, physical education, psychology, and medicine to participate in the Center’s activities.

The Center welcomes faculty and student researchers investigating young children and their families. All research conducted at the Center has been approved by USC’s Institutional Review Board (IRB) and is approved by the Children’s Center Director and Dr. Herman Knopf, the Research Director of the Child Development Research Center located on the second floor the building. The faculty in the College of Education and the Center’s teachers collaborate regularly.

The Children’s Center policies are subject to update as needed. By enrolling in the Center, Parents agree to comply with all Center and classroom policies.

STATEMENT OF PURPOSE

The Center serves a three-fold purpose: First, the Center strives to provide a high quality environment and experience for our young children and their families. Second, the Center is a lab site with the mission of supporting research and teaching related to young children and preparing USC students to work professionally with young children. Third, the Center serves as a demonstration and training site for South Carolina’s early child care and education workforce.

The Center’s mission is to provide the best quality education and care for children and to serve as a national model for early childhood education. In addition to providing a healthy learning environment for children, the Center provides an opportunity for researchers to study and implement the best practices in the

¹ We use the word “parent” for simplicity but appreciate that many families are made up of other primary caregivers including grandparents, foster parents, and guardians.
classroom. USC students and faculty from education, psychology, art, music and medicine are involved at the center as part of their educational experiences.

**NON-DISCRIMINATION POLICY**
The Children’s Center at USC provides equal opportunity and affirmative action in education and employment for all qualified persons regardless of sex, race, national origin, religious belief, age, marital status/family structure, disability, sexual orientation, or veteran status. No child will be denied access to activities, materials, or equipment on the basis of sex, race, national origin, culture, or family structure. Children will not be encouraged or discouraged in ways that reinforce stereotypes.

The Center attempts to accommodate children with special needs. The Center does not have the resources to staff special needs specialists; enrollment of a child with special needs is contingent on appropriate support specialists being provided by the family.

**PROGRAM STANDARDS**
The Center is committed to adhering to the Code of Ethical Conduct of the National Association for the Education of Young Children (NAEYC). Copies of the Code can be obtained from the Director or from the web at www.naeyc.org → resources → position statements.

The Center adheres to the South Carolina Department of Social Services (DSS) Early Care and Education Office licensing requirements, the enhanced program standards of Child Care, the Development Block Grant (CCDBG) under the ABC voucher program, and our state’s fire and sanitation codes.

**ECE License**
The Center is licensed by the SC Department of Social Services Early Care and Education Office (ECE). The re-licensing process is repeated every two years and includes visits from the Health Department and the State Fire Marshal. Unannounced visits are conducted by ECE to ensure consistent adherence to state standards. http://childcare.sc.gov/main/docs/laws/114500.pdf

**Advocates for Better Care**
The Child Care and Development Fund (CCDF) and its Advocates for Better Care Program have criteria that are higher than licensing standards. These criteria address curriculum, facilities, instruction, finance, and related standards. The program has yearly monitoring visits conducted by the ABC staff. The Center currently has an enhanced status with the ABC system. Families who have been awarded an ABC voucher are welcome to enroll their children at the Center. http://childcare.sc.gov/main/general/programs/abc/index.aspx

**Child:Teacher Ratios**
The Center strives to adhere to these NAEYC ratios.

<table>
<thead>
<tr>
<th>Child’s Age</th>
<th>Staff: Child Ratio</th>
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<tr>
<td></td>
<td>NAEYC</td>
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<tr>
<td>Birth to one year</td>
<td>1:3</td>
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<tr>
<td>One to two years</td>
<td>1:4</td>
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<tr>
<td>Two to three years</td>
<td>1:6</td>
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<tr>
<td>Three to four years</td>
<td>1:10</td>
</tr>
<tr>
<td>Four to five years</td>
<td>1:10</td>
</tr>
<tr>
<td>Five to six years</td>
<td>1:12</td>
</tr>
<tr>
<td>Six to eleven years</td>
<td>1:12</td>
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Low ratios and small groups are important criteria of quality care. SC regulations do not limit group size, however the Center follows NAEC guidelines and keeps group sizes at two-times ratio (i.e. two caregivers can care for a maximum of eight infants or twenty 4-year-olds).

During rest times the Center follows ECE nap time ratio regulations. Under certain other instances, SC licensing ratios may be applied.

**CENTER PHILOSOPHY**

Teachers and caregivers are expected to base their work on their knowledge of each child’s age and developmental level, his or her individual needs, and the family’s culture. They enhance and support children’s intellectual, social, emotional, and physical growth and development, ensuring that learning occurs across these domains. The Center’s staff is expected to communicate constructively with children, their parents, and each other. The following statements describe the Center’s approach to child development:

- Teachers organize classrooms in ways that enhance children’s optimal growth, development, and learning.
- Materials selected help support the curriculum.
- Children learn best through play and active involvement with the people and materials in their environment.
- Children are developmentally complex persons each with unique temperament, growth and behavior patterns. Each child grows and develops at his or her own individual rate.
- The interactions and the relationships that form between adults and children are the most important components of quality early care and education. Children thrive on supportive, positive, and individualized adult-child interactions. The adult’s role is to stimulate, guide and enhance the development of the whole child.
- The best atmosphere for learning is one of acceptance, mutual respect, fairness, consistency, clear limits, appropriate expectations, and encouragement.
- Children’s thinking and cognitive abilities are quantitatively and qualitatively different from those of adults. Neither adult logic nor inappropriate adult expectations shall be imposed on children. Rigid classroom routines (sitting and waiting turns for long periods, lining up) are inappropriate for use with young children.
- Learning is an active process. Children create their own knowledge from the inside out. The environment will provide for active exploration, making free choices, a wide variety of hands-on experiences, and many opportunities to enhance language and early literacy development.
- Children’s learning is integrated. They learn through a variety of experiences using all their senses.
- Children learn responsibility by making age-appropriate decisions and having an appropriate level of responsibility for their actions. A predictable, organized environment with caring adults, clear expectations, and appropriate consequences supports children’s cognitive, physical, social, and emotional growth.
The outdoor environment is an extension of the classroom, requiring the same level of adult planning, supervision, and involvement with children. Daily outdoor play gives teachers opportunities to interact with the children; plan and carry out specific learning experiences; and share responsibility for the care of the play area. Constant supervision and concern for child safety shall always be a priority.

THE CENTER’S APPROACH TO CURRICULUM

The Center follows WestEd’s Program for Infant/Toddler Care (PITC) approach to programming with children from birth through three years old and the preschool curriculum is based on a constructivist approach.

PITC Program for Infant/Toddler Care

PITC teaches that good infant care is neither baby-sitting nor a miniature preschool setting. It is a special kind of care, characterized by respectful, responsive relationships. Infant/toddler caregiving emphasizes child-directed learning. Policies fundamental to this approach include: primary care, small groups, individualized care, cultural responsiveness, and the inclusion of children with special needs. This approach also sees the setting as critical. PITC personnel designed the environments at the Center to ensure safety, offer infants appropriate developmental challenges, and promote optimum health for the children. For additional information about PITC go to their website: www.pitc.org.

Program for Infant/Toddler Care

Philosophy

At the heart of the Program for Infant/Toddler Care philosophy is a commitment to providing care that respects the differing cultures, lifestyles, preferences, abilities, learning styles, and needs of the children and families served. Therefore, the Program for Infant/Toddler Care follows an approach that is responsive to what the infants and toddlers and their families bring to care. PITC emphasizes relationship-based care through the implementation of the following six essential policies:

Primary Care

In a primary care system, each child is assigned to one special caregiver who is principally responsible for that child's care. When children spend a longer day in care than their primary caregiver, a second caregiver is assigned to be the child’s primary relationship. Each child should have a special caregiver assigned to him or her at all times during the child care day. Primary care does not mean exclusive care. It means, however, that all parties know who has primary responsibility for each child.

Small Groups

Every major research study on infant and toddler care has shown that small group size and good ratios are key components of quality care. PITC recommends primary care ratios of 1:3 or 1:4. in groups of 6-12 children, depending on the age. The guiding principle is: The younger the child, the smaller the group. Small groups facilitate the provision of personalized care that infants and toddlers need, supporting peaceful exchanges, freedom and safety to move and explore, and the development of intimate relationships.

Continuity

Continuity of care is the third key to providing the deep connections that infants and toddlers need for quality child care. Programs that incorporate the concept of continuity of care keep primary caregivers and children together throughout the infancy period, or for the time during that period of the child’s enrollment in care.

