

**Mountain Brook Baptist
Early Learning Center**

**2023- 2024
Half Day Education Program
Parent Handbook**

Established 1968

Dear Parents,

Welcome to Mountain Brook Baptist Early Learning Center.

This handbook has been prepared to help you better understand our program and answer any questions you might have.

Please know of our sincere desire to provide developmental care in a Christian atmosphere for your child. The Bible states, "Jesus grew in wisdom and stature and in favor with God and man" (Luke 2:52). This verse summarizes the objective of our program. We intend to help each child grow mentally, physically, spiritually, socially and to give your child the loving care and guidance he needs during his formative years. We see each child as a unique individual and strive to instill in each child a positive self image and confidence in their own abilities. Children learn by "doing". When provided with a variety of materials appropriate for their level of development, the child will learn the necessary skills without undue pressure or structure.

Thank you for sharing your child with us. We take seriously the trust you put in us in helping your child develop. We are looking forward to an exciting year.

Please feel free to visit us, ask questions, and make suggestions.

The Director and Staff

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MBB Early Learning Center Half Day Program

Early Learning Center Director.....Carol Bales
803-3495 Carol@mbbc.org

ELC Executive Director.....Sharon Howard
871-0331 Sharon@mbbc.org

ELC Infant Toddler, and 2K Coordinator.....Stephanie Parnell
803-3486 Stephanie@mbbc.org

ELC Coordinator 3K, 4K, 5K.....Cindy Broom
803-3479 Cindy@mbbc.org

Human Resource Coordinator.....Kelly Newberry
803-3490 Kelly@mbbc.org

Receptionist.....Judy Moore
803-3490

Physical Movement 3K, 4K, 5K.....Jasmine Glover

Music Teacher 2K, 3K, 4K, 5K.....Susane Parsons

Spanish Teacher 3K, 4K, 5K.....

S.T.A.R.S. 5K Teacher.....Ginger Edwards
Success Through Academic Readiness Skills

Phone..... (205) 803-3490
Tax I.D.63-1100485
Fax:..... (205) 803-3452
Hours of Operation 9:00am. to 1:00 pm.

Website: www.mbbc.org/elc

Mountain Brook Baptist Church

Senior Minister.....Dr. Wayne Splawn

Minister to Children and Families.....Mrs. Sharon Howard

Church Office Hours: 8:00 am. to 5:00 pm

Church Office Phone Number: (205) 871-0331

Church Fax Number: (205) 803-3452

Church Website: www.mbbc.org

Early Learning Center Board of Directors

ELC Chair: Jennifer Pickett

Hudson Holcomb, Brett Knight, Jansen Voss, Kristen Watson

Learning Objectives

The following are our objectives in working with your children. They will vary depending on age and ability of each child.

Spiritual

To help the child-

- Grow in the knowledge of God; God's love and God's care.
- To know that Jesus is God's son; to feel that Jesus is a special friend; to know ways Jesus helped people; to want to be like Jesus.
- To think of the Bible as a special book and learn some Bible stories and verses.
- To think of the church as a special place where we learn about God and Jesus.

Mental

To help the child-

- Develop language skills through everyday activities that develop into reading when the child is ready.
- Learn about people and the world around us.
- Learn to follow instructions.
- Growth in creativity.
- Engaging experiences which will lead to success in mathematics.
- Develop reasoning, thinking, and problem solving skills.

Physical

To help the child-

- Develop large and small motor skills.
- Establish good health rules.
- Learn and follow simple rules of safety.

Social

To help the child-

- Grow in the ability to work and play with others.
- Respect personal rights of others.
- Develop an attitude of kindness, cooperation, courtesy, and helpfulness.
- Experience a positive introduction to an educational environment.

Emotional

To help the child-

- Build a healthy self-esteem and feeling of self-worth.
- Build mutual respect, trust and love between children, teacher, and parents.
- Develop a love of learning through provision of daily activities that are success oriented.
- Develop personal attributes of self control, responsibility, initiative, and independence.

Program Philosophy

The Bible instructs us to "Train up a child in the way he should go, and when he is old he will not depart from it." (Proverbs 22:6). We believe that the foundation of the ministry of Mountain Brook Baptist Early Learning Center is to meet the individual needs of each child through providing loving and Christ-centered care.

We believe that an environment should be established and a curriculum developed that will allow for, and encourage, each child to explore, discover, and develop in all areas: cognitive, physical, social, emotional, self-help and spiritual.

Hours of Operation/Early Drop Off and Late Pick Up

The ELC Board of Directors has the authority to close the center as deemed necessary due to unusual circumstances.

The Half Day program will be open from 9:00 AM to 1:00 PM. A late fee for each child will be charged each time the parent is late picking up the child.

- For late pick ups of up to 3 times monthly a fee of \$5.00 will be charged for the first 10 minutes. After that, \$1.00 per minute will be charged.
- For late pick-ups of 4 times or more monthly the fees will be doubled and the Board of Directors notified. The fees will be due at the beginning of the following week.

Security System

In an effort to continue to provide the highest quality of safety for your child, our Center has implemented a new security system. Each family will be issued an individualized security fob/card upon enrollment.

Tuition and Other Fees

Tuition rates are based on the child's age as of **September 1st** and do not change as the child ages throughout the year. Rates are effective throughout the entire school year. Classes are assigned and referred to by age group and name as listed below. Prorated August tuition and May tuition is due in August, along with activity fees. Field trip fees for 4K and 5K are also due in August. Regular monthly tuition will be paid September-April. Tuition payments can be made via the school website through Headmaster using a credit card or check. **We do not advise using a credit/debit card to avoid a convenience fee charged by your financial institution.** Checks or cash may also be turned into Kelly.

<u>August 2023 to May 2024</u>		<u>Tuition Rates</u>	<u>Activity Fee</u>
6 weeks to 11 months	2 days	\$275.00 month	\$110.00
6 weeks to 11 months	3 days	\$325.00 month	\$110.00
12 months to 24 months	2 days	\$305.00 month	\$110.00
12 months to 24 months	3 days	\$345.00 month	\$110.00
Two years old	2 days	\$295.00 month	\$135.00
Two year old	3 days	\$345.00 month	\$135.00
Three year old	3 days	\$340.00 month	\$160.00
Three year old	4 days	\$390.00 month	\$160.00
Four year old	5 days	\$395.00 month	\$160.00
5K	5 days	\$515.00 month	\$160.00

Tuition (continued)

Tuition must be paid in full regardless of services rendered but not used due to sickness, vacation, or other circumstances. Discounts are not given to families with two or more children in the center. Tuition and other fees may be raised at the discretion of the Director and the MBBC Board of Directors. Families will be notified in writing regarding any changes in tuition or other fees.

Due date of tuition payments.

- Monthly payments of tuition are due on the 1st and are delinquent at 1:00 pm. on the 10th.

The center does not issue bills for payment, thus payment is due at the above stated time. A \$10.00 late fee **per child** for each week missed after due date will be charged on all delinquent accounts. No refunds will be given for services rendered but not used. Accounts payable from a personal bank draft are still accountable for all late fees

regardless of reason. Accounts that become 2 weeks delinquent after the due date will be subject to the child's dismissal from the program.

