



# Child Development Center Handbook for Families





**Thank you for choosing St. Joseph Child Development Center as your childcare provider.**

We know that you have many choices, and we are honored that you have chosen our program!

Often, in the world of childcare, there seem to be two types of programs- high quality “preschool” settings that operate on a “school” schedule, and year-round “daycare” settings that meet the needs of working families with longer hours and fewer closures. At St. Joseph Child Development Center, we believe that a program can do both! We strive to provide a high-quality early childhood program that also meets the scheduling needs of working families!

The information presented in this handbook does not replace agency policies and procedures. The handbook, rather, is a summary of important information about the St. Joseph Child Development Center. Should you ever have any questions about any aspect of our program, please feel free to ask the Director.

\*In this handbook, the word “family” is used to refer to the legal parent(s) or guardian(s) on file for the child.

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# St. Joseph Children's Home

## HISTORY

St. Joseph Children's Home was established in 1849 and moved to the Frankfort Avenue campus in 1885. St. Joe's began as a traditional orphanage run by local Catholic parishes to serve children whose parents were dying in disease epidemics, struggling due to financial panics, or were no longer able to care for them. By the 1970s, the Ursuline sisters who had run the home for many years were no longer able to continue. Shortly after, the home began to take care of children from the state and began hiring social workers. Over the years the mission of our Residential and Therapeutic Foster Care programs has evolved to caring for children who have been removed from their homes due to severe abuse and neglect.

In 1981, St. Joseph Children's Home added a third core program, the St. Joseph Child Development Center. The CDC is a childcare program serving families who need childcare during the traditional workday. Since it began, this center has enjoyed both rapid growth and an excellent reputation in the community. The center now has 18 classrooms and serves more than 200 young children and their families each school year!



## PURPOSE STATEMENT

We provide inclusive and compassionate care to ensure a safe home and bright future for every child in our diverse community.

## CORE VALUES

### CARING

We display kindness and concern for each other.

### COMPASSION

We practice empathy to best understand the experiences of those around us.

### RELATIONSHIPS

We are committed to deepening our connection with our families.

### TEAMWORK

We value the impact of collaborative action in service to others.

St. Joe's became licensed as a Behavioral Health Services Organization in 2020 to provide individual and family therapy, case management and community support services on an outpatient basis. These services are aimed at improving emotional wellness through evidence-based and trauma-informed mental health therapy for individuals of all ages.

## PURPOSE STATEMENT AND CORE VALUES

Posted throughout our building, you will find our purpose statement and core values.

Everything we do at St. Joseph Children's Home is driven by inclusivity and diversity, compassion and kindness, relationships and connections, and teamwork and service! We hope that you and your child feel those values in action each time that you enter our building!



## PICNIC

On the second Saturday in August (and the Friday night before) of every year, the St. Joseph Catholic Orphan Society holds its one major fundraising event, The St. Joseph Orphan's Picnic. The Picnic provides substantial subsidized funding each year for the Child Development Center. Tuition paid by families does not cover the full costs of staffing, supplies, overhead expenses and food for the center. For us to maintain high quality care, we need the support of the Picnic.

CDC families are strongly encouraged to volunteer for a minimum of two hours working in booths on those days to help raise these vital funding dollars. If you are interested in helping at the picnic, let the Director know!

## Campus Safety

Campus safety and security begins at the front door. Staff, children and families enter St. Joe's via the dedicated CDC entrance located on the west side of the building using their assigned electronic key fob. To maintain safety, we ask that families and staff NOT allow others to "shadow in" behind you at the front door.

Visitors to our building must be screened before entering, be buzzed in by the receptionist, and sign in using our Visitor Check-In Kiosk. The kiosk will print a dated photo-badge for each visitor.

Families may use several other doors to exit the building; however, all doors remain locked to the outside at all times.



## KEY FOBS

Upon enrollment, each family is assigned 2 key fobs that permit access to the CDC entrance Monday through Friday during drop off (7 a.m. - 10 a.m.) and pick up (2 p.m. - 6 p.m.) hours.

Fobs are turned off from 10 a.m. - 2 p.m. daily for increased safety. Families may gain access to the building during those hours by ringing the doorbell and presenting a photo ID at the front desk.

In the event of a lost, broken or malfunctioning key fob, please notify the CDC office staff immediately. Replacement fobs will be provided for a small fee. Additional key fobs for grandparents or other approved pick-up persons can be obtained for a small fee as well.