Individualized Care

Following children's unique rhythms and styles promotes well-being and a healthy sense of self. It's important not to make a child feel bad about him or herself because of biological rhythms or needs that are different from those of other children. Responding promptly to children's individual needs supports their growing ability to self-regulate, i.e., to function independently in personal and social contexts. The program adapts to the child, rather than vice versa and
the child gets the message that he or she is important, that his/her needs will be met, and that his/her choices, preferences, and impulses are respected.

Cultural Continuity
Children develop a sense of who they are and what is important within the context of culture. Traditionally, it has been the child's family and cultural community that have been responsible for the transmission of values, expectations, and ways of doing things, especially during the early years of life. As more children enter childcare during the tender years of infancy, questions of their cultural identity and sense of belonging in their own families are raised. Consistency of care between home and child care, always important for the very young, becomes even more so when the infant or toddler is cared for in the context of cultural practices different from that of the child's family.

Because of the important role of culture in development, caregivers who serve families from diverse backgrounds need to:
- Heighten their understanding of the importance of culture in the lives of infants,
- Develop cultural competencies,
- Acknowledge and respect cultural differences, and
- Learn to be open and responsive to, and willing to negotiate with families about child rearing practices.

In this way, families and caregivers, working together, can facilitate the optimal development of each child.

Inclusion of Children with Special Needs
Inclusion means making the benefits of high quality care available to all infants through appropriate accommodation and support in order for the child to have full active program participation. Issues already embraced by the PITC -a relationship-based approach to the provision of care that is individualized, and responsive to the child's cues and desires to learn- are equally important for children with disabilities or other special needs. Infants who have responsive, enduring relationships develop emotional security, which gives them the foundation for becoming socially competent and resilient. Infants who have individualized care are allowed to learn and grow in their own way and at their own pace.

A Constructivist Approach to Preschool Education
The Center takes a constructivist approach to curriculum that is based on the work of Jean Piaget and Lev Vygotskky to children’s learning. We believe children learn from first-hand experiences in a rich and supportive environment that gives them opportunities to interact with materials, children and adults. The curriculum addresses appropriate SC Early Learning Standards. A link to these standards can be found on the Children’s Center’s website. Children make choices throughout the day that guide their learning and teachers help them make meaningful connections to previous experiences. Teachers are viewed as facilitators of learning. They create carefully planned environments, encourage child-child interactions, and provide a positive climate for social growth. These Key Experiences developed by High/Scope illustrate some of the ways children learn and develop in our classrooms.

Creative Representation
- Recognizing objects by sight, sound, touch, taste, and smell
- Imitating actions and sounds
- Relating models, pictures, and photographs to real places and things
- Pretending and role playing
- Making models out of clay, blocks, and other materials
- Drawing and painting

Language and Literacy
- Talking with others about personally meaningful experiences
- Describing objects, events, and relations
- Having fun with language: listening to stories and poems, making up stories and rhymes
- Writing in various ways: drawing, scribbling, letterlike forms, invented spelling, conventional forms
- Reading in various ways: reading storybooks, signs and symbols, one's own writing
- Dictating stories

Initiative and Social Relations
- Making and expressing choices, plans, and decisions
- Solving problems encountered in play
- Taking care of one's own needs
- Expressing feelings in words
- Participating in group routines
- Being sensitive to the feelings, interests, and needs of others
- Building relationships with children and adults
- Creating and experiencing collaborative play
- Dealing with social conflict

Movement
- Moving in nonlocomotor ways (anchored movement: bending, twisting, rocking, swinging one's arms)
- Moving in locomotor ways (nonanchored movement: running, jumping, hopping, skipping, marching, and climbing)
- Moving with objects
- Expressing creativity in movement
- Describing movement
- Acting upon movement directions
- Feeling and expressing steady beat

**Music**
- Moving to music
- Exploring and identifying sounds
- Exploring the singing voice
- Developing melody
- Singing songs
- Playing simple musical instruments

**Classification**
- Exploring and describing similarities, differences, and the attributes of things
- Distinguishing and describing shapes
- Sorting and matching
- Using and describing something in several ways
- Holding more than one attribute in mind at a time
- Distinguishing between "some" and "all"
- Describing characteristics something does not possess or what class it does not belong to

**Seriation**
- Comparing attributes (longer/shorter, bigger/smaller)
- Arranging several things one after another in a series or pattern and describing the relationships (big/bigger/biggest, red/blue)
- Fitting one ordered set of objects to another through trial and error (small cup-small saucer/medium cup-medium saucer/big cup-big saucer)

**Number**
- Comparing the numbers of things in two sets to determine "more," "fewer," "same number"
- Arranging two sets of objects in one-to-one correspondence
- Counting objects

**Space**
- Filling and emptying
- Fitting things together and taking them apart
- Changing the shape and arrangement of objects (wrapping, twisting, stretching, stacking, enclosing)
- Observing people, places, and things from different spatial viewpoints
- Experiencing and describing positions, directions, and distances in the play space, building, and neighborhood
- Interpreting spatial relations in drawings, pictures, and photographs

**Time**
- Starting and stopping an action on signal
- Experiencing and describing rates of movement
- Experiencing and comparing time intervals
- Anticipating, remembering, and describing sequences of events

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**PROGRAM POLICIES**

**Enrollment in the Children’s Center at USC**

The Center accepts children six weeks through 5 years old in the full day program and children ages 5 through 8 years old in the afterschool, holiday and summer programs. The Center does not discriminate on the basis of a child’s ethnicity, economic level, family structure, language, religion, sex, national origin or disability.

Please see Appendix I for the priority of Admission and Waiting List Policy.

The following information will be completed prior to a child’s enrollment and will be updated as required by ECE regulations and/or requested by Center administration or staff:

- Enrollment Form
- Student Information
- Physical Statement signed by physician
- Special Care Plan for children with asthma and other chronic health conditions
- Copy of the Child’s Birth Certificate
- Emergency Information/Release Form
- Allergy Information
- Up-to-date Immunization Record on the DHEC form
- Parent Agreement
- Child Guidance Agreement
- Parent Permission Form permitting the child to interact with USC students, researchers and other approved classroom visitors.

A child cannot attend until the enrollment packet is completed, returned to the office, and reviewed by the Center Administration.

**Parent Orientation**

Ensuring the best possible care for all of the children at our center is our highest priority. We follow the following procedures when enrolling a family:
1. Parents will tour the center or classroom.
2. The child will visit the classroom for at least 30 minutes. Parents will have an opportunity to speak with the classroom teacher and ask questions during the visit.
3. If the parents, teachers, and center administrators are all in agreement that the placement is a good match, the parent may accept the space by completing an enrollment form, and paying the registration fee and first week tuition.
4. Continual weekly tuition payments must be made as of the date the space is available in order to retain the enrollment spot. Otherwise, the space will be offered to another family.
5. The classroom teacher or center administrator will provide the family with a classroom welcome packet.
6. Parents agree to familiarize themselves with all center and classroom policies, and to abide by them. The Family Handbook is available on the Children’s Center website at www.sc.edu/childrenscenter.
7. The entire enrollment packet must be completed, returned to the center office, and reviewed by the administration before the child can start.

We thank each family for their cooperation and partnership in supporting the success of all children.

Communication with Parents

Relationships are at the heart of all we do, and communicating appropriately with parents each day is an important part of this. We communicate with families in the following ways: at drop-off, at-pickup, via phone or email throughout the day as necessary, through daily communication sheets, with informational signs on the classroom, doors/Center doors/dry-erase boards/bulletin boards, etc., twice per school year at Parent-Teacher Conferences, and through each classroom’s website.

Hours of Operation

The hours of operation are from 7:00 am to 6:30 pm, Monday through Friday.

The Governing Board has approved a calendar that includes closing the center 15 days and dismissing early 8 days annually for teachers’ professional development and for workdays. During this time teachers will be preparing their classrooms for children's transitions, participating in required professional development, planning for instruction, preparing documentation of children's learning, and meeting individually with parents.

The academic calendar can be found on the Children’s Center website www.sc.edu/childrenscenter. It is also posted on each classroom’s website.

Weather Delay and Closings

In case of severe weather or natural disasters, the Center will follow the decision made by the University of South Carolina regarding the college’s hours of operation. Such decisions will be broadcast on local radio and television stations and posted on the USC website at www.sc.edu. You may also call USC’s emergency weather number at 777-5700. The Children’s Center will open a half hour before USC when there has been a delay.