Return Check Fees and Credit Card Convenience Fees

There will be a \$35.00 return check fee on all returned checks. The fee is due upon notification or a \$10.00 late fee per week will apply. Cash payments may be required with excessive returned checks.

Convenience fee charges are applied to anyone using a card paying on Headmaster. This includes a debit or credit card.

Other Associated Fees

- The **annual registration fee** is due at the time of registration for each school year.
- **4K/5K Field Trip Fee**-The field trip applies to the children in the 4K and 5K classrooms. The children will go on several field trips in the year and parents are asked to volunteer to drive. The fee for the field trips is separate than the activity fee and covers the admission or activities for the field trip. The sign up form for parent chaperones will be in the classroom during the 1st week of school. Some field trips have a limit on the number of parents who can attend due to seating.
- The **activity fee** is an annual fee due each year. The activity fee includes a class picture taken in the spring. It also helps to offset the expense of creative art supplies, curriculum based materials, and special events.

Wee Learn: A Bible Based and Developmentally Appropriate Guide to Teaching Young Children

Mountain Brook Baptist Early Learning Center uses the Wee Learn Curriculum Guide published by Lifeway Christian Resources. It is a Bible based and unit based curriculum to aid teachers in building an early childhood program that allows children to grow and develop as Jesus did—in “wisdom and stature” and in “favour with God and man” (Luke 2:52). A child's growth and development is viewed as a process, not an event. Development begins when the child is conceived and continues throughout life. Therefore, the Wee Learn curriculum provides a range of activities which are designed to meet the needs of children at their developmental level along the growth continuum. The Wee Learn curriculum also provides guidance and activities in each unit to help each child develop language, pre-reading, pre-writing, and other foundational skills appropriate to his or her stage of development.

Physical, mental, emotional, social and spiritual development is interrelated. The Wee Learn Curriculum was developed around units which provide opportunities for all children at all ages to learn about God, Jesus, the Bible, the church, self, family, others, and the natural world. Experiences which encourage physical, mental, social, emotional, and spiritual development are included under each unit topic. Each teacher provides a lesson plan each week with activities that will meet the individual and small group needs and interests of the children in the class.

Each unit includes a Bible story, Bible verses, and Bible thoughts. Examples of units from the Wee Learn Curriculum include: I am Growing, I Can See and Hear, Taste, Touch and Smell; We Have Friends at Church, I Love My Family; My World Has Many Colors and Shapes, My Community Has Helpers; We Have Fun with Friends and We Thank God for Water. Easter and Christmas time are a very special time of year for the center. We recognize the secular celebrations for both. However, at school we concentrate on Christmas being Jesus' birthday and learning about the Nativity through books, songs and art. Easter is celebrated by focusing on spring and new life.

Each unit also includes concepts that are to be emphasized. For example in the unit, I Am Growing, concepts emphasized are: I can be happy at school; I need help to do some things; I can play with my friends; Jesus had friends, and I can do things all by myself. In addition to our Bible based Wee Learn Curriculum we also study other units. Some of which include: Getting to Know You, Outer Space, Transportation, Farm Animals, Shapes and Colors, Numbers and Letters, Circus, Science and Nature and Seasonal Units.

Each curriculum guide provides the developmental characteristics of the specific age. It is intended to enable the teacher to fully understand the correct expectations for the age group being taught. Each guide also includes information on: building self-esteem, guiding behavior, planning for instruction, establishing a daily routine, and teaching through learning centers.

Mountain Brook Baptist Early Learning Center believes that the "Early Years are Learning Years," therefore providing the teachers with an age appropriate and developmentally appropriate curriculum is key to helping young children learn. The Wee Learn Curriculum guide is available for parents to view in the classroom each day and we hope that you will encourage its teachings at home.

Animal Island-A Four Year Old Supplemental Curriculum

In addition to the Wee Learn curriculum, MBB-ELC uses **Animal Island** in the 4K classrooms. Animal Island is an emergent reading program used to teach pre-reading skills to children preparing them to enter Kindergarten. The children are highly involved in the stories as they learn the alphabet and most common letter sounds. Animal Island teaches all of the concepts and skills children need to learn from beginning reading programs. It also integrates listening, speaking, reading and writing.

The children study two kits made up of two giant, colorful books. Each book contains pages that are oversized and interactive. Kit one includes Letters of the Alphabet and includes the books Animal Island and Letter Island.

Kit one stimulates children through the use of animal characters. Its major concepts are:

- | | |
|---------------------------------|--|
| *Directionality and Position | *Upper and Lower Case Letter Recognition |
| *Color Identification | *Letter Discrimination |
| *Name and Character Recognition | *Alphabetical Order |
| *Pattern and Shape | *Function of Letters |
| *Left-to-right Movement | |

Kit two includes Sounds and Letters that concentrate on Talking Letters and On to Storyland. This kit teaches the sounds of 12 letters and letter combinations, and how to blend them together to make words. Major concepts in this kit are:

- | | |
|--|--|
| *Letters have sounds | *Punctuation |
| *Names begin with capital letters | *Spaces are left between words |
| *Words are read from left to right | *Some letters have more than one sound |
| *Written words consist of meaningful arrangements of letters | |

Through the use of teacher instructed discussion, the children will also learn basic comprehension skills, including character identification, recall of events, description, sequence, cause and effect, and interpretation of motive. Each week the children will add to an alphabet book which covers the letters they studied that week. This book is an excellent way for parents to reinforce learning at home. Used together, Wee Learn and Animal Island provide the children with a comprehensive and developmentally appropriate curriculum. The children move into Kindergarten prepared with the skills necessary for success.

Handwriting Without Tears

4K and 5K Curriculum

The Handwriting Without Tears program is a leader in providing easy-to-learn, easy-to-teach, developmentally appropriate, and inclusive materials to preschool and elementary students throughout the U.S. More than two million students learned to write successfully using the Handwriting Without Tears curriculum. The Get Set for School™ preschool program is used by thousands of public and private preschools to develop handwriting and other school readiness skills.

HWT uses fun, entertaining, and educationally sound instructional methods to teach handwriting to all students: pre-k through cursive. The Pre-K Get Set for School™ program introduces school readiness activities for young children of all ability levels.

Through music, movement, building, coloring, and multisensory activities, children have fun as they develop important skills:

- Language Proficiency
- Color and Shape Awareness
- Fine and Gross Motor Control
- Letter and Number Recognition
- Counting Abilities
- Social Skills

IMPORTANCE OF HANDWRITING

Handwriting is an essential skill for both children and adults (Feder & Majnemer, 2007). Even in the age of technology, handwriting remains the primary tool of communication and knowledge assessment for students in the classroom. The demands for handwriting are great, whether in the classroom or beyond. A 1992 study (McHale & Cermak) found that 85 percent of all fine motor time in second-, fourth- and sixth-grade classrooms was spent on paper and pencil activities. A more recent study (Marr, Cermak, Cohn & Henderson, 2003) noted that kindergarten children are now spending 42 percent of their fine motor time on paper and pencil activities.