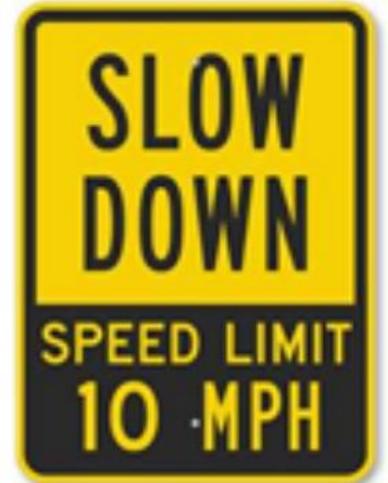
## ELECTRONIC SURVEILLANCE

St. Joseph Children's Home is protected by electronic surveillance inside our classrooms and outside the building. Families can submit a request to view available video by emailing the CDC Director. Requests will be reviewed by the CDC Director and/or agency leadership and will be evaluated on a case-by-case basis.

## VEHICLE SAFETY

To ensure the safety of our children, we ask that families adhere to the following vehicle safety expectations:

- 10 mph speed limit on our grounds
- The use of seat belts and/or child car seats are required by law while driving to and from school.
- All cars should be locked, and the engine should be turned OFF when unattended. Keys cannot be left in a car while the vehicle is unattended in the parking lot.
- Children may not be left in a vehicle without an adult at any time.



## LOBBY SAFETY

To ensure the safety of ALL children, we ask that families not leave siblings unattended in the lobby. **All children, even older siblings not enrolled in the program, must be supervised at all times.**

## EMERGENCY DRILLS / EMERGENCY PROCEDURES

We practice a variety of safety drills with our staff and children, including but not limited to fire drills, intruder drills, earthquake drills, tornado drills, etc. Drills are performed at regularly scheduled times throughout each month as per policy and regulations. Each classroom has posted by the classroom door emergency evacuation routes. In the event of an actual emergency, families will be notified of all important information via the Brightwheel App.

**A SPECIAL NOTE ABOUT INTRUDER DRILLS-** Discussing intruder drills (or lock down drills) with small children is difficult. Teachers in our 2–5-year-old classrooms have access to a book called “Why Are We Having a Lockdown Drill?” An extra copy is available in the Director’s office for parents to view if desired. Staff are asked to use this book as a guide for how to answer children’s questions about intruder drills. If questions from children arise. **We discourage staff from using the words “hiding from bad guys” as this is frightening to children.**

## TOBACCO-FREE

St. Joe’s is a tobacco-free campus. The use of tobacco products of any kind is not permitted anywhere on campus at any time.

# The Child Development Center

St. Joseph Child Development Center (CDC) provides childcare and preschool services to children ages 6 weeks old through the pre-Kindergarten year. The center is licensed by the Commonwealth of Kentucky Cabinet for Health and Family Services. At least once annually, the center is inspected by the Division of Regulated Childcare's Office of Inspector General. A written report of inspection, including any plan of correction, is available for families to review.

The center is also accredited by the Council on Accreditation (COA) and rated by the KY ALLSTARS quality improvement program.

**We are proud to be a 4-STAR CENTER!**



## OUR PHILOSOPHY

The Child Development Center program at St. Joseph Children's Home is built on the following beliefs that are based in current research and best practices in early childhood education:

- Children are competent, capable, and full of wonder.
- Children deserve a safe, supportive environment that encourages them to use their natural sense of wonder to explore, ask questions, and construct and expand their knowledge of the world around them.
- Children need experiences that are appropriate for their development level that allow them to practice their current skills and abilities while being gently challenged to further develop.
- PLAY is the most powerful method in which children learn and gain meaning from their environment.
- Children develop into strong, independent, self-confident, caring individuals when given opportunities to stimulate their growth (socially, emotionally, physically and intellectually) within the context of respectful, loving relationships with adult caregivers.
- Children deserve to be treated with respect.
- Discipline should be positive and based in love and instruction, not fear or punishment.
- Children and families deserve an environment that is open, welcoming and committed to fostering, cultivating and preserving a culture of equity, diversity and inclusion.



The CDC program offers nurturing, professional care for children and is designed to help children develop a strong sense of self-worth.

The CDC uses an emergent style curriculum that is based on the interests of the children in each classroom, tapping into their passions and curiosities. While children are exposed to academic concepts, the focus of the program is on early childhood development, especially social and emotional skills that are essential to preparing children for the intense academic demands of kindergarten.

The CDC staff provide children with a warm, secure environment, filled with love, good physical care, and an atmosphere for learning. CDC Leadership continually works to improve the center by implementing evidence-based best practices and by seeking input from families to ensure that the program effectively meets their needs.



## DIVERSITY, EQUITY AND INCLUSION

St. Joseph Children’s Home is committed to fostering, cultivating, and preserving a culture of diversity and inclusion. SJCH embraces and encourages differences, whether they are in age, race, color, religion, religious creed, sex, disability, ethnicity, family or marital status, gender, gender identity or expression, language, ancestry, national origin, citizenship, physical and mental ability, political affiliation, race, religion, sexual orientation, socio-economic status or background, veteran and military status, points of view or any other characteristics that make our staff, children, and families unique.