Attendance and Arrival Time

Children benefit from predictable routines. Regular attendance helps them gain the most from the Center’s program. For that reason teachers encourage children to arrive by mid-morning so that they can fully participate in planned learning activities.

Children who arrive before 7:30 are accommodated in an age appropriate classroom until their teacher arrives. All classrooms are typically open by 8:00. Breakfast is served for all children who arrive before 8:30. If your child will not arrive at school in time to complete eating breakfast by 8:30am, please be sure he
or she has eaten a sufficient breakfast before arriving at school. We ask that children do not bring unfinished breakfast into the Center.

Arrivals during or just before naptime disrupt classroom routines. For that reason ALL children (except infants) must arrive either before 11:30 or after 2:30.

The afterschool program begins at 2:30 and operates until closing.

**Drop Off and Release of Children**

Every child must log in each morning both on the key pad by the front door and in the classroom log. A parent or responsible adult must accompany every child to the classroom and notify the teacher that the child is present. Please recognize that for safety reasons children may not walk to their classrooms alone or be left in the hallway unattended. The Center is not responsible for the child until the parent has made contact with the appropriate teacher and the teacher recognizes the child as being present.

**Teachers must be informed when a child arrives or leaves the classroom or playground.** Children must be logged out every day.

Parents must notify the Center if someone who does not regularly pick up their child will be picking up their child. Parents must provide the Center with accurate contact information for this person if the parents will not be reachable. The names of all adults authorized to pick up each child must be on file with the Center. When an adult who does not routinely pick up a child comes to the Center, a photo ID must be presented to the administrator before the person enters the child’s classroom.

If there is a court order prohibiting any individual from having access to a child, the Center must have a copy of the documentation ordering such prohibition.

Parents need to call the Center immediately should an emergency arise that prevents them from timely picking up their child. Parents will be charged a $4.00 per minute late fee for every minute after the center’s closing time until they arrive at the center, even if parents call the staff to let them know they will arrive late. It is important to call, however, because it is comforting for children and staff to know a parent is on the way. If a child has not been picked up by 7:30 pm and no word or directions have been received from the parent or other authorized adult, a protective service worker or law enforcement officer will be notified to pick up the child.

**Intoxication – Child Release Policy**

If a parent/guardian or other authorized pick-up individual arrives appears to be impaired, intoxicated or under the influence of drugs, the Children’s Center at USC will not release the child to the person under any circumstance and reserves the right to keep the child at the center. The teacher will consult with director and we will

1. Contact another parent or another approved emergency contact person to pick up the child;
2. Call the Department of Social Service;
3. Call the law enforcement.

The above procedures may be used in any order necessary depending on the circumstances.

**Parents’ Right to Free and Full Access to Their Child During School Hours**

The Children’s Center at USC shall permit the parent / guardian of a child free and full access to his or her child without prior notice unless there is a court order limiting parental access. Your free access must not disrupt instructional activities or classroom routines. Because we must think of your child and all the children in the classroom, repetitive disruptions will require us to impose limitations on access on a case by case basis.
Supervision of Children

Appropriate adult supervision is required at all times, both in the classroom and on the playground. No child is ever to be left unattended or out of a teacher’s sight. School age children must always be within a supervising adult’s earshot but may occasionally walk in the hall or to the restroom alone or with a friend.

Referral Procedures for Children with Different Abilities

If teacher observes any red flags or have any concerns about a child meeting developmental milestones:

- Notify the Director and document about two weeks worth of observations. Teacher should be communicating with parents daily about their child’s development in a positive supportive manner. Share the child’s strengths and your concerns.
- Begin filling out an ASQ and/or Social Emotional ASQ (teacher only)
- Set up an Information Gathering Session with parents and teachers:
  - Ask parents about child’s development/behavior at home. Find out whether there have been any changes for the child, what their routines are, parent expectations, etc.
- Request that the parents complete an ASQ and/or Social Emotional ASQ
- Get permission for USC resource specialist to observe or call BabyNet or First Steps
- Set up follow-up meeting with Parents, Teachers and Director
- Share all observed information, forms and assessments

Continue follow-up meetings for Plan of Action to ensure provisions are being followed by school and home

Resources and Referrals

<table>
<thead>
<tr>
<th>Agency</th>
<th>Contact Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABC Special Needs</td>
<td>803-935-5238 or 803-935-5281</td>
</tr>
<tr>
<td>ABC Child Care Voucher Program</td>
<td>1-800-476-0199</td>
</tr>
<tr>
<td>Adoption and Birth Parent Services</td>
<td>1-800-922-2504</td>
</tr>
<tr>
<td>AFDC/Food Stamps/Medicaid</td>
<td>1-800-868-0404</td>
</tr>
<tr>
<td>Child Find (Age Birth to 21)</td>
<td>1-866-SC-Find-1</td>
</tr>
<tr>
<td>BabyNet Central Office (Age Birth to 3)</td>
<td></td>
</tr>
<tr>
<td>Department of Health and Environmental Control</td>
<td>803-734-0111</td>
</tr>
<tr>
<td>Special Education Department (Age 3 to 21)</td>
<td>1-803-231-6778</td>
</tr>
<tr>
<td>Richland County School District One</td>
<td>Or contact your home school district</td>
</tr>
<tr>
<td>Child Abuse Hotline (National)</td>
<td>1-800-422-4453</td>
</tr>
<tr>
<td>Child Care Resource and Referral-Midlands</td>
<td>1-888-335-1002</td>
</tr>
<tr>
<td>Department of Social Services</td>
<td>803-714-7300</td>
</tr>
<tr>
<td>Family Connection of South Carolina</td>
<td>1-800-578-8750</td>
</tr>
<tr>
<td>NAEYC (National Association for the Education of Young Children)</td>
<td>1-800-424-2460</td>
</tr>
<tr>
<td>Richland County First Steps</td>
<td>803-256-7237</td>
</tr>
<tr>
<td>South Carolina Program for Infant Toddler Care</td>
<td>803-777-0092</td>
</tr>
</tbody>
</table>

USC Student Observers

Student Observers (e.g. USC practicum and Service Learning students) are required to have a South Carolina Law Enforcement (SLED) background check. This provides information about students’ backgrounds but does not qualify them to be alone with children. Student Observers are always under the supervision of regular, fully-qualified staff members.

The number of extra adults in the classroom is limited to two per classroom for infants and toddlers, and three in preschool classrooms. Students must schedule their visits, display their USC ID, and check in at the front desk.

By enrolling in the Center, you agree to allow your child to be observed by Student Observers for the purposes of their classroom assignments, under the supervision of Center staff. Observations may include
taking notes, photographs, or videos specific to a class assignment, to be viewed by the students’ professor only. No image will be used in the Internet without parent approval. Parents will be informed and their consent will be requested when projects are planned that may involve their child interacting individually with a Student Observer.

**Extra-curricular Activities**

Music play is an extension of the curriculum and is aimed at promoting children’s growth and development through social music interaction. The music classes are provided for all classrooms from Infants to K4. They are led by Dr. Wendy Valerio and graduate students working under her direction. Dr. Valerio is the founder of USC’s Children’s Music Development Center (http://www.music.sc.edu/Special_Programs/CMDC/Index.html). The Music Play program is funded by the Parent Teacher Organization (PTO.)

The K4 and/or School-age classes participate in Karate as part of the curriculum. See the Activity Fees section on page 24 for more information.

**Outdoor Play**

Outside play is an extension of the curriculum and is aimed at promoting children’s physical growth and socialization. Teachers are encouraged to take stimulating materials outdoors to extend curriculum activities. Plan for your child to play outdoors every day, when weather permits. Remember to dress your child appropriately for the season, including rain gear. We follow the Child Care Weather Watch for the chill factor and heat index – http://www.scdconline.org/PDF_files/weatherwatch.pdf. The children won’t go outside when the wind-chill is below 30°F or when the heat index over 90°F. We try not to stay inside, so be sure your child has appropriate clothing and shoes, as well as clothing to change into if they engage in wet or messy explorations.

*If your child is too ill to go outside, she or he belongs at home.* The Center will make appropriate accommodations for children with chronic medical conditions that may make outside play inappropriate.