The addition of handwritten components to many state standardized assessments and of a handwritten essay to the College Board SAT in 2005 further emphasize the importance of handwriting. Furthermore, good handwriting is important long after graduation. In *Script and Scribble* (2009), Florey writes in reference to handwritten job applications, “Like it or not, even in our machine-driven world, people still judge you by your handwriting.”

Research literature extensively documents the consequences of poor handwriting on early literacy and academic performance. Children who experience difficulty mastering this skill [handwriting] may avoid writing and decide that they cannot write, leading to arrested writing development (Graham, Harris and Fink, 2000). Handwriting is critical to the production of creative and well-written text (Graham & Harris, 2005) affecting both fluency and the quality of the composition. Illegible handwriting also has secondary effects on school achievement and self-esteem (Engel-Yeger, Nagakur - Yanuv & Rosenblum, 2009; Malloy-Miller, Polatajko & Anstett, 1995).

Handwriting instruction must adhere to developmental principles to ensure success for all children. According to the National Association for the Education of Young Children (NAEYC), newborn to eight-year-old children learn best from methods that are consistent with developmentally appropriate practice (1996). However, due to a

general lack in professional development in the area of handwriting, educators are not always aware of the specific objectives to be addressed at various grade levels. Educational guidelines often are limited to one standard, “produces legible handwriting” in the English/language arts standards. When students fail to meet this standard, teachers have no means for examining which skills are lacking. Meanwhile these students are experiencing all the negative effects of poor handwriting.

Seeing the need for a more specific analysis of skills, Handwriting Without Tears and a team of occupational therapists and educators has developed a set of comprehensive Handwriting Standards for kindergarten through grade 4+. We hope these will serve as an example to educators and curriculum decision-makers and bring increased attention to this crucial, yet often overlooked, area of education

Alabama Standards for Handwriting:

Kindergarten

- Exhibit knowledge of the conventions of print.
- Becoming aware of spacing in words and sentences
- Differentiating letters from words
- Recognize and name upper- and lower-case letters.
- Write upper- and lower-case letters.

Additional Curriculum Support

In addition to the Wee Learn Curriculum, Chapel will be held weekly for 2 year old classes and daily for 3K, 4K, and 5K classes. Movement and music classes are held once a week and are included in the tuition. Field trips are scheduled for the 4K and 5K classes, September-May. These activities require an added cost to be paid in full before the first outing. Each parent signs a consent form at the time of registration for transportation provisions.

The children in the 3K, 4K, and 5K classes have Spanish each week, September-May, which is included in the tuition amount. The classes are developmentally appropriate and will be taught in accordance with the Wee Learn Curriculum.

Physical Activity

Each child shall have an opportunity to participate in active play each day. Active play will take place outside on the appropriate playground or indoors dependent upon appropriate weather conditions. Children will have the opportunity to participate in 30 minutes of playtime each day. Daily schedules of physical activity will be posted in the classroom. Infants will have opportunities in the classroom for physical development on a daily basis according to each child's development.

Screentime/Computer Usage

Screentime is the use of television, videos, video games, and computers. Screen time in the classroom via an iPad with educational games is offered as a free choice and limited to 15 minute increments. Videos during meal or snack time are prohibited. Special activities (ex: educational books) will be limited to less than 2.5 hours per week and/or only used in situations deemed necessary for educational support or ratio monitoring purposes. Screentime for children under two years of age is prohibited.

Enrollment

Enrollment is open to children 6 weeks to 5 years old. ALL CHILDREN must be registered and have on file the required forms prior to attending the program. The required forms include but are not limited to medical forms completed by the child's pediatrician, a current immunization form, and a listing of approved family members or friends who have permission to pick up the child. Any special arrangements must be communicated in writing to the Director in advance.

Enrollment will not exceed room capacity unless necessitated by an emergency. Enrollment of children with special needs will be at the discretion of the ELC Director and the Board of Directors.

The center accepts applications throughout the year, which are filed according to the received date of the application. MBBC members and siblings of current students receive priority status on our waiting list. Registration and enrollment are completed on a yearly basis for all classes in the center. When a space becomes available within a year, it will be occupied with the next child on the waiting list in that age group.

Parental input and communications, as well as the well being of the children are always our top priority. However, as we prepare for the new school year and class assignments, please understand that special requests for teachers will not be honored.

Withdrawal

WRITTEN NOTICE of withdrawal must be given to the Director at least 2 weeks prior to the last day of attendance in order to receive a credit of the May tuition deposit on the final tuition.

Field Trip Chaperones

Parents are notified in advance of the field trip and transportation is provided by parents. Drivers are responsible for the students in your care during a field trip. Therefore,

younger siblings are not allowed to attend field trips. All 4K and 5K children should wear their school t-shirt on field trips.

Parents who wish for their child to use a car seat are responsible for discussing this issue with the parent who is carpooling their child. The Half Day program is not responsible for making sure car seats are installed.

Teaching Staff/Classroom Ratios/Teacher Training

All class groups are based on age as of September 1st:

All employees have the appropriate training and expertise to teach and care for the children. While DHR's regulations only require the ELC to have one person with a current Pediatric CPR and First Aid Certificate in the center at any given time, it is the ELC's goal that the majority of the ELC be certified in both CPR and First Aid. In addition, the Director selects appropriate training courses and conferences for the staff to attend for continued education throughout the year.

6 weeks to 11 months	1:4
12 months to 24 months	1:6
2K	1:8
3K	1:11
4K	1:12

*An aide is provided for classes over ratio.

The MBB-ELC Board of Directors has the authority to extend these ratios based upon the needs of the center.

Conferences

Parent-teacher conferences may be held at any time if the need arises. Meet the Teacher will be held at the beginning of the year to orient you to the ELC and your child's new classroom. Age appropriate assessments will be sent home in the fall and spring for the 2, 3 and 4 year old classes. Individual conferences will be held in the fall and spring for the 4K families to discuss their child's progress. Individual conferences will be held in the spring for the 3K families to discuss their child's progress. If it is not possible to meet for a conference with your child's teacher, please set a mutually convenient time with the teacher for a phone conference.

Disciplinary/Guidance Practices

Discipline is handled in a developmentally appropriate way. Giving positive verbal rewards encourages acceptable behavior. This reinforces a child's good feeling about his/her behavior and serves as an example to the other children to act in such a way as to receive this praise. Asking a child to stop and think about his/her unpleasant behavior enables the child to work at self-control.

Removal from the group for a period of "time-out" is a tactic used for a child who continually demonstrates unacceptable behavior. This time-out is not a punishment, but rather a time when the child may calm down, remember what behavior the teacher is asking for, and decide for him or herself when he/she is ready to rejoin the group with appropriate behavior. Corporal punishment is not an accepted method of dealing with young children's behavior. Children will not be hit, slapped, or spanked in any manner while attending this center. If behavior problems persist, the parents are asked to a conference to discuss what may be helpful in motivating their child to behave in an acceptable way. It may be suggested that the child be involved in a behavior modification program, with the parents having the option of being involved in the process.