The Child Development Center at St. Joseph Children’s Home supports the right of every infant and young child and their family to participate in our program. At the CDC, staff strive to provide the highest quality program possible and to make the center a comfortable place where all staff, children, and families feel a sense of belonging.

## CLASS SIZES AND RATIOS

At St. Joe's CDC, it is our goal to meet best practice standards in staffing ratios, as defined by the Council on Accreditation (COA), KY AllStars, and the National Association for the Education of Young Children (NAEYC). We make enrollment decisions based on recommended ratios. There are times when we must use higher ratios due to staff illness or other circumstances. At no time will St. Joe's CDC exceed the ratios defined by Kentucky childcare regulations. When age groups are combined, the ratio is determined by the youngest child in the group.

	<b>St. Joe's CDC Goal</b>	<b>KY Regulation</b>	<b>NAEYC / KY ALLSTARS and COA</b>
<b>Infant</b> (0-12 months)	1:4	1:5	1:4
<b>Young Toddler</b> (12-24 months)	1:5	1:6	1:6
<b>Older Toddler / 2</b> (18-36 months)	1:6	1:10	1:6
<b>Preschool</b> (30 months - 5 yrs)	1:8 up to 1:10	1:14	1:10

## STAFF QUALIFICATIONS & TRAINING

St. Joe's is proud of our long teacher tenure in our CDC. Our most tenured staff have 10-40 years of experience at St. Joe's! All staff members are at least 18 years old and have a minimum of a high school diploma or equivalent. Beginning August 2025, all senior level teachers will have a Child Care Credential CDA or higher. Staff without advanced education or training are encouraged to work toward a CDA or associate's degree in early childhood education. All staff receive at least 15 hours of Early Childhood Education training annually. All center staff receive **basic training** in CPR and First Aid, and they are given the opportunity to be **certified** in CPR and First Aid as well.



## Enrollment

At St. Joe's CDC, equal opportunities are available for all children, without regard to race, color, creed, national origin, sexual orientation, gender, age, ethnicity, religion, disability, marital status, special needs, family/provider political beliefs, or any other consideration made unlawful by federal, state or local laws.

Enrollment is at the discretion of the center and is based upon the best interests of the child, the expectation that they will benefit from the program, and the welfare of other children enrolled. The director reserves the right to implement a trial period and/or temporary adjusted schedule for a child while determining if the center can meet the needs of the child. If the center cannot meet the family's need for care, the center will provide an explanation and can provide appropriate referrals upon request.

St. Joe's CDC accepts children from age six weeks through the pre-kindergarten year. Enrollment is based on the availability of space. A waiting list is kept for interested families when space is not available. Prior to enrollment, families are offered a tour of the center and are given important information about the center. Tours are given by appointment only.

## WAITLIST

If a family's enrollment request cannot be honored immediately due to lack of space, the family can opt to be placed on a waiting list. The Director will provide the family with current information about the estimated length of the waitlist, but no guarantees about enrollment will be made. To be placed on the waitlist, families submit a one-time non-refundable application fee.

When a space becomes available in one of our classrooms, the Director or Assistant Director will contact families on the waiting list to determine if the family is still interested in enrollment. Priority is given first to families with siblings already enrolled in the program, employees of St. Joe's, and St. Joe's foster families, then to other families on the waiting list in the order that they joined the list.

If a family chooses to pass on an opening, they can remain on the waitlist and should update their desired start date.

If a family chooses to accept the opening offered, they are responsible for payment of the annual enrollment and supply fee upon acceptance. This fee is nonrefundable should a family decide later to forfeit their spot. Tuition is due no later than 2 weeks after the date the opening becomes available, even if the child is not yet attending. Space cannot be held for a family for more than 2 weeks without payment. Failure to begin payment of tuition 2 weeks after the spot is available is considered forfeiture of the spot.



## ADMISSION

When a family accepts an opening, the admissions process begins. The family and child(ren) may wish to tour the center again and be introduced to staff. Families can schedule such visits with the Director or Assistant Director. When possible, the Director or Assistant Director will meet with the family for an orientation to the center, review the CDC handbook and enrollment agreement, and answer any questions.

Admissions paperwork is due no later than the first day of attendance, but preferably several weeks prior to attendance. This includes the Enrollment Agreement, required consent forms, any necessary medical forms, and completed enrollment forms for the federal food program. A current Commonwealth of Ky Immunization Certificate and proof of a well-child checkup within the past year must be submitted within the first 30 days of attendance.

An Enrollment Agreement remains on file at St. Joe's as long as the child is enrolled at the center. Child files are kept confidential and are available for inspection by the family at any time. New enrollment forms are completed each year during registration, as long as the child remains enrolled in the center. Enrollment information must be kept current. If information changes during the year, the family is required by state law to update the information in writing. Email is acceptable for written changes, or families can make changes directly in their Brightwheel profile.

## TUITION AND FEES

Current tuition and fees are posted on the SJCH website and are posted at the CDC front desk. Tuition amounts increase as our costs rise.