**Physical Activity Policy**

The purpose of this policy is to ensure that children are supported and encouraged to engage in active play, develop fundamental movement skills and limit screen time. Our center encourages all children to participate in a variety of daily physical activity opportunities that are appropriate for their age, that are fun and that offer variety. In order to promote physical activity and provide all children with numerous opportunities for physical activity throughout the day, our Center has adopted the following practices:

**Daily Outdoor Play**

- Encourage a least restrictive, safe environment for infants and toddlers at all times.
- Provide a designated safe outdoor area for infants (ages 0-12 months) for daily outdoor play.
- Provide preschoolers (ages 3 through 5 year olds) with at least 90 -120 minutes of daily outdoor activity play opportunities across 2 or 3 separate occasions.
- Increase indoor active play time so the total amount of active play time remains the same, if weather limits outdoor time.
- Take children outside every day unless the temperature is below 30°F or above 90°F and in the case of weather advisories.

**Role of Staff in Physical Activity**

- Provide teacher planned physical activities (e.g., games and activities) lasting 5-10 minutes at least 2 times a day.
Will encourage children to be physically active indoors and outdoors at appropriate times.

**Indoor and Outdoor Play Environment**
- Provide a variety of play materials for children to use that promotes physical activity indoors (e.g. scarves, bean bags, balls, ribbons, CDs).
- Provide a variety of outdoor portable play materials for children to use (e.g. balls, obstacle cones) and/or equipment (hoops, wheeled toys).

**Physical Activity and Punishment**
Staff members do not withhold opportunities for physical activity (e.g., not being permitted to play with the rest of the class or being kept from play time), except when a child’s behavior is dangerous to himself or others. Staff members never use physical activity or exercise as punishment, e.g., doing push-ups or running laps. Play time or other opportunities for physical activity are never withheld to enforce the completion of learning activities or academic work. Our center uses appropriate alternate strategies as consequences for negative or undesirable behaviors.

**Appropriate Dress for Physical Activity**
We expect parents to provide children with appropriate clothing for safe and active outdoor play during all seasons, including closed-toe shoes. Our expectation is that children will play outside every day – please make sure your child is dressed for the weather and has an ample supply of extra clothing and footwear at school to change into.

**Screen Time Limitations**
Our center does not permit screen time (e.g., television, movies, video games and computers) for children two years and younger. Screen time for children aged three and over is limited to 20 minutes per day.

**Professional Development**
Annual training on promotion of children’s movement and physical activity is required for all staff. Staff will be informed of their role in encouraging children to be physically active indoors and outdoors at appropriate times.

**Clothing and Personal Belongings**
- All clothing and personal belongings should be labeled with your child’s name. Clothing should be comfortable enough to allow children to fully participate in a wide variety of activities (i.e. painting, water play, sandbox, etc.) without undue concern that these clothes will be damaged. For safety and health reasons, children should wear comfortable footwear that has closed toes and fit securely on their foot during active play. Sneakers are recommended. *Do not send your child to school in flip-flops or open-toed shoes.*

Children are expected to dress appropriately and be ready to go outdoors in every season. Please dress children in cool clothing for summer; warm coats, hats and gloves in the winter, sweaters in the fall and spring, rain gear for wet and mildly rainy days. Parents are responsible for providing a new bottle of sunscreen, labeled with their child’s name, each spring as needed. Sunscreen will be applied when needed if written permission for its application is on file.

Each child is expected to keep at least one complete change of extra clothing, including socks and shoes at the Center. You may keep a comb or brush at school for your child if you wish. Extra clothing should be labeled with your child’s name and placed in a plastic Ziploc bag. During toilet training please bring at least two extra changes of clothing.

Parents of infants and toddlers also need to provide diapers and any needed diaper wipes, powder, or ointment. We are able to accommodate disposable diapers, and a specific type of hybrid diaper, in accordance with NAEYC guidelines. These diapers must have “an absorbent inner lining completely contained within the outer covering made out of waterproof material that prevents the escape of feces and
urine.” Both the inner lining and outer covering must be changed at each diaper change. Parents will be required to provide disposable diapers if the hybrid diapers do provide adequate containment.

Parents should provide a blanket and small pillow (if the child desires) for naptime. Parents will be responsible for laundering these items on a weekly basis. A soft toy or doll from home may also be provided for naptime comfort. The Center cleans cots at least weekly.

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

Field Trips/Transportation
Well-planned and carefully supervised field trips are an important part of a quality curriculum for preschool children. Parents are welcome and encouraged to help chaperone all field trips.

The Center’s enrollment contract includes a Field Trip/Transportation Authorization Form. However, a parent’s signature will be required each time children aged four and up are going to use the Center’s bus to leave the school grounds for a planned outing. On any outing, stringent, safe ratios will be adhered to and teachers will always have cell phones, first aid supplies, and emergency contact information with them.

When planning a field trip, the Lead Teacher submits a Field Trip Authorization Form to an administrator in advance. Approved outings are designed to contribute to the curriculum and bring learning to life through a hands-on look at the world beyond the Center.

Meals and Snacks
The Center provides breakfast, lunch and afternoon snack daily. The food served meets the guidelines of the Child and Adult Care Food Program under the U.S. Department of Agriculture. Menus are emailed, posted on the kitchen door and in classrooms for parental review.

Meals at the Center are served family style and are used as an opportunity for developing appropriate social behaviors, conversation skills, good nutrition habits, and ecological attitudes that discourage food waste. Breakfast is served for all children who arrive before 8:30. If your child will not arrive at school in time to complete eating breakfast by 8:30am, please be sure he or she has eaten a sufficient breakfast before arriving at school. We ask that children do not bring unfinished breakfast into the Center.

Parents of infants who are not yet eating table food must provide formula or breast milk in bottles clearly marked with the child’s first and last name and the date it was brought to school. Unused food from home will be discarded or returned to parents at the end of the day. Baby food is to be in unopened containers and clearly marked with the child’s first and last name, and date.

Foods that contain peanuts or tree nuts are not permitted in the center, due to the high incidence of dangerous allergies to these foods. In order to keep everyone safe, please be sure you and your child are free of particles and residue on skin and clothing if you consume these foods prior to entering the center.

The Center strives to partner with families to accommodate the nutritional and cultural needs of each child. It is important to indicate any special dietary needs (e.g., allergies or cultural/religious dietary restrictions) on enrollment forms. Parents need to bring these needs to the attention of the caregivers at the time of enrollment and when their children transition into a new classroom. Parents will be asked to provide alternative meals and snacks if the regular menu cannot accommodate their children’s dietary needs. Any
food brought from home must follow our guidelines. **Do not bring sweets, fast food (McDonald’s breakfasts) or soft drinks for your child to eat at the Center.**

**Nutrition Policy**

*The Children’s Center at USC* follows the child care nutrition guidelines recommended by the USDA CACFP (Child and Adult Care Food Program) for all the foods we serve. To provide a healthy and balanced diet that includes fruits, vegetables, and whole grains and limits foods and beverages that are high in sugar, and/or fat, our nutrition policy includes the following:

**Fruits and Vegetables**
- ✔️ We serve fruit at least 2 times a day.
- ✔️ We offer a vegetable other than white potatoes at least twice a day.

**Grains**
- ✔️ We serve whole grain foods at least once a day.

**Beverages**
- ✔️ We only serve water and milk.
- ✔️ We do not serve sugar sweetened beverages.
- ✔️ We serve only skim or 1% milk to children age 2 years and older.

**Fats and Sugars**
- ✔️ High fat meats, such as bologna, bacon, and sausage, are served no more than once per week.
- ✔️ No fried or pre-fried vegetables, including potatoes, are served.
- ✔️ We limit sweet food items to no more than once per week.

**Role of Staff in Nutrition Education**
- ✔️ Staff provide opportunities for children to learn about nutrition 1 time per week or more.
- ✔️ Staff act as role models for healthy eating in front of the children.

Meal and snack times are planned so that no child will go more than four hours without being offered food. We provide a variety of nutritionally balanced, high quality foods each day so please do not send your child with outside food and drinks.

**Monthly Menus**

Our menus are carefully planned to follow child care nutrition guidelines at every meal. Each menu is designed to provide a wide variety of nutritious foods that are different in color, shape, size and texture. All of our child care menus include foods that are culturally diverse and seasonally appropriate. We also like to introduce new and different foods and include children’s favorite recipes in our menu planning. Menus are rotated on a four week basis to provide the children with a balance of variety and familiarity. Menus are adapted to incorporate local and fresh in-season produce when available.

**Nutrition and Discipline**

Staff will never use food as a reward or as a punishment.