In instances of biting we take the following steps beyond the above discipline practices. First, we give immediate attention to comfort and care for the bitten child. After we have cleaned the wound and the child is comforted, we explain to the biter that it hurts the other child when he bites him, show him the bite mark and tell him, "You may not bite." We then gently remove the biter from the group temporarily, but do not embarrass or humiliate him. The parent of the child who was bitten will be informed unless the bite breaks the skin at which point the parent of the biter will be called. If the biting problem continues and proves to be a problem for the class, the following steps are taken: We will keep a staff person within arms length of the biter at all times to stop the action as soon as it becomes apparent that it will occur. Children usually bite due to frustration or stress. We study the environment to see what leads to the biting incident. We try to change the environment to lessen the frequency of incidents. If we can find nothing within the environment to cause the continued behavior, we ask for an appointment with the parents to discuss possible solutions. If after studying the child, talking with the parents, and following the steps outlined above, the problem continues to put the other children at risk, we may ask that the child be removed from the center until the child is evaluated and, if necessary, counseled for aggressive behavior.

Policy on Handling Problems/Complaints

The procedure for handling problems or complaints from teachers and parents will be as follows: Speak directly to the Coordinator for your child's age group concerning the problem at hand. The Coordinator will address the complaint with proper people. The Coordinator will report back to the parent or teacher within five working days. The Coordinator will report any problems to the ELC Director at once. If for some reason the parent or teacher voicing the complaint is not satisfied with the response of the Coordinator, the person voicing the complaint may put it in writing to the ELC Director, who will address the issue with the Director of Children's Education and Family Ministries. The Director may call a meeting of the Board of Directors if needed. The person voicing the complaint may also be asked to put the complaint in writing to the Chairman of the Board of Directors. If a parent is also a member of the Board of Directors, they must follow the same chain of command in reporting and resolving conflicts.

Transportation

Children in the 2K-5K classes will use carpool. Carpool will take place daily from 8:45AM to 9:00AM and from 12:45 to 1:00PM. You will be furnished with a list of children by classes to help you arrange a carpool riding group. When bringing or picking up your child, please follow the instructions on the map. Please keep your carpool number on your rear-view mirror when picking up.

Students enrolled in the 6 weeks-24 month classes:

- Should be walked to their class by their parent.
- The church parking lot off Overbrook Road is designated for this purpose. Please do not park in the fire lanes.
- Walk your child to their class by entering the CLC gym door. Proceed up the steps to the classroom or you may use the elevator.
- If you have a carpooler, please drop them off first and then bring your youngest child in. If you are picking up a carpooler, please pick up your youngest first.

Please remember that siblings are not allowed in the classrooms due to health reasons.

All enrolled children:

- Please have your child at school between 8:45AM and 9:00AM. Please do not leave your child in the room before 8:45AM as the teacher is busy preparing for the day.
- If you have a specific need, contact the Coordinator for your child's age group.

- **If you do not arrive during morning carpool (8:45-9:00AM) you must walk him/her into their classroom.** If you do not arrive during afternoon carpool (12:45-1:00PM), you will need to pick up your child at the Full Day lobby and a late fee will apply.

Health Requirements

A health history form must be completed and signed by your child's pediatrician prior to entering the center. It is recommended that all children have a thorough physical exam completed by their pediatrician prior to entering the center. All children must be able to participate in all activities in the center. Our center is not equipped or staffed to supervise individual children who are not able to participate in all of the daily activities.

***Please notify us of any special conditions that your child may have which require attention (i.e. glasses, hearing aids, asthma, visual/hearing problems, allergies or developmental delays).**

Certificate of Immunization

No child will be admitted to the center without an Alabama blue/Imprint certificate of immunization with a current expiration date. This form can be obtained from your pediatrician and must be kept current. There is a 10 day period after the expiration date to submit a new immunization form. **After the 10 day period, children will not be able to attend until a new form is received.** Parents will receive written notice of expiration in advance.

Smoking Policy

The ELC is a smoke- free facility. All ELC staff and parents are prohibited from smoking on the premises of the Mountain Brook Baptist Church. Any staff member who smokes before, during a lunch break or after work hours will not be allowed to return to work in clothing that smells of smoke.

Emergency Medical Treatment

In the event of an accident or illness, parents will be notified immediately. If the center is unable to locate the parents or emergency contact person (s), the child will be taken to their personal pediatrician or to the nearest emergency room.

Medicine

It is the policy of the Half Day program not to administer medicine of any kind to children while at school unless necessitated by an emergency and medical documentation. Children with food or other allergies who need emergency medications (i.e. Benadryl, Epi-Pens) should leave these items with the Coordinators and be kept up to date. They should be available to the center at all times. A doctor's note necessitating the need of this medicine is required. Designated staff may administer an Epi-pen during an emergency situation. Each child with an Epi-pen will be evaluated on a case by case situation and if necessary, the Epi-pen will be kept in a combination locked box in the safety backpack carried by the teacher when leaving the classroom. A parent must complete an Authorization to Administer Medication Form in order for the Half Day personnel to administer medication. Medications will be securely locked in a cabinet. Parents who wish to pick their child's medication up should ask for it from the Coordinators. Parents must adhere to the following guidelines for Emergency Medications:

- Any prescription must be in its original container and clearly labeled with the child's first and last name and directions for administration on the drug, the name and telephone number of the pharmacy, date the prescription was filled and the doctor's name.
- Medications will not be shared among siblings. Each child must have their own prescription.
- Medications with changing doses must have a doctor's note upon change.
- All medications and completed forms will be given to the Director or designated person, for storage. Meds will be administered by a coordinator or the director with the exception stated above on a case by case situation.
- Parents must provide a legible dispenser, cup or dropper, for each separate medication with which to administer the medication. Medication should be placed in a plastic bag.

****Do not add medications or vitamin products to bottles or juice cups brought into the center.**

Food Allergies

It is the policy of this center to respect the needs of children with severe and medically documented food or dairy allergies. Therefore, our center is a “nut free” center. Food with nut items, and those cooked with peanut oil are strictly prohibited. Parents of children with dairy allergies should send suitable replacements for their child on party or special event days.

Food substitutions will not be made for individual children except for documented medical reasons. Written documentation from a doctor is required for allergies to specific food items. Parents of children with documented food allergies need to be aware that Mountain Brook Baptist Early Learning Center (“ELC”) will take reasonable precautions to prevent children with allergies from coming in contact with allergens. However, there may be occasions when a child inadvertently comes into contact with an allergen.

Parents understand that the ELC does not guarantee a completely allergen free environment. In consideration of the benefit of having their child attend the ELC, and other good and valuable consideration, parents have chosen to allow their child to attend the ELC and waive any claims that they may have against Mountain Brook Baptist, the ELC, and their employees due to their child’s inadvertent exposure to allergens.

Potty Training

Potty training is an important and developmentally appropriate issue. We will work closely with parents to insure readiness and proper timing. We will begin helping young children learn proper bathroom habits **when they reach the Two year old classroom and show signs of readiness.** Children entering the 3 year old class are highly encouraged to be potty trained before the school year begins.

Illness

A routine daily health check will be done on all children as they arrive. We are not staffed to supervise individual children. When we have a sick child in isolation, we are unavailable to attend to the rest of the center. Please make every effort to pick up your child within 30 minutes. A late fee will be applied after the half- hour elapses. A fee of \$5.00 for the first 10 minutes will be charged. After that a \$1.00 per minute fee will apply. Children who appear with:

- Severe coughing, breathing trouble, yellowish skin or eyes, lethargy or frequent scratching of the skin will not be allowed to stay at school.