It is important to note that although the CDC calendar runs August to August, like a school year, St. Joseph Children's Home operates on a January to December budget year. Tuition is set and approved annually by the Board of Directors of St. Joseph Catholic Orphan Society in December. Thus, **any changes to tuition rates occur each year in JANUARY**. St. Joe's gives families at least a 30-day notice of rate changes when they occur.

A few important notes about tuition and fees:

- The one-time application fee, per child, is paid upon application to the program.
- The annual enrollment and supply fee, per child, is assessed upon enrollment the first year, and each year thereafter upon registration for the following year (usually in March or April).
- Families with more than one child at the center will receive a family discount of \$20 off per week.
- Weekly tuition is drafted each Monday via ACH withdrawal. All ACH returns will incur a fee.
- All accounts must remain current. An account more than 2 weeks behind on payment is cause for dismissal from the center.
- All tuition rates are for full-time care 5 days a week.
- Weekly fees are not adjusted for absences or holidays.
- Flexible Spending Account verification forms are available for families electronically.
- Year-end statements are provided annually for all families by the end of January.

## SUMMER ENROLLMENT

Many families inquire about un-enrolling their child for the summer months. Due to staffing and budget demands, if a family chooses to un-enroll for the summer, the CDC cannot guarantee that a space will be available the following August. The Director tries to match families who want the summer off with a new family that wants to start earlier than August. In these cases, families may “switch spots” with Director approval. However, such arrangements are not always possible.



## TERMINATION OF ENROLLMENT AGREEMENT

The Enrollment Agreement between a child’s family and the Center may be terminated by either party at will.

If at any time, a child’s family chooses to terminate the enrollment agreement, the child’s family must notify the CDC Director in writing (e-mail is acceptable and preferred) not less than two weeks prior to the date attendance will terminate. Verbal notices are not accepted. The final two weeks’ tuition will be billed as scheduled. If a child will not attend during the two-week notice period, fees are still due and payable.

The CDC Director reserves the right to discharge a child from the center with a 5-day notice to the child’s family (unless there is an immediate safety concern that the center cannot meet) for any of the following reasons:



- The family breaches or fails to observe any of the terms and provisions of the enrollment agreement.
- The family defaults on payment of any or all tuition and fees.
- The family expresses ongoing and highly critical input about the Center, its staff or operations and creates a hostile work environment.
- The child’s behavior threatens the physical or emotional wellbeing of one or more of the other children or staff at the Center.

# General Program Information

## HOURS OF OPERATION

St. Joe's is open Monday through Friday, year-round. Our normal hours are 7 a.m. – 6 p.m.

From 7-8:30 a.m. and from 5-6 p.m., children of similar age may be combined in assigned “early” and “late” rooms.

7 a.m. – 6 p.m. is a long day for young children. We maintain these hours of operation to accommodate a variety of work schedules for families. We do not recommend that children be at the center for more than 9 hours a day.

## HOLIDAYS

The CDC closes in observance of the following holidays\*:

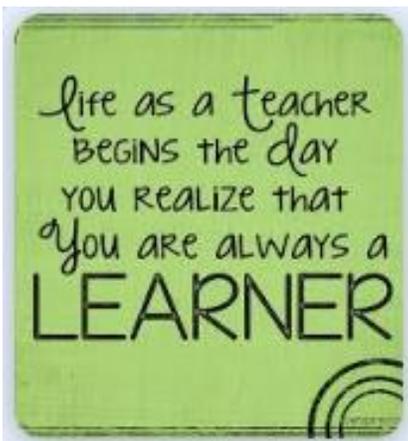
- New Year's Day
- Martin Luther King Jr Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Day after Thanksgiving
- Christmas Eve
- Christmas Day

\*If a holiday falls on a weekend, the center will be closed the Friday prior or Monday after the holiday. Tuition is not reduced for holidays.



## PROFESSIONAL DEVELOPMENT DAYS

The CDC closes for five additional days in August for professional development and/or teacher workdays. It is typically the Wednesday, Thursday and Friday before the second Saturday in August, and the Monday and Tuesday that follow. The Director will alert families to the actual calendar dates for closing each year in the Director's newsletter.



The remaining professional development day is held on Presidents Day (in February). Families are reminded in the Director's newsletter in advance of the closure date. There is no reduction in tuition for these closure dates.

## EARLY RELEASE DAYS

The CDC closes at 4 PM 1 day per month for professional development for teachers. Dates for early release days are given to families in August for the entire school year via the Newsletter.