**Birthday Celebrations**

Many families eagerly anticipate celebrating their young children’s birthdays and enjoy making it a memorable day for the family. The Center welcomes birthday celebrations, but asks that classroom parties remain age appropriate and simple. To comply with the Level A Nutrition Policy, sweets are not permitted. Please consider the following ideas for celebrating your child's birthday at school:

- join the class for a meal time or play time
- read a story to the class with your child
- facilitate a simple activity in the classroom
- donate a book or puzzle to the class in honor of your child's birthday
- bring fresh fruit or vegetables in lieu of sweets
**Professional Development**

Annual nutrition training is required to ensure that all staff understand the important role nutrition plays in the overall well-being of children.

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**Child Guidance & Discipline**

The goal of the Center’s child guidance policy is to build self-worth, increase social competence, and enhance the dignity of each child. All guidance and discipline techniques used at the Center will be in accordance with this positive emphasis. The purpose of any set of procedures should be to teach children to learn how to control themselves in various situations.

**Positive approaches to guidance include the following:**

- Staff will have a well-designed, developmentally appropriate learning environment and provide developmentally appropriate learning experiences.

- Staff will know and be sensitive to the developmental, cultural, and individual needs of each child.

- When inappropriate behavior occurs, the teacher shall examine the situation thoroughly to determine the cause; for example, a child may be reacting to something in the classroom, stress at home, a physical problem, or some other factor.

- The teacher shall be responsible for documenting patterns of inappropriate behavior and bringing such patterns to the attention of parents and to the administrators.

The goal of developmentally appropriate guidance is to help children learn to make socially acceptable choices. For this reason, teachers strive to use mediation, guidance, problem-solving, and various other techniques to assist children in making acceptable choices. The High/Scope curriculum has a six-step plan to help children resolve conflicts within a teacher supported framework. Teachers are encouraged to use this approach. The goal of the High/Scope approach is to give children the tools they need to become good friends and good citizens.

**The Children’s Center at USC follows procedures as outlined below in encouraging self-discipline:**

For younger children, teachers will use such strategies as: prevention, distraction, encouraging, modeling, and enticing the child to a new activity.

For older children, reminding, explaining, and problem-solving will be used in addition to the above approaches.

A child may need time to calm down before engaging with others. Children will always be supervised by an adult. Calm down time will be followed by redirection and positive encouragement.

**These discipline techniques are NOT permitted:**

- A child is NEVER to be deprived of food, water, a nap or rest, a comfort item from home, or bathroom facilities!

- Unsupervised isolation of a child is NEVER allowed!

- The Children’s Center does not permit corporal punishment of any kind!

- Adults are expected to always show respect for children by NEVER addressing a child harshly with intimidation or ridicule. Also, in accordance with the NAEYC *Code of Ethical Conduct*, Center personnel will not discuss a child’s behavior with other adults, in the presence of other children, or with other parents. Written or verbal reports to parents regarding conflicts will guard confidentiality by not revealing the name of any other children involved in a particular incident.

Staff members will encourage parents to use these same approaches to guide and discipline their children. All parents and staff are required to sign the Center’s Child Guidance & Discipline Procedures Agreement.
Transitions
Many children transition into a new classroom at the start of the academic year in mid-August. Children are prepared for this transition during the last weeks of the summer session.

Our younger children may be ready to transition at other times of the year. When teachers and parents agree that a child is ready to transition to the next classroom, they will begin a two week (or more) transition process that meets the child’s individual developmental needs. Parents, the primary caregiver, and the new classroom teacher(s) will plan to conference before the transition process begins to ensure its success. They will also communicate frequently with each other throughout the process.

Child Abuse and Neglect
Child care providers are mandated by state law to immediately report any suspected child abuse or neglect to the Department of Social Services (DSS). A written statement is signed annually by all staff and parents in the Center indicating their awareness of this policy. The number one priority of the Center is to protect all the children in its care.

Emergency Procedures
Current emergency phone numbers for each child shall be kept on file so that a parent or designated emergency contact can be reached in the case of an emergency. Be sure that your emergency contact people understand that they will be called upon to pick your child up from the center if we are unable to reach you. It is important that families report changes in their own and emergency contacts’ phone numbers to the office. Failure to provide updated emergency phone numbers/contacts may be grounds for termination of services.

Parents and then emergency contacts will be telephoned in case of the following:
- If a child becomes ill or injured while attending the Center. Emergency contacts will be called if parents cannot be reached in a reasonable amount of time.
- If a child is left at the center until 7:00pm or later.
- If the Center must close because of extenuating circumstances such as a weather emergency.

The USC Fire Marshall advises in case of an extreme emergency such as a fire, for the children to be evacuated to the Blatt PE Center or the ROTC building.

Staff and children practice evacuation procedures monthly.

Accidents/Incidents
In the event of a minor accident at the Center, first aid measures will be taken and an “Uh-Oh” Report Form will be completed. The original will be given to the parent, and a copy will be placed on file in the child’s folder. Minor scrapes and bruises are treated with tender loving care. The Center does not call parents for every minor injury. Parents will be called in the case of accidents that may need a doctor’s attention. The Center will always call parents if their children experience one of the following:
- Injury to the head or face
- Injury that causes a great amount of bleeding
- Injury or incident that has a strong emotional effect on the child

In the event of a serious accident or emergency, the child will be taken to the hospital by ambulance. Every effort will be made to contact parents immediately. If parents cannot be reached, the Center will attempt to reach the emergency contacts and then the physician listed on the Enrollment Information Form. In the event an authorized emergency contact person cannot be reached, an assigned member of the staff will stay with the child and secure needed medical treatment.
Incident Reporting
Teachers will also use an “Uh-Oh” Report Form to communicate with parents about any behaviors we may be tracking. Teachers will engage in ongoing verbal communication with families as a part of this process.

Emergency Medical Plan
In the case of a medical emergency in which emergency medical care and treatment is warranted, the following steps will be followed:

- Call 777-9111 USC Emergency Medical Service for First Responders team to come to the Center and the parent/guardian will immediately be called after that.
- If parents cannot be reached, the Center will attempt to reach the emergency contacts and then the physician listed on the Enrollment Information Form.
- If CPR or First Aid is necessary, trained staff will administer treatment until the ambulance arrives.
- First Responders will assess and determine whether the child needs to be taken to the nearest hospital (Palmetto Richland Hospital) or parents’ preferred hospital by ambulance.
- A teacher will accompany the child to the hospital and remain until a parent or guardian arrives.
- A qualified staff member will be assigned to the classroom until the regular teacher returns.
- Emergency information for the child will be taken with the child to the hospital or emergency room.

Illnesses
To protect the health of all children, the Center follows the guidelines of the American Academy of Pediatrics for exclusion. The Center requires that a child, teacher, or USC student with the following conditions be excluded from the Center until his/her recovery has reached a stage conducive to inclusion in regular Center activities.

Children’s Center at USC illness exclusion policies are guided by SC DHEC. If your child has one of the conditions listed below, please keep him or her home from school and inform the Center immediately:

Chicken Pox / Varicella
Children with chicken pox may return with a physician note once all of the sores and blisters are dried or scabbed over, or if there are no scabs, until no new sores appear for 24 hours.

Diarrhea:
For most kinds of diarrhea (defined as 3 or more loose stools in 24 hours), children should stay home until diarrhea stops for at least 24 hours, or until a doctor clears the child to return to school (provide the Center with a physician note in this case).

Students of any age must have a physician note to return to school after having diarrhea that contains blood or mucus.

Students who can use the restroom or whose stools are contained in diaper-type underwear do not have to be excluded if the diarrhea is known to be from a non-contagious condition, or if it continues after the child completes antibiotics for a diarrhea-causing illness.

A medically fragile child or child who needs help with toileting may be excluded for fewer than 3 episodes of diarrhea if her condition makes it hard for her caretakers to maintain sanitary conditions in the classroom.

Diarrhea from Campylobacter, Norovirus, Rotavirus, Shigella, or most types of Salmonella:
Students of any age are excluded for one of these infections. Your child may return to school with a physician note after diarrhea stops for at least 24 hours.
**E. coli**
For the most severe type of *E. coli*, students of any age must be out of school until the diarrhea stops and 2 lab tests taken at least 24 hours apart test negative for *E. coli*O157:H7. Physican note required to return to school.

**Giardia**
When diarrhea stops for at least 24 hours, or child has taken antibiotics for at least 24 hours. Physician note required to return to school.