- Children with **fever** will not be admitted to the center and must be fever free (without fever reducing medication) for a period of 24 hours before returning to the center. We consider 100.0 degrees or higher as a fever.
- Children with a **rash** cannot return to the center until it is diagnosed and determined non-contagious by the child's pediatrician. A written notice from the child's pediatrician must accompany the child upon returning to school.
- Children must be free of **vomiting and/or diarrhea** for 24 hours after the last bout. Diarrhea is defined as having unusually frequent, involuntary stool loss and consisting of mostly water. A doctor's note stating the child is not contagious may be required before returning to school.
- Children with **chicken pox** cannot return to the center for five to seven days after the blisters appear. All blisters must have scabbed over. When a communicable disease has been introduced to the center such as chicken pox, the Director will notify the parents in writing.
- Children with **hand, foot and mouth** disease may return to the center when they meet the fever policy. Blisters that continue to form or have not healed may require a doctor's note stating the child is not contagious before returning to school.
- Children with **strep throat** may return to the center 24 hours after antibiotics have begun, as long as they meet the fever policy.
- Children with bacterial **conjunctivitis (pinkeye)** may return to the center 24 hours after treatment has begun. There are 2 types of infections, bacterial and viral. Children who return to school with drainage after treatment may be asked to obtain a doctor's note stating the child is not contagious.
- Children with **thrush** may return to the center 24 hours after beginning treatment.
- Children with **lice** may return to school after being treated with lice controlling medication such as R.I.D. and with essentially no nits left in the hair. The child will also be checked before entering the classroom and for two weeks after the initial incident. A doctor's note may be required before entering the center.

Nutrition

The ELC provides one snack each day. All food served meets the USDA recommendations. Water is available at each meal and only 6oz of 100% juice is served for children over 12 months of age. When milk is provided at snack it will be with 1% fat for children ages 2 and up. Children under 2 years old whose parents wish for larger quantities of milk/juice should provide enough drinking cups with milk/juice for the day. Drinking cups will not be washed at school and must be taken home each day.

Monthly snack menus will be posted on the ELC bulletin board.

Formula and Baby Food (children less than 1 year old)

- The parent is responsible for providing an adequate supply of pre-mixed bottles and formula (plastic bottles only please) and baby food. Clearly label all bottles and baby food containers with child's first and last name. Please let the teacher know if your bottles are breast milk.
- Used milk, formula, and baby food cannot be kept overnight for future use.
- Please inform your child's teacher of any special feeding instructions and of the time of your child's last bottle or meal.
- Parents should inform the teacher if the bottle is breast milk. Labeling it as such is helpful.
- All bottles must be pre-mixed prior to coming to the center and taken home each day.
- If any breast milk/formula bottles are spilled or cannot be used due to spoilage or power outages, the parent will be called to bring more bottles.
- Do not add any medicines to baby bottles.

Children older than 1 year old

Each student should bring a nutritious lunch daily based on USDA guidelines. All classes will eat in their classroom. Children in the 12-24 month age group will begin to sit at tables and chairs. A personal lunch container is preferred. Sending food your child can eat by him/herself is recommended. If you must bring grapes, they should be cut in half; hot dogs must be cut long ways then diced. A beverage in an unbreakable container should be sent along with the lunch. *Please remember that lunches will not be refrigerated nor can they be heated. All leftover food will be discarded daily.*

- Since there is not a breakfast program, **all children must finish their breakfast prior to coming to the center.**
- Children are served a morning snack each day.
- Everyone eats between 11:00AM and noon so please make sure your child's lunch is here by that time if it is forgotten.
- All children will eat with their classmates and teachers, thereby learning desirable social conduct. Children are encouraged but not forced to eat.
- **The following food items are not allowed: peanuts, nuts, popcorn, gum, hard candy, carbonated drinks.**

Dress Code

Please dress your child in comfortable, easy to clean clothing. We prefer the children wear tennis shoes so they may run and play freely. Be mindful when dressing your child in shoes other than tennis shoes as we do not want their play to be hindered in any way. Please make sure that your child has an appropriate change of clothes in their bag,

according to the season. **We do not allow the children to wear boots, Crocs, flip flops or clogs due to safety reasons.** Parents may be called to bring a change of shoes for the child.

Infant Rest Time

Soft materials such as pillows, blankets, loveys or other gas trapping items are not allowed in the crib. Infants younger than 12 months will be placed on their backs to sleep. Positioning devices are not allowed in the crib. Infants who can easily turn over after being placed on their backs will be allowed to adopt their own sleeping position.

Birthdays

Please make arrangements in advance for your child's teacher to celebrate a birthday. All parties will take place in the classroom. You may bring (nut free, peanut oil free) cupcakes, cookies, doughnuts, etc. as a special snack. You may bring party plates and napkins as well. Please do not bring any candles, decorations, balloons or party favors. Please check with your child's teacher for special instructions or food allergies. Special guests (clowns, princesses) are not allowed. Gifts for the birthday child are at the discretion of the parents. All children in the birthday child's class should be invited. Children from other classes will not be allowed to come to the party unless the whole age group is invited. Children with summer birthdays may choose to celebrate with a "pretend" date.

Seasonal Parties

Seasonal parties will be held at the appropriate time. Parents are asked to sign up in their child's class to help supply food items or drink items. Sign up sheets will be in your child's class the first week of school. Children are not required to participate but will remain in the classroom during these special times. Listed below are the seasonal parties held each year:

- Fall Festival-October
- Happy Birthday Jesus-December
- Valentine's Day- February
- Easter-March/April
- End of the year-August

Toys and Personal Belongings

We strive to provide adequate developmentally appropriate toys and activities for all of the children. There will be special share days provided in some age groups assigned by the teachers on which the children may bring a special toy from home to share with his/her friends. Please do not allow your child to bring any toys on other days that are not designated as such. Please be mindful of the things your child may pick up and bring into school each day such as coins, small toys, jewelry, or other toys that may be choking hazards as we do not allow them in the center. In addition, we do not allow toys such as guns, swords, plastic knives, etc. in the center. The center is not responsible for lost, broken or stolen items.

We understand that some children may have a security blanket or stuffed animal with which he/she likes to sleep. It is unsafe for them to carry such an item throughout the day.

Divorce/Non-Custodial Parents

It is the responsibility of the custodial parent to inform the ELC, in writing, of any change in the rights of persons previously authorized to pick up the child. The ELC will follow all court papers regarding custody but bears no responsibility for keeping up with custody and/or visitation arrangements between parents. If the visitation arrangement between the parents requires alternating custodial rights (e.g., each parent has the child every other weekend), such that ELC employees could have difficulty remembering which parent has the child on which weekend, the custodial parent must notify the ELC on each and every day that the non-custodial parent has the right to pick up the child. A non-custodial parent will be allowed to pick up or visit the child only with the written permission of the custodial parent. In the event of a divorce, all parents who signed the original registration papers remain responsible for tuition and fees. Any provisions to the contrary are up to the parents to work out. The ELC will continue to look to both parents for payment.