## WEATHER / EMERGENCY CLOSINGS

In the event that weather or other emergency prevents safe operating of the CDC, the CEO of St. Joseph Children's Home will determine if the center needs to open on a delayed schedule, close early, or close for the day. The center makes every effort to be open as scheduled. If changes to the schedule are necessary, the Director makes every effort to notify families, via the Brightwheel app, by 6 a.m. of a delayed schedule or closing, and by 2 p.m. of an early closure. ***St. Joe's CDC makes an independent decision. We do NOT follow JCPS.***

## GENERAL CLASSROOM EXPECTATIONS

While every classroom at St. Joe's CDC is unique based on the age and development of the children and the personalities of the children and staff that make up the class, there are quality expectations to which all our classrooms are held accountable.

### **Supervision**

Staff are expected to maintain supervision of children at all times, keeping all children within their scope of both sight and sound. Staff perform a name-to-face visual attendance check to make sure that all children are accounted for multiple times throughout the day, especially before, during and after moving to and from the classroom.

### **Relationships and Transitions**

St. Joe's believes that children thrive best with consistent, predictable care provided by consistent caregivers.

We organize our program to minimize changes in placement of children to allow for the development of meaningful relationships with caregivers.

Most of our children stay in the same classroom for an entire year with the same set of caregivers. The transition of children into new classroom groupings occurs only at times when deemed absolutely necessary (e.g., start of the new school year, when an infant or toddler ages out of their current placement and needs a more developmentally appropriate space, or when a conflict exists that necessitates a change in placement).



## Attendance expectations

- Families are encouraged to establish consistent hours of attendance, as routine and continuity help children feel secure.
- Children are to be checked in to Brightwheel and in their classrooms by 10 a.m., unless they are preapproved for a late arrival.
- If you know that your child is going to be absent, please let your teachers know in Brightwheel. They worry about their little ones when they don't come to school!

## DROPPING OFF

**Drop off is 7 a.m. - 10 a.m.** daily. Children who arrive prior to 8:30 a.m. are dropped off in an assigned “early room” for their age group. During “early room” time, if children from different age groups are combined, room staffing ratios are always decided based on the youngest child in the room.

When dropping off, please take the following steps:

1. Check your child(ren) in using the Brightwheel app on your phone OR the black tablet kiosk at the front desk.
2. ***Check in requires a signature in the app. Do not close the app until you have signed!***
3. Speak to the classroom staff. Eye contact and a verbal exchange that a child is arriving ensures the safe transfer of responsibility from family to staff.



## LATE ARRIVAL PROCEDURES

Late arrivals should be rare and only for medical or other appointments that cannot be rescheduled. Please note the following procedures for late arrival:

- **Notify the CDC office team of a planned late arrival by emailing [CDC-late-arrival-request@sjkids.org](mailto:CDC-late-arrival-request@sjkids.org)**
- **DO NOT USE BRIGHTWHEEL MESSAGING FOR LATE ARRIVALS.**
- **Notification should be sent no later than the close of business day, the day prior to the late arrival.**
- In the email, tell us the child's name, classroom # or teacher's names, date and reason for the late arrival, and the expected arrival time.
- We understand that life happens! Every family is allotted one "free pass" late arrival per school year that is unplanned. After that, families will be turned away after 10 a.m. If your child has an early morning appointment, it is always best to get on the late arrival list just in case things run late, so you don't use your free pass unnecessarily!
- Standing appointments (like weekly therapy, etc.) can be sent to us once and put on repeat.
- 11:30 a.m. is the morning cutoff for late arrivals. No children will be admitted from 11:30 a.m. - 2 p.m.
- If your child needs to be picked up and brought back to the center after an appointment, the above expectations apply. Please note that children cannot be dropped off between 11:30 a.m. - 2 p.m. If you cannot get back to the center before 11:30, we ask that children eat lunch and nap at home and can return to the center between 2-3:30.
- 3:30 p.m. is the absolute latest a child can be dropped off due to staffing changes that begin at 3:30 p.m. each day.



## ARRIVAL TIMES SUMMARY

7:00 AM – 10:00 AM	Regular drop off
10:00 AM – 11:30 AM	Late drop off with prior approval
<b>11:30 AM – 2:00 PM</b>	<b>NO DROP OFF</b>
2:00 PM – 3:30 PM	Late drop off with prior approval
<b>3:30 PM – 6:00 PM</b>	<b>NO DROP OFF</b>

## PICKING UP

When picking up, allow time to gather child(ren) and belongings and exit the center by 6 p.m.

Prior to 5 p.m., children are generally picked up in their individual classrooms. After 5 p.m., groups of children may be merged into the designated “late room” for their age group. During “late room” time, if children from different age groups are combined, room staffing ratios are always decided based on the youngest child in the room.

Staff at St. Joe’s CDC work a variety of staggered shifts. Sometimes the staff person in the room at pickup may not be the person who has been with your child all day. If you have specific questions about your child’s day and the closing staff is unable to answer, please contact the classroom senior teacher the following day via Brightwheel, phone or email for more information.