**Salmonella Typhi (Typhoid fever)**
After 24 hours without diarrhea, and 3 lab tests are negative, if a doctor clears the child to return. Physician note required to return to school.

**Fever by itself**
Infants under 4 months old: Keep home for an axillary temperature (taken under the arm) of 99°F or higher.

Children over 4 months old: Children are excluded for an axillary temperature of 100°F or higher. Children may return to school when fever free for at least 24 hours without fever-reducing medication.

**Fever with Rash, Behavior Change or other Symptoms**
Children must be seen by a physician for any fever accompanied by rash, change in behavior, earache, vomiting, confusion, sore throat or irritability. A physician note is required to return.

**Flu / Influenza or Influenza-Like Illness (ILI)**
A child with ILI or the flu will be excluded for a fever of 100°F until fever free for at least 24 hours, without any fever-reducing medication.

**German Measles / Rubella / 3 Day Measles**
Keep your child home until 7 days after rash starts. She or he may return with a physician note.

**Head Lice**
Children with crawling lice or with nits (eggs) ¼ inch or closer to the scalp may be sent home at the end of the day if head-to-head contact with other children can be avoided. Otherwise, they may be excluded immediately. Your child may return with a physician note after her first treatment with a school-approved lice-removal product, if there are no active lice crawling on your child’s head. The school or center should check your child 7 days after treatment for any newly hatched crawling lice. If any are present, your child will have to be re-treated for lice in order to return to school or childcare.

**Hepatitis A / Yellow Jaundice**
Children with acute hepatitis A may return with a physician note 1 week after the start of the jaundice.

**HIB (Haemophilus influenzae Type B)**
Students with proven HIB infection need to be out of school until at least 24 hours after they complete their antibiotics. A physician note is required to return.

**Impetigo**
If your child has dry, honey-colored crusty sores that cannot be covered, he will be sent home at the end of the school day until 24 hours after starting antibiotics.

If the sores are weepy, oozing or wet or cannot be covered, the child will be sent home immediately. He may return after 24 hours of antibiotics, if the sores have stopped oozing and are starting to get smaller. A physician note is needed to return to school.
Measles / Red Measles / 10 Day Measles
Children with measles can return with a physician note 4 days after the rash begins, if they have no fever and feel well enough to participate in regular school activities.

Meningitis
A student with signs of meningitis (high fever, rash, stiff neck) must remain out of school until a health care provider says that the student may return. A physician note is required.

Mononucleosis (Mono)
Your child’s physician will decide when your child is well enough to come back to childcare or school. A physician note is required.

Mouth Sores inside the mouth
Children sores inside the mouth who also drool should stay home until their health care provider says that the sores are not contagious. A physician note is needed to return to school.

Mumps
Children with mumps can return with a physician note 5 days after the beginning of swelling.

Pinkeye / Conjunctivitis
Children whose eyes are red or pink, and who have eye pain and reddened eyelids, with white or yellow eye discharge or eyelids matted after sleep should not be in school until they have been examined and treated. A physician note is required to return.

Rash
Children who have a rapidly spreading rash or a rash with fever or behavior change are excluded from school immediately. A physician note is required to return.

Ringworm
Children with ringworm of the scalp must remain out of school until they have begun treatment with a prescription oral antifungal medication. Your child may return with a physician note.

Children with ringworm of the body may return with a physician note once they have begun oral or topical antifungal treatment, unless the affected area can be completely covered by clothing the entire time that the child is at school or in childcare.

Scabies
Children with scabies should be out of school until treatment/medication has been applied. A physician note is required to return.

Shingles
Keep children home who have shingles lesions/sores/blisters that cannot be covered. Your child may return with a physician note once the lesions are dried/scabbed.

Staph or Strep Skin Infections (includes MRSA), or other skin infections such as Herpes Gladiatorum
Children may attend school unless their lesions/sores are oozing or draining and cannot be covered with a watertight dressing. A physician note is required.

“Strep Throat” / Streptococcal Pharyngitis
Your child with “Strep throat” can return to school with a physician note 24 hours after starting antibiotics if there is no fever.
Sty (or Stye)
A child with a draining/oozing sty should remain home until the draining stops.

Tuberculosis (TB)
A child with TB should be kept home until the doctor treating the TB writes a physician note that says that the child is no longer contagious.

Vomiting
A child who has vomited 2 or more times in 24 hours should stay home until the vomiting has stopped for at least 24 hours.

Whooping Cough / Pertussis
Children with whooping cough can return to school with a physician note after completing 5 days of prescribed antibiotics, unless directed otherwise by DHEC or your school nurse.

If your child has not received immunizations to protect against diseases like Measles, Mumps, German measles, or Chickenpox, she may need to be out of school if there are cases of these conditions in the school.

The Director, in consultation with the child’s teaching team, will determine if a child is exhibiting symptoms that need to be evaluated by a physician, or whether the child should be excluded from school. If it is decided your child should be sent home, parents will be asked to pick their child up promptly. A reasonable amount of time (no more than 90 minutes) will be allowed for parents’ arrival. If the parents of an ill child cannot be reached or do not respond to the Center’s request to pick up their child, the family’s emergency contact people will be asked to come pick up the child instead.

If your child is sent home with an Exclusion for Illness Form, its terms are strictly enforced. It is very important that all communicable illnesses be reported to the Center. A statement from a physician identifying the type of illness and the date when the child may return to school may be required for contagious illnesses. Contagious illnesses will be reported to ECE and/or DHEC if there are concerns that the illness is occurring in epidemic proportions. The goal of the Center is to prevent the spread of illness. Parental cooperation is essential in this effort.

Medications/Treatments
The Center requires written authorization to administer any medication or medical treatment. Medication Forms are available at the front desk. Completed forms are kept in a medication log.

- If a child requires prescription medication, parents will complete the Medication Form requesting and authorizing administration of the medication and specifying the dosage and times of day the medication is to be administered.
- An administrator will check the name and date of the prescription to be sure the medication is prescribed for this specific child and is current. The prescription label or doctor’s note should also indicate the nature of the condition being treated.
- Written, signed and dated parental consent is required prior to the administration of any prescription or over-the-counter medication or administration of special medical procedures:
  - The medicine must be in its original container. All medications shall be used only for the child for whom the medication is labeled.
  - Medications shall not be given in excess of the recommended dose
  - Prescribed special medical procedures ordered for a specific child shall be written, signed and dated by a physician or other legally authorized health care provider.
  - Medicine will be administered for only one day with a parent’s authorization. Continued usage requires a physician’s written authorization.
• **Storage of medication:**
  All medications shall be kept in their original labeled containers and have child protective caps. The child’s first and last names shall be on all medications.
  All medications shall be stored in a separate locked container under proper conditions of sanitation, temperature, light and moisture.
  Discontinued and expired medication shall not be used and shall be returned to the parent or disposed of in a safe manner.

• **Medication Log:**
  For each medication that is administered by a staff person, a log shall be kept including the child’s name, the name of medication, dosage, date, time and name of person administering the medication.
  This information shall be logged immediately following the administration of the medication and a copy provided to child’s parent(s)/guardian(s).

Any errors in administration of medication will be reported immediately to the family and to ECE.

Parents may also come to the Center to personally administer medications to their children. The Center will not be responsible for medications administered by parents. The Center has one refrigerator designated for the purpose of storing medications requiring refrigeration.

To meet DHEC’s standards (Department of Health and Environmental Control) if a child has an Epi-Pen, it should be stored in a First Aid Kit that is readily accessible in the event of an emergency. Staff must be trained to administer emergency medication. Parents should complete an Emergency Consent Form to allow the staff to administer an Epi-Pen.

**Research and Training**

All children enrolled at the Center will participate in research/training projects and observations conducted by University faculty, staff and students. Each project must be reviewed and approved by the Center Director and CDRC Director. Researchers will undergo appropriate background checks before entering a classroom.

Parents will be informed and their consent will be requested when special research/training projects are planned that may involve their child interacting individually with a student or researcher. No recording of children will be used on the Internet without parent approval.

**Confidentiality**

All children and families have the right to expect that all information about their family will be kept confidential. A child’s behavior and development should be discussed only with his or her teachers and parents. A parent does not have the right to know who injured their child (pushing, biting, etc.); they do, however, have a right to know the circumstances and how both children were cared for or disciplined. All staff members are committed to abiding by the NAEYC *Code of Ethical Conduct* regarding respect and confidentiality.