Inclement Weather/Emergency Procedures

In case of inclement weather, the center will follow the Mountain Brook School System Policy which recommends that children are not released to anyone until the storm warning has been lifted. If someone insists on taking a child during the warning, they will be asked to sign a release form. Any closing will coincide with the Mountain Brook Schools unless it is after school hours. Evacuation procedures are posted in each room in the center. All parents, guardians, or emergency contacts will be notified by phone and/or email if the center closes in the middle of the day. Parents are asked to monitor severe weather and stay close to their phones so that you may be easily contacted in case of closure.

- Fire Alarm:** Evacuate according to the posted fire drill procedures which include the East Entrance of MBBC under the Porte Cochere or the South Entrance Porte Cochere. If children are unable to return to school parents will be notified and asked to pick up their child at Mountain Brook Jr. High School Gymnasium.
- Gas Leak:** Follow the evacuation plan for fire safety.
- Tornado Drill:** Seek shelter in the designated locations posted in the classroom.
- Power Outage:** Close the center if the outage is two hours or longer.
- Water Shortage:** Close the center if the shortage is two hours or longer.
- Snow/Ice:** Follow Mountain Brook Schools plan as stated above.
- Earthquake:** Follow emergency plan posted in the classroom. Drop, cover, and hold on! Parents will be notified.

Emergency Lock Down- Should an event arise that deems it necessary for the school to participate in a lock down operation all doors leading inside the ELC will be locked. Teachers will be instructed to remain in their classrooms with the children until further notice. An email and/or phone call will be made to alert the parents. Parents will not be allowed to enter the school without permission from the Director and with photo identification.

Structural Damage

Should structural damage occur to the ELC building or other areas closely connected the children will be moved to a safe place within the church building or to a designated area of the parking lot. Parents of the ELC children will be notified to pick up their children if necessary.

Flood Damage

Should the ELC building or connected floors retain flood waters, the children will be moved to a safe place within the church building. The parents of the ELC children will be called to pick up their child if necessary.

Emergency Medical Treatment- In the event of a severe accident or illness, parents will be notified immediately. If the center is unable to locate the parents or emergency contact person(s), the child will be taken to their personal pediatrician or the nearest emergency room.

Personal Supplies

- The parent is responsible for providing an adequate supply of bottles. Please bring plastic bottles only. All bottles must be labeled with the child's first and last name. Parents should bring at least 1 clean sippy cups daily. NO medications may be sent in bottles/Sippy cups.
- The parent is responsible for providing an adequate supply of baby food. Clearly label all food jars. Baby food will be served from separate bowls in order to avoid waste and contamination. Unused baby food can be saved for a later feeding that day but must be taken home at the end of the day.
- Parents are responsible for providing an adequate supply of disposable diapers and baby wipes. Cloth diapers are not allowed.
- Be sure your child has at least one change of clothes. Infants should have 2 or more changes of clothes at the center that is appropriate to the season. Accidents happen, regardless of age. Please label each article of clothing with the child's first and last name.
- All personal items must be clearly and permanently labeled. Please check these items from time to time as even permanent markings wear off. The center is not responsible for lost, stolen, or broken items.

Ways Parents Can Help

- Make sure your child has a good night's sleep and a nourishing breakfast or bottle before arrival. Monitor your child's health daily before bringing him/her to school.
- Know your child's teacher. Work with her concerning any problems that may arrive. Confer with her about your child; however, refrain from doing so in his/her presence.
- Schedule all conferences with your child's teacher at mutually agreeable times. Do not engage in lengthy conversations with them during times when she will be caring for other children in the class or during carpool.
- Do not engage in lengthy conversations with other adults or teachers during carpool. Safety of the children is top priority and distractions should be minimal.
- Report any special or upsetting experiences which you think will help the teacher to better understand your child.
- Establish in your child a wholesome, friendly attitude toward the teacher.

- Take time to read your child's daily notes, which are located in the Communication Folder, and discuss his/her daily experiences with real interest. The daily notes should remain in the folder for the week. Communication folders should remain in your child's tote bag or backpack. Please use these to send messages to your child's teacher. **At the end of the week please remove all papers from your child's folder.**
- Teach your child self-reliance by encouraging him/her to do things for him/herself, allowing him/her plenty of time.
- Teach your child his/her full name, age, address, and phone number.
- Do not permit siblings to go into the other child's room when picking up or dropping off your children.
- Notify the Coordinator or Receptionist of any changes in your address, phone number or release information.
- If you have concerns or problems, please notify the Director or your child's Coordinator.

Policy for Prevention of Communicable Diseases

Name of Child Care Center: _____

Address of Child Care Center: _____

Common Communicable Diseases

No employee shall be allowed to work while having an illness diagnosed by a health practitioner due to:

- Norovirus
- Hepatitis A virus
- Shigella spp.
- Enterohemorrhagic or Shiga Toxin-producing Escherichia coli (STEC)
- Salmonella Typhi
- Nontyphoidal Salmonella (NTS)

Detection of Illnesses

In order to control the spread of communicable diseases in the child care center, it is important that the caregiver recognize illnesses early. Isolate the child immediately and contact a parent or guardian so the child can be removed from the center as soon as possible. Staff should be alert to the following symptoms:

1. Severe coughing
 - a) Child gets red or blue in the face
 - b) Child makes high-pitched croupy or whooping sound as he coughs
2. Breathing trouble—especially important in an infant under 6 months old
3. Yellowish skin or eyes
4. Pinkeye/Conjunctivitis—tears, redness of eyelid lining, irritation, followed by swelling and discharge of pus
5. Unusual spots or rashes
6. A lesion such as a blister, boil, pustule or infected wound that is open or draining
7. Feverish appearance
8. Lethargy
9. Diarrhea
10. Vomiting
11. Unusual behavior
 - a) Child is cranky or less active than usual
 - b) Child cries more than usual
 - c) Child feels general discomfort or just seems unwell
 - d) Child pulls at ears
 - e) Child has difficulty swallowing
12. Frequent scratching of the body or scalp
(may be a sign of scabies).



JEFFERSON COUNTY
DEPARTMENT OF HEALTH

Nutrition Policy

Name of Child Care Center: _____

Address of Child Care Center: _____

- All food served in Child Care Center shall comply with USDA recommendations for Meals and Snacks.
- Water shall be available at all meals and snacks
- No sugar sweetened beverages shall be served to children.
- Only 100% juice
 - No more than 6 ounces per day
 - Only served at meal or snack time
 - Only for children over 12 months
- Milk with 1% or less milk fat for children 2 years and older (unless medical documentation is provided for child)
- Food items that shall be served at least once a week
 - Orange vegetable- for vitamin A
 - Dark green vegetable- for iron, Vitamins A and C, and fiber
 - Legume- for protein, iron, B vitamins
- At least half of grains served each week shall be whole grains
- Menus shall be
 - Posted in view of parents and food preparation staff
 - Prepared at least 2 weeks in advance
- Special diet needs and food allergies shall be kept on file in food preparation areas and in the children's seating area
- Documentation of amended menus must be corrected in writing and any substitutions shall be of equal nutrient value.