When picking up, please take the following steps:

1. Check your child(ren) out using Brightwheel app on your phone OR the black tablet kiosk.
2. If you pick up on the playground, QR codes for Brightwheel are posted on the playground fence and on infant/toddler buggies.
3. Check out requires a signature in the app. Do not close the app until you have signed!
4. Speak to the classroom staff. Eye contact and a verbal exchange that a child is departing ensures the safe transfer of responsibility from staff to family.

While we discourage pick up during nap time (12 p.m. -2 p.m.) unless there is an urgent reason, ***you can always pick up your child, at any time of the day.*** Early pick up does not need to be scheduled or preapproved. If you do need to pick up during nap time, just give your teachers a heads-up, and plan to ring the doorbell for entry to the center, since your key fob will not work from 10-2.

## LATE PICK-UP

- ***Families arriving to pick up after the center closing time are charged a late fee. (See current tuition and fees for more information). Late fees are determined by a child’s pickup time in Brightwheel.***
- ***It is important that children be checked out by their approved pickup person each day. Children not signed out of the program upon pickup will be signed out by staff at the end of the day during final room checks after 6 PM. Thus, children not signed out will be assessed the late pick-up fee as well.***



Late fees are billed via ACH withdrawal, generally within one month of the occurrence. Excessive late pick-ups may result in families being asked to withdraw their children from the CDC.

If a child has not been picked up from the center within 30 minutes after the center closing time, and the family has not contacted the center, the CDC will contact state child protective services

## APPROVED PICKUPS

Children are never released to anyone other than a parent/guardian without explicit permission from a parent/guardian. The child’s authorized pick-up list is kept in the Brightwheel app. Families may add to, delete from, or change this list at any time in Brightwheel. Individuals listed as PARENT, FAMILY and/or APPROVED PICKUP\* (see below for more info) may pick up a child at any time.

Families can make changes to their child’s approved pick-up list by logging into your account at mybrightwheel.com and making changes in your child’s profile. Families can also send written permission (email is preferred) to the Director and/or Assistant Director.

An authorized pickup must be at least 16 years of age. Staff reserve the right to request photo identification from anyone picking up a child, even a parent or guardian, if the individual is not readily recognized by the staff member. No child will be released into the care of anyone who appears to be intoxicated by drugs or alcohol, even if that person is the parent/guardian or is on the list of approved pickups.

## UNDERSTANDING AUTHORIZED PICKUPS IN BRIGHTWHEEL

In the Brightwheel system, there are 4 types of contacts for a child. It is important that families understand the difference between those 4 types of contacts, and the permissions each type is given. Families should check their child’s contact list for accuracy.

***Please note that each contact only needs to be entered one time, at the HIGHEST level of permissions you want that person to have.***

There is no need to list someone as a Parent and a Family member and an Approved Pickup and an Emergency contact.

The table to the right describes each type of contract in Brightwheel and the permissions they are given.

If you have any questions, just ask someone in the office for help!

Contact Type	Can Pick Up Child?	Permissions in Brightwheel
PARENT	YES	<ul style="list-style-type: none"> <li>• Can create a BW account and check students in and out</li> <li>• Can update their personal contact information &amp; check in code</li> <li>• Can see all updates in the Daily Feed</li> <li>• Can send and receive messages</li> <li>• Can view the child's profile</li> <li>• Can add or remove other adults from the child's profile</li> <li>• Can edit child's profile information</li> </ul>
FAMILY	YES	<ul style="list-style-type: none"> <li>• Can create a BW account and check students in and out</li> <li>• Can update their personal contact information and check in code</li> <li>• Can see all updates in the Daily Feed</li> </ul>
APPROVED PICKUP	YES	<ul style="list-style-type: none"> <li>• Can create a BW account and check students in and out</li> <li>• Can update their personal contact information &amp; check in code</li> </ul>
EMERGENCY CONTACT	NO	<p>These contacts have no access to the child's Brightwheel profile. They do not have pickup privileges. They are simply a point of contact in the event of an emergency.</p>

## Infant Rooms

St. Joe's CDC follows best practice guidelines for properly caring for infants. Each infant receives individualized, ongoing care from a consistent team. Infants eat and sleep "on demand" according to their individual sleeping and eating habits. Cribs are used only for sleeping. Swings, jumpers and other equipment are not routinely used in our center.



## WHAT TO BRING FOR YOUR INFANT

\*\* NO LARGE DIAPER BAGS PLEASE \*\*

- A current copy of your child's Commonwealth of KY Immunization Certificate
- A copy of a well-child checkup with the past year
- Enough bottles for a day's use, properly labeled (see Bottles)
- Diapers (if you choose to use cloth, please discuss with Director or Assistant Director)
- Diaper rash cream or ointment if needed
- At least 2 full changes of clothes per day
- Pacifier if applicable, with NO attachments

Please label all items brought from home with your child's name to prevent loss.

St. Joe's provides bibs, crib sheets and burp cloths for use in the center. Linens laundered daily. Sheets are assigned to one child for the week and are laundered weekly, or more frequently if soiled.