Children’s records are stored in secure file cabinets and computer files at the Center. Only authorized personnel – the child’s teacher, the director(s), or director designee, an authorized employee of the Department of Social Services, or the child’s parent or legal guardian will be given access to the child’s personal information.

**Photographs and Recordings**

All children may be photographed or recorded to develop videos, published material, or news releases, with the understanding that a family’s privacy will be respected and honored. Teachers and students may also photograph or record children for the purpose of course assignments or for educational or scholarly purposes.
Identifiable photographs will not be used on the Internet without prior specific approval from the parents. The Center will review and approve all projects that involve the recording of children prior to the project start date.

**Communication and Privacy**

We protect the privacy of our staff and the families we serve and expect all staff and families to follow these guidelines:

- Email to communicate with Center families only on Center-related matters.
- It is acceptable to email the families in your child’s class for strictly social purposes (for example to invite them to your child’s birthday party)
- Email addresses distributed by the Center are NOT to be used for personal financial gain (for example to invite them to a Pampered Chef party) or for any political purposes whatsoever.

Teachers, administrators, and classroom coordinators frequently use email to communicate important information to families. If you have any questions about the appropriate use of the Center’s email addresses check with the Center’s administration.

Access to classroom websites will be granted ONLY to teachers, parents, and legal guardians of children in the class. All parents and legal guardians must sign an agreement to keep access information confidential before being granted access to the website. Teachers will distribute website agreements to families.

Occasionally, staff may develop a relationship with families outside of the Center. Please make arrangements with staff for non-Center-related activities when the staff person is not on the clock.

**Termination of Services**

Except in the case of an emergency, it is expected that parents will notify the Center in writing at least two weeks in advance of withdrawing from the program. If this advance notice has not been given, tuition for the two week notification period will still be due.

Service may be terminated when a pattern of any of the following becomes excessive:

- Habitual late pick-ups
- Requests for special accommodations that Center staff cannot meet
- Failure to pay tuition in a timely manner
- Failure to comply with Center policies concerning ill children
- Being unreachable and out of touch by phone
- Failure to provide documentation requested by Center staff and/or required by ECE regulations
- Failure to keep immunization records current
- Failure to provide emergency contact updates
- Failure of parents to partner constructively with staff
- If a child exhibits extreme behavior that impacts the safety of children and/or adults, the child will be suspended while the case is reviewed. Suspension may result in termination of services.

Our philosophy of terminating services reflects that found in the NAEYC Code of Ethical Conduct.

**Tobacco Free Policy**

Tobacco-Free Policy: Due to acknowledged hazards to young children arising from exposure to tobacco use and secondhand smoke, it shall be the policy of the Children’s Center at USC to provide a tobacco-free environment for children, parents, staff, student observers and visitors. This policy covers the use of any tobacco product and applies to both employees and non-employee participants of the Children’s Center at USC.
USC. The staff and volunteers will serve as role models by refraining from the use of tobacco in the presence of children, parents, visitors or participants.

**DEFINITION:**

1. There will be no use of tobacco in any area of the child care center at any time. If there is a designated tobacco area, it will be located out of the children’s sight, away from the main entrances to the building and center’s parking lot and at least 20 feet away from the Children’s Center at USC’s parking lot.
2. All tobacco-related trash, including butts and matches, will be extinguished and disposed of in appropriate containers.
3. There will be no tobacco use in any Children’s Center at USC’s vehicle at any time. There will be no tobacco use in personal vehicles when transporting children on child care authorized activities.
4. There will be no tobacco use by staff or volunteers when children are present. This includes both indoor and outdoor activities. Field trips, walks, and all other off-site activities and functions will be tobacco-free.

**PROGRAM INFORMATION**

**School-age Program**

The Children’s Center runs an afterschool program during the academic year for children ages 5 through 8. We provide bus transportation to the Center from A.C. Moore Elementary School and Rosewood Elementary School. On occasion, we also provide extended care for A.C. Moore and Rosewood early release days and school holidays. The Center will provide meals for School-agers, as we do for other classes. The typical School-age day will consist of 30-45 minutes of homework support, free play in classroom centers, and outside play, weather permitting. Children are age-eligible for our afterschool program if they are 8-years-old through November 30. Enrollment for the school year begins on July 1.

**School-age Summer Camp**

The Children’s Center provides a full-day Summer Camp for school-aged children ages 5-8. The Summer Camp consists of a variety of art, science, nature, and cooking explorations, on-site special events, and off-site field trips, including swimming at Maxcy Gregg pool. The School-age Summer Camp has the following priority for enrollment:

1. Currently enrolled School-agers
2. Siblings of currently enrolled families
3. Families who were enrolled the previous year
4. New families:
   1. USC faculty & staff
   2. USC students
   3. General public

Enrollment for current families and siblings of current families is due by the end of March. Enrollment for all others will begin April 1. The Center reserves the right to enroll on the basis of age and development as it best suits the current group of children.

**Staff Positions**

The Center Director reports to the President and Chief Executive Officer of the Children’s Center and is responsible for the curriculum, staff, and program at the Center. The Director is expected to provide comprehensive leadership in developing and maintaining a state-of-the-art child development center, offering quality programs of full-day group care and education for the young children and families, and for
overseeing the provision of afterschool and summer programming for the school-age children who are enrolled.

The Assistant Director is to aid and support the Director. Specifically, the Assistant Director is responsible for the management of staff and oversees matters related to the curriculum and physical environment at the Center. In the absence of the Director, the Assistant Director is responsible for the Center. In the absence of both directors, a designated teacher will serve as the designee for managing the Center for short periods of time in accordance with ECE regulations.

The Children’s Center utilizes a differentiated staffing design combined with a “team approach.” Each classroom teaching team is supported by Graduate Assistants and/or Student Workers.

Lead Teachers are the instructional leaders of the classroom. They are to assume a leadership role in curriculum development and implementation and to guide and mentor their teaching team as well as USC students and classroom volunteers.

Teachers are partners in caregiving and instruction. They are to work to support and enhance the Lead Teacher’s role to ensure a smoothly run, positive environment that enhances young children’s development, growth and learning.

Floating Teachers support classrooms by acting as a substitute when classroom teachers are absent. They also provide support to classrooms during teacher lunch breaks and meetings, and join classrooms at the end of teachers’ shifts.

**Child Assessment**

Continuous assessment of each child’s development is carried out at the Center. Informal and formal teacher assessments are used to gain insights into each child’s social, emotional, cognitive, and physical growth and development. Each classroom collects checklists, developmental assessments, work samples, photographs, and anecdotal records to place in each child’s developmental portfolio. This information is used to make informed curricula and planning decisions so as to provide appropriate activities that will enhance each child’s development. These assessment strategies also help guide teachers as they share information about the child’s learning, growth and development with parents.

**Accommodation of Special Needs**

The Children’s Center embraces diversity of all kinds and supports the inclusion of children with special needs. However, we do not staff special needs specialists. Enrollment of children with special needs will be contingent on our ability to best care for all children in a class, or upon the presence of outside specialists that make appropriate care for the whole class possible.

We are generally able to accommodate outside specialists who provide developmental support to children if parents wish this to happen during the school day. We will work together with specialists to arrange a schedule that works well for the class. It is parents’ responsibility to communicate with their specialists regarding attendance or other considerations.

**Family-Center Partnership**

A strong, trusting partnership between families and the Center is important to best meet the needs of each child in our program. Teachers take their role in developing these relationships very seriously. Parents and teachers must communicate openly on a regular basis in order to support each child’s development and needs. We expect all adults to engage in timely, ongoing, civil, respectful communication.
Teachers will hold regularly scheduled conferences with parents twice a year for the purpose of sharing and gathering information about the children in their care. We may also schedule an additional conference at the time of transition. Teachers view themselves as important resources for each child and family. While parents are the child’s most important teacher, sharing information about development and learning is a primary way to partner for success. Parents may request a meeting with their child’s teacher or primary caregiver at any time.

**Conflict Resolution**
When a concern arises, please discuss the concern with the teachers first to seek a resolution. If the concern is not resolved, we encourage you to discuss the concern with the director and teachers together to find a resolution. A follow up meeting will be scheduled to make sure the concern is resolved. Every effort is made to provide a respectful and professional environment. Aggressive, intimidating, or abusive interactions toward staff will not be tolerated. The expectation is to respect everyone and support each other in maintaining the NAEYC Code of Ethical Conduct.