Director of Child Care Center: _____

Date: _____



JEFFERSON COUNTY
DEPARTMENT OF HEALTH

Physical Activity Policy

Name of Child Care Center: _____

Address of Child Care Center: _____

- Each child shall have an opportunity for the appropriate amount of active play each day. Active play shall take place outdoors when weather and environmental conditions permit. When the weather and/or environment do not permit outdoor activity, active play shall take place indoors.
 - 3 yrs and older (preschool children) - At least 90 minutes per 8 hour day
 - 12 months to 3 yrs - At least 60 minutes per 8 hour day
- **Infants to 12 months** - caregivers shall make provisions for the promotion of physical development on a daily basis, including varied activities appropriate to each child's development.
- Daily schedules including physical activity time shall be prominently posted in each classroom.
- Children who exhibit out of control behavior during active play may be given a time-out of no longer than 5 minutes. Children cannot be made to remain indoors or seated as punishment for earlier classroom behavior.

Director of Child Care Center: _____

Date: _____



JEFFERSON COUNTY
DEPARTMENT OF HEALTH

Screen Time Policy

Name of Child Care Center: _____

Address of Child Care Center: _____

Screen time is the use of television, videos, video games, and computers

Screen time shall be:

- Offered as a free choice
- Limited to no more than a total of 2 ½ hours per week
- Prohibited during meal or snack time
- Prohibited for children younger than 2 years

Computer use shall be limited to no more than 15 minute increments, except for school age children completing homework.

Daily schedules including daily screen time shall be prominently posted in each classroom.

Director of Child Care Center: _____

Date: _____



JEFFERSON COUNTY
DEPARTMENT OF HEALTH

Smoking Policy

Name of Child Care Center: _____

Address of Child Care Center: _____

Smoking is prohibited:

- At all times in Child Care Centers—including before and after hours of operation
- Within 10 feet of any entrance or exit
- In any vehicles used by centers to transport children
- Within sight of the children

"No Smoking" signs shall be posted in facilities and vehicles used to transport children

If a staff member consumes cigarettes before the work shift begins or during a break away from the child care center premises, the staff member shall be required to wash his or her hands thoroughly. Staff and volunteers should avoid bringing cloths that smell of smoke into the building, or onto the playground.

Director of Child Care Center: _____

Date: _____



JEFFERSON COUNTY
DEPARTMENT OF HEALTH

Employee Health Policy

Name of Child Care Center: _____

Address of Child Care Center: _____

No employee shall be permitted to work at the CHILD CARE CENTER while experiencing any of the following symptoms:

- Vomiting
- Diarrhea
- Jaundice
- Sore Throat with Fever
- A lesion containing pus such as a boil or infected wound that is open and draining and cannot be covered

All employees shall report such symptoms to their CHILD CARE CENTER supervisor and shall not return to work until symptoms desist.

Any employee diagnosed with a communicable disease that can be transmitted by foods or other means or who is a carrier of organisms that cause such a disease shall not be allowed to work in a CHILD CARE CENTER in any capacity in which there is a likelihood of such person transmitting disease to other persons.

Common Communicable Diseases (The Big "6"):

- Hepatitis A virus
- Norovirus
- Shigella, spp.
- Enterohemorrhagic or Shiga toxin-producing Escherichia coli (STEC)
- Salmonella Typhi
- Nontyphoidal Salmonella (NTS)

Director of Child Care Center: _____

Date: _____



JEFFERSON COUNTY
DEPARTMENT OF HEALTH

Communicable Disease Chart for Alabama's Schools and Childcare Facilities

Exclusions contained in this chart pertain to children and students only.