## DIAPERING

St. Joe's provides disposable diaper wipes. Families provide (disposable or cloth) diapers, and any diaper rash creams or ointments needed. The family must give written permission for the use of diaper rash cream. The permission form can be requested from the Director. Diaper changing areas are separate from food preparation areas and are equipped with a nonporous changing pad, vinyl gloves, and a hands-free trash can for disposal. Diaper changing procedures and hand washing procedures approved by the center are posted at each diaper changing station. These procedures meet all licensing regulations and include the procedure for disinfecting the changing area after each diaper change.



## BOTTLES

Families provide clean bottles daily for infants in our care. ALL bottles, regardless of formula or breast milk choice, must meet the following requirements:

- be labeled with the child's first name (and last initial if needed for clarity)
- have a cap that is also labeled with the child's name or initials
- be placed in the classroom refrigerator upon arrival (\*unless empty)
- be warmed in water, never microwaved
- be discarded if not finished in one hour
- be sent home with families at the end of the day

As part of the federal food program, the center provides one brand of infant formula. Please ask for information on the specific brand provided. For families who choose to use our formula, families must provide a clean, empty bottle per expected feeding daily. \*Even empty bottles must be labeled as stated above.

For families who opt to provide their own formula, bottles must be prepared at home and must be labeled as stated above. Staff are not permitted to mix formula other than that which is provided by the center.

## BREAST FEEDING

Breast milk can be brought in labeled bottles, just like formula. Breast milk can also be brought in frozen. Our staff can thaw breast milk and pour it into a clean bottle provided by the family, but those \*empty bottles must be labeled. Please note that the CDC prefers that milk be already thawed and prepared in bottles to eliminate the possibility of spills.

Breastfeeding parents are welcome to feed in our classrooms. We also have a quiet and private space for families or staff who wish to breast feed on site or need to pump breast milk, if more private space is desired. See office staff for access to our nursing room.

## INFANT SLEEP

St. Joe's CDC follows guidelines for safe sleep set forth by state regulations and the American Academy of Pediatrics (AAP) infant safe sleep statement. Infants (0-12 months) are placed flat on their backs on a firm sleep surface. Once they can roll over from back to front and front to back, they are allowed to remain in whatever sleep position they prefer to sleep.

Infants will not be allowed to sleep in car seats or other equipment (swings, bouncy seats). If an infant falls asleep anywhere other than in a crib, the infant will be moved to a crib as soon as a staff member is able to move them. Devices such as wedges or infant positioners will not be used without a doctor's statement. Any such devices must be supplied by the child's family.

There will be nothing in a crib except a crib mattress, a fitted sheet, baby and a pacifier. Infants who use pacifiers will be offered their pacifier when they are placed to sleep, however, pacifier clips or attachments of any kind are not allowed. Bibs or garments with ties or hoods are not permitted for sleeping infants. Infants will not be permitted to sleep with a bottle.

## NO SWADDLING

Children may not be swaddled or have arms confined when sleeping without signed and written permission from a physician per licensing regulations.

Sleep sacks that allow free movement of the arms are permitted while children are under 12 months and in a crib. See pictures below for examples of sleep sacks that are approved for use.



If you wish for your child to be swaddled, the following conditions must be met:

- (1) The child is not yet rolling over.
- (2) We have a signed statement from a physician approving the use of a swaddling or arm-confining sleep device.
- (3) The family has provided an appropriate swaddling sack or swaddling blanket that is marketed and intended for that purpose.

***\*\*WEIGHTED SLEEP SACKS, WEIGHTED SWADDLES or other weighted sleep devices are NEVER allowed as per the American Academy of Pediatrics Safe Sleep Policy.***

# Toddler Rooms

The toddler years (from 12 months to 36 months) are an exciting time of growth and development for your children! Our staff work to prepare families for the many changes that will happen during these years!

## WHAT TO BRING FOR YOUR TODDLER-

**\*\* NO LARGE DIAPER BAGS PLEASE \*\***

- A current copy of your child's Commonwealth of KY Immunization Certificate
- A copy of a well-child checkup with the past year
- Diapers or Pull-Ups as needed
- At least 2 full changes of clothes per day
- If potty training, multiple changes of clothes, extra underwear, socks and shoes
- Rubber rain boots for outdoor play
- Refillable, closable water cup
- Blanket and lovey (if used) for naptime
- Please label all items brought from home with your child's name to prevent loss.

## TODDLER SLEEP

As required by licensing standards, the CDC offers all children over 12 months a designated rest period, not to exceed 2 hours. Generally, our toddlers nap from 12:30-2:30. During nap time, the lighting and sounds in the room are adjusted for napping while still allowing for complete sight supervision of children. Adequate sleep is important for a child's health and



development. We encourage all toddlers to nap while in our care. We are unable to accommodate families' requests to prevent or limit sleep for toddlers during nap time. Not all toddlers will nap. Children who do not sleep after 30 minutes are permitted to play quietly on their cot so as not to disturb their sleeping classmates. If after 30 minutes of quiet play on their cot, children are not sleeping, they are allowed to get up and continue quiet play at a table or area as to not disturb their classmates who are still asleep.