**Toilet Training**
Children must be physically, cognitively, and emotionally ready if they are to be successful with learning to toilet independently. The child’s primary caregiver will follow the family’s lead and will partner with the family to make toilet learning a relaxed and successful process that build’s the children’s self-confidence and self-esteem. The process usually begins when children are about 24 months old. Whether a child is potty trained is not a determining factor in moving a child through the Center.

**Biting**
Biting is not uncommon when infants and toddlers respond to the discomfort of teething and when they are beginning to express their strong likes and dislikes. Biting can also occur when children are seeking adults’ attention or when they are adjusting to sharing their space and their materials. Biting occurs most frequently when children’s language is just emerging – it is sometimes their most effective strategy for expressing their emotions.

We wish that biting never happened – but it does. You can be assured that the Center’s staff supervises all children at all times. When working with a child who is using his/her teeth to solve his/her problems, our teachers and caregivers target their efforts to prevent injuries and to change this behavior as quickly as possible.

Teachers model and encourage children to “use their words” to solve their problems. They also model and encourage other appropriate ways to express strong emotions. They may say, for example, “If you are upset you can stamp your feet!” Teachers and administrators also make every effort to work with parents to eliminate this behavior and can suggest methods for changing the biting behavior, books to share with children, etc.

If a child should be bitten these procedures are followed:
- The child who was bitten receives necessary first aid immediately. He/she is comforted and the injury is washed with soap and water.
- The teacher fills out an *Incident Form* describing what happened. It is put in the files of both the child who was bitten and the child who did the biting.
- If the skin was broken, parents of the child who was bitten are called immediately. If the skin was not broken the incident is discussed with the parent(s) when the child is picked up.
- The *NAEYC Code of Ethical Conduct* requires us to carefully maintain confidentiality. That means that when we discuss issues of concern we will share information about your child ONLY with you.

For additional information about biting you may want to review: 
*Dealing with Biting Behaviors in Young Children*
http://ceep.crc.uiuc.edu/poptopics/biting.html#parent

Understanding Children: Biting
http://www.extension.iastate.edu/publications/PM1529A.pdf

Biting Among Toddlers and Twos: Responses to Try
Biting Hurts!

Parent Teacher Organization (PTO)

All parents are encouraged to be a part of the PTO. The purpose of the PTO is to promote the welfare of the children attending the Center and their families; to create closer relationships between the Center; and to support the activities of the Center and its programs. Please speak with the Director or the PTO President for more information. The PTO President can always be reached via e-mail at ChildrenscenterPTO@gmail.com.

PTO meetings will be announced in the minutes and reminder signs will be posted the week before the meeting. PTO information and minutes are available on the bulletin board outside the Director’s office.

PTO Fundraising efforts will always have a specific, announced focus. If families wish to make donations to efforts, such support will be greatly appreciated. All PTO funds are kept separate from general operating funds of the Center and are the fiscal responsibility of the organization. The non-profit status of the PTO and the Center allows all donations to be tax-deductible.

Parent involvement is welcome and we recognize that PTO may not be for everyone. The PTO is organized under the leadership of four elected officers who serve for one year. These positions are President (also serves on the Advisory Committee), Vice President, Secretary, and Treasurer. Parents of any child enrolled at the Center on a full-time basis are eligible for these positions. Other parent involvement opportunities include serving as a Classroom Coordinator and volunteering for special events or projects.

Classroom Coordinator Position Description

The purpose of the Classroom Coordinator is to assist the classroom teachers and parents and enhance communication among all parties while keeping in mind the best interest of all children in the classroom.

Responsibilities include but are not limited to:

- Along with classroom teachers, assist with welcoming new parents and their child(ren) to the classroom
- Assist teachers with special events in the classroom
- Share information about a vacancy in this position and help recruit a new coordinator when your child transitions to another class.
- Attend PTO meetings as schedule permits

Please let your child’s teacher know if you would like to serve in this capacity for your child’s class.

TUITION and FEE POLICIES

Payments to the center may be made by cash, debit card, or check/money order (made payable to Children’s Center at USC), or credit card. Credit cards are accepted for TUITION ONLY, not for any other fees or purchases. The Center is not able to make change for cash payments. Overpayment will be applied to future tuition.
**Waiting Application Fee**
There is a $100.00 non-refundable Waiting Application Fee for families with one child. The fee is $75.00 for each additional child. This fee is non-refundable.

**Registration Fee**
A $100.00 annual Registration Fee is due July 1st of each year for families with one child. The fee is $75.00 for each additional child. Drop In students’ registration is $100.00. Registration fees are non-refundable.

**Activity Fees**
Activity Fees are billed to accounts in the fall for each classroom for the academic year, and again in the spring for the Summer Session. These fees help to defray the costs of classroom art and sensory supplies, cooking supplies, play equipment, science activity supplies, pet and plant care supplies, special events from outside of the Center, and field trips for older children. Activity Fees partially cover these expenses and the Center covers the rest; these fees play an important role in providing a high quality experience for each child.

**K4 Karate**
Karate is a regular part of our K4 curriculum for the academic year. In order to allow parents to spread payment out over time, the karate fee will be billed in two installments; September for the fall semester and January for the spring semester. Karate fees will be included in the Summer Activity Fee for K4 and School-age classrooms.

**Tuition Payment/Late Fees**
All payments are due the Friday before the upcoming week. Credit is not given for sick days or vacation days beyond the 5-day allowance established by the Center’s Governing Board. Tuition is divided by 51 weeks and payment is due on a weekly basis even if the child is absent more than the five days of credit allowed.

**Vacation Credits**
Once a family has paid their second registration fee for full-time enrollment, they will be eligible for five days of tuition-free vacation per child per fiscal year (July 1 – June 30). Families who do not register for the upcoming year (e.g., K4 families or others who are not returning in the fall) are not eligible to earn vacation credit after July 1. Vacation credit does not carry over to the next academic year. Vacation days do not need to be consecutive.

**Returned Check Fee**
A $35.00 charge will be assessed to checks that do not clear the bank due to insufficient funds. If the tuition and the returned check fee are not paid by the specified deadline the account will be turned over to a collection agency and the child will not be allowed to return to the Center. If a family has pattern of returned checks, then it will be necessary for all future payments to be made in cash, by credit card or money order. **The Children’s Center is not responsible for check collecting or bank fees.**

**Late Pick Up**
The Children’s Center at USC closes at 6:30 pm or earlier as scheduled and announced in advance. A $4.00 late fee will be applied for every minute your child remains at the Center after close.

*The current Fee Schedule may be found on our website at [www.wc.edu/childrenscenter](http://www.wc.edu/childrenscenter).*
Children’s Center at USC, LLC
Priority of Admissions and Waiting List Policy

The demand for quality childcare is very high. An insufficient number of quality programs creates tremendous anxiety and hardship on families seeking childcare services. Balancing this demand with our finite capacity, admissions must be made in an impartial and fair manner to all those seeking entrance and with consideration for the strong ties with the University of South Carolina.

Because of support received from University faculty, staff and students, the Priority Admissions schedule has been established as follows.

Qualified students will be admitted with priority from the following priority categories:

- **Priority 1.** Siblings of current, full-time Children’s Center at USC students
- **Priority 2.** Children of full-time USC employees
- **Priority 3.** Children of full-time USC students
- **Priority 4.** All others

Because of factors not controllable by the Center, a family on the Priority 1 list may be accepted before a Priority 2 family as siblings are born regardless of length of time on the list. Four waiting lists are kept, one for each Priority category. The date of acceptance onto each waiting list matters only within each priority category, not overall. Dates are transferrable when a family becomes eligible for a Priority 1, 2 or 3 list as, for example, when one becomes employed by USC, but was entered originally as a Priority 4.

Applying parents must keep their contact information current with the Center. We will attempt to contact an applying family about an open slot with the contact information in our file. We will make two attempts to contact the family with a minimum of twenty-four hours between attempts. The date and time of the attempted contact will be documented in the applicant’s file. If we are unsuccessful in our two attempts to contact a family, we will remove that applicant from the waiting list and move to the next family on the list. If an applicant is successfully contacted, the applicant may defer admission only once to the next available slot, without losing priority. **If a family defers twice, they must re-apply to the waiting list.**

“Qualified students” are those children that meet all other admissions criteria such as age. The Center, at its discretion, may refuse acceptance to any family. Availability of a slot is not guaranteed in any circumstance.

*The Governing Board of the Children’s Center has approved this Priority in Admissions Policy and may change this policy as needed and without notice.*