	Communicable Disease or Condition	Signs and Symptoms	Exclusion and Readmission Recommended Criteria	
Gastrointestinal	Diarrhea	Frequent loose or watery stools compared with normal pattern, abdominal cramps, fever, generally not feeling well	Exclude until no diarrhea for 24 hours. Exclude until stools are contained in the diaper or the child is continent, stool frequency is no more than 2 stools above child's normal frequency.	 <p>Notifiable Disease Reporters</p> <p>Communicable diseases noted in red are reportable. Communicable diseases noted in black are not reportable unless associated with an outbreak.</p> <p>An outbreak is defined as two or more similarly ill persons who live in different households and have a common exposure.</p> <p>Alabama Department of Public Health 2000 6th Floor Montgomery, AL 36103 Phone: 205-357-3373 Fax: 205-357-3374 Email: alabamapublichealth.gov/infectiousdiseases All unvaccinated persons should be excluded until vaccination received or risk of transmission is over.</p>
	Jaundice	Yellowish discoloration of the whites of the eyes, skin, and mucous membranes	Exclude for 7 days after onset of illness	
	Vomiting	Nausea, vomiting, or cramping	Exclude until no vomiting for 24 hours or until the individual provides medical documentation that the cause is not infectious	
	Campylobacteriosis (Campylobacter)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.	
	Clostridium difficile Infection	Mild to moderate diarrhea, possible nausea, abdominal cramps, low-grade fever	Exclude until symptom free* for 48 hours.	
	Cryptosporidiosis (Cryptosporidium)	Acute non-bloody diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea	Exclude until symptom free* for 24 hours. Restrict recreational water activities (e.g., swimming, splash pad, water slide, etc.) for 2 weeks after symptom resolution	
	Cyclosporiasis (Cyclospora)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours	
	Giardiasis (Giardia)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, foul-smelling stools associated with anorexia, flatulence, malaise, weakness, nausea, vomiting, low grade fever, and abdominal distention	Exclude until symptom free* for 24 hours. Restrict recreational water activities (e.g., swimming, splash pad, water slide, etc.) for 1 week after symptom resolution.	
	Hepatitis A Infection	Loss of appetite, fever, abdominal discomfort, nausea, fatigue, headache, dark brown urine, or yellowing of skin or eyes; young children less than 6 years of age may be symptom free	Exclude for 7 days after onset of illness. Individuals with known infection, but no symptoms should be excluded for 7 days after collection date of positive test.	
	Hepatitis E	Jaundice, fatigue, loss of appetite, nausea, fever, abdominal pain, and/or dark (tea-colored) urine	Exclude until symptom free* for 2 weeks after illness onset. Contact precautions recommended for diapered child for duration of illness.	
	Listeriosis (Listeria)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.	
	Norovirus Infection	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Exclude until symptom free* for 48 hours	
	Rotavirus Infection	Acute onset of vomiting and/or watery diarrhea, possible vomiting, fever, abdominal pain, loss of appetite, dehydration	Exclude until symptom free* for 24 hours	
	Salmonellosis (Salmonella non-Typhi)	Mild to severe diarrhea; may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours	
	Sapovirus Infection	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Exclude until symptom free* for 48 hours	
Ears, Nose, and Throat	Shiga toxin-producing E. coli Infection (STEC or E. coli shiga toxin-producing)	Acute diarrhea (often bloody); may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-8374.	
	Shigellosis (Shigella)	Loose, watery stools with blood or mucus; may have additional symptoms such as fever, headache, convulsions, or abdominal pain	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-8374.	
	Typhoid/Paratyphoid Fever, Salmonella Typhi, Paratyphi	Sustained fever, may have additional symptoms such as weakness, stomach pain, headache, diarrhea or constipation, cough and loss of appetite	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-8374.	
	Cold Sores (Gingivostomatitis)	Fever, irritability, sores in mouth, gums, or lips	Exclude children/student who do not have control of oral secretions and until sores have healed	
	Common Cold (Multiple viruses)	Sore throat, runny nose, coughing, sneezing, headaches, and body aches	Exclude until symptoms subside and exercise droplet precautions.	
	Mononucleosis (Mono, Epstein-Barr Virus)	Fever, sore throat, swollen lymph nodes, fatigue	Exclude from contact sports and consult physician for clearance to participate in sports.	
	Mumps	Swelling of one or more of the salivary glands, headache, low grade fever, and myalgia, anorexia and fatigue	Exclude for 5 days after onset of swelling. Without vaccine history, one should be excluded for 21 days after onset of swelling of most recent case	
	Pink Eye (Bacterial or viral conjunctivitis)	Red/pink itchy, swollen eyes; eye discharge, possible light sensitivity; and/or eye pain	Exclude if child/student has a white or yellow drainage coming from the eye or eye pain and until evaluated by a physician	
	Strap throat and Scarlet fever (Streptococcal pharyngitis)	Strap throat; Fever, red sore throat, swollen glands, strawberry tongue (occurs following peeling of a white coating from tongue) Scarlet Fever: A very fine raised rash (feels like sandpaper) is present on the neck, chest, elbow and groin	Exclude until 24 hours after beginning appropriate antimicrobial therapy and no longer have a fever	
	Influenza (Flu, seasonal)	Fever, chills, body aches, cough, runny or stuffy nose, sore throat, headache, and/or myalgia	Exclude until fever free for 24 hours and child is well enough for routine activities	
Respiratory	Pertussis (Whooping Cough)	Runny nose, sneezing, low grade fever, and mild to occasional cough; a pause in breathing may be noted in infants with coughing spasms; Pertussis is known for uncontrollable, violent coughing which often makes it hard to breathe	Exclude until 5 days of recommended antibiotics, or 21 days from onset of cough for those who do not take antibiotics	
	Tuberculosis Pulmonary	Fatigue, significant weight loss, fever, night sweats, cough that may produce blood, and chest pain; children may have no symptoms	Exclude until public health evaluates and provides notification that child/student is released to return to school or childcare facility. No exclusion for latent TB infection.	
	Chickpox (Varicella-Zoster Virus)	Itchy fluid filled blisters that begin on face, chest, and back then spreads to the rest of the body.	May return when rash has crusted or, in immunized people without crusts, until no new lesions appear within a 24-hour period. Without vaccine history, one should be excluded for 21 days after rash appears' for most recent case.	
Skin and Rash	Fifth disease (Human Parvovirus, erythema infectiosum)	Facial rash that can be intensely red with a "slapped cheek" appearance, fever, fatigue, myalgia, headache, a systemic macular-lace like and often pruritic rash on trunk that moves peripherally to arms, buttocks, and thighs	No exclusion is necessary if the child/student is healthy enough for routine activities because the period of contagion occurs before rash is evident.	
	Hand, foot, and mouth disease (Coxsackievirus)	Fever, sore throat, poor appetite, vague feeling of illness, skin rash, flat or raised red spots usually on the palms of hands, soles of feet and may appear on knees, elbows, bottom, or genital area; may experience diarrhea and vomiting	Exclude until child/student is free of fever for at least 24 hours.	
	Head Lice (Pediculosis)	Itching of the head and neck; visible crawling lice in the hair	Exclude until first head lice treatment is completed.	
	Impetigo (Staphylococcus aureus) or Group A Streptococcus	Rash anywhere on the skin but most often on the face, lips, arms, or legs; that spread to other areas; itchy blisters filled with yellow or honey colored fluid that oozes then dries and crust over.	Exclude until 24 hours of treatment has been initiated. Lesions on exposed skin should be covered with watertight dressing.	
	Measles (Rubella)	High fever, red eyes, runny nose, and cough; a rash appears 3 to 5 days after initial symptoms	Exclude until 4 days after rash appears. Without vaccine history, one should be excluded for 21 days, after rash appears' of most recent case.	
	MRSA (Methicillin-resistant Staphylococcus aureus)	Bump or infected area that is red, swollen, painful, warm to the touch with or without pus and drainage; common sites are legs, buttocks, groin, back of the neck, sites of skin trauma, such as cuts or abrasions	Exclude only if skin lesions are draining and cannot be completely covered with a watertight bandage.	
	Ringworm (Fungal infection, tinea dermatophytosis)	Fungus that may affect skin on almost any part of the body as well as finger and toe nails; ring shaped, itchy, red, scaly, rash, may develop; there may also be cracked skin and hair loss if the infection develops on the scalp	Exclude until after treatment begins. Cover lesions with waterproof dressing.	
	Roseola (Human herpes virus 6)	High fever, red raised rash which appears once fever has resolved	Exclude until fever is gone and other rash illnesses have been ruled out.	
	Rubella (Rubella virus, German Measles)	Low grade fever (less than 101) and rash that starts on the face and spreads to the rest of the body	Exclude until 7 days after the rash appears. Without vaccine history, one should be excluded for 21 days after rash appears' of the last case in the outbreak.	
	Scabies (Sarcoptes scabiei)	Intense itching especially at night; pimple or tiny blister-like scaly rash which may affect much of the body, common in between fingers, and around wrists, elbows, armpits, and knees	Exclude until 24 hours after prescribed treatment has been completed.	
	Shingles (Herpes zoster, varicella zoster virus)	Painful rash on one side of the face or body; blisters form and typically scab over in 7-10 days; fever, headache, chills, and upset stomach	Exclude only if sores cannot be completely covered by a bandage or clothing; if not, exclude until sores have crusted and are dry.	
	Strep Throat (Group A Streptococcus)	Fatigue, fever, stiff neck, lack of appetite, chill, headache, nausea, vomiting and irritability	Exclude until after 24 hours of initiation of physician treatment. Public health will advise regarding management.	
Invasive	Meningococcal Disease (Neisseria meningitidis)	Fever, chills, confusion, stiff neck, lack of appetite, fatigue, myalgia, limb pain and sometimes a rash.	Exclude until child has been on antibiotics for at least 24 hours	
	Pneumococcal Disease (Streptococcus pneumoniae)	Ear infection, fever, ear pain, chills, behavior or appetite changes, ear redness or drainage	Exclude until at least 24 hours after beginning antibiotic therapy. Close contact with other children should be avoided.	
References: Control of Communicable Diseases Manual, 26th Edition, 2015. American Public Health Association. Managing Infectious Diseases in Childcare and Schools: A Quick Reference Guide, 4th edition, 2017. American Academy of Pediatrics. Red Book: 2018 Report of the Committee on Infectious Diseases, 31st edition. American Academy of Pediatrics.				©2018 Alabama Dept. of Public Health

Mountain Brook Baptist Early Learning Center Parent Handbook Agreement

I, _____,
whose child(ren) _____ is/are
enrolled in this current school year, have received a copy of the Parent's Handbook.
I have read and understand the policies and guidelines as described in the
handbook, and I agree to abide by them.

Signature of Parent

Date