The CDC provides each toddler with a cot and cot sheet. Cots and cot sheets are assigned to one child for the week and are laundered weekly, or more frequently if soiled. Families provide blankets for naptime for children age 1 and up. Families should take blankets home weekly for washing.

We do NOT allow sleep sacks for toddlers. Toddlers need to be able to safely move around the room if they get up from their cots, and sleep sacks prevent them from safely walking.

## TOILET TRAINING

Research indicates that children cannot successfully potty train until they are physically ready. We encourage families to wait to begin potty training until a child is at least 2 years old. Then, when the family is ready to begin, staff will work with the family to make a plan for success. Some families choose to delay potty training until a child is 3. Our center supports that decision. We have no rules “requiring” a child to be potty trained by a certain age.

Things to keep in mind for children in the process of being potty trained:

- Please ensure that the child wears clothing they can easily get on and off. Pants with an elastic waist are preferred.
- Send LOTS and LOTS of extra clothes!
- Do not send a potty chair. Proper cleaning and sanitizing of potty chairs requires time and attention that takes staff away from children. The bathrooms used by our children are all equipped with toilets that are low to the ground with smaller seats.
- ***We cannot allow children to go without underwear for health and safety reasons. We do NOT, however, require pull ups all the time. Children may wear regular underwear while awake and in the building while potty training!***
- Due to the location of our playground and its distance from a bathroom, Pullups or diapers are required during playground time until the child is fully potty trained.
- For health and safety reasons, we also ask families to provide Pull-ups or diapers for nap time until a child is able to indicate the ability to stay dry during rest time.



## BITING

Biting, while no fun for anyone involved, is a behavior that is a normal part of early childhood. It is common for toddlers to bite to communicate and/or to meet oral sensory needs. Our staff document the biting incidents, to the best of their ability, and communicate with families involved in the incidents. Staff MAY NOT share the names of other children involved confidential when reporting the event to the family of the injured child. Please do not ask staff to identify who is biting. Usually, multiple children biting at any given time.

We do not punish or ask toddlers to leave our center for biting. Instead, we work with families to determine strategies to reduce biting behaviors. We offer chewies, teethers, crunchy snacks and other sensory strategies to help reduce biting. Families may be asked to provide teething rings, vibrating oral stimulation toys, chewy tubes, pacifiers or other appropriate oral stimulation items at their own expense to help curb biting when excessive. If a child continues to bite and is unresponsive to typically successful classroom strategies, the Director may request that families seek additional assessment and suggestions (see Challenging Behaviors).



## Preschool Rooms

Preschool rooms at the CDC are for children ages 3-5 (or up to the pre-Kindergarten year). Preschool classrooms are busy, bustling environments where children continue to learn primarily through play! While we introduce children to pre-academic content, the focus of our preschool program continues to be developing the whole child through play-based learning.



## WHAT TO BRING FOR YOUR PRESCHOOLER-

**\*\* NO LARGE DIAPER BAGS PLEASE \*\***

- A current copy of your child's Commonwealth of KY Immunization Certificate
- A copy of a well-child checkup with the past year
- At least 2 full changes of clothes
- Refillable, closable water bottle
- A blanket for rest time
- Rubber rain boots for outdoor play

\*Please label all items brought from home with your child's name to prevent loss.

## PRESCHOOL SLEEP

Nap time begins to look a little different during the preschool years. While most 3-year-olds still nap consistently every day, many 4-5-year-olds do not. As in toddler rooms, children who do not sleep after 30 minutes of rest will be allowed to play quietly while the others sleep. Then, after an hour, they are permitted to get up and play quietly. St. Joe's CDC provides a cot and cot sheet for each child. Cots and cot sheets are assigned to one child for the week and are laundered weekly, or more frequently if soiled. Families provide blankets for naptime in preschool classrooms. Families should take blankets home weekly for washing. To prepare our pre-K students for the demands of full-day Kindergarten, our pre-K teachers typically begin to shorten nap time, over time, from a maximum of 2 hours to a maximum of 30-60 minutes, depending on the needs of the individual children. Nap time generally begins to shorten during the summer months but may begin to shorten earlier or later based on the needs of individual groups of children in the pre-K classrooms.

## KINDERGARTEN READINESS- BRIGANCE SCREENING

The state of Kentucky measures Kindergarten-readiness using the Brigance screening tool. In the Spring, our pre-K children are given the Brigance, and scores are shared with families. Traditionally, our children perform very well on this screener, with a more than 90% readiness rate!

## FIELD TRIPS

Currently, the CDC does not participate in off-site field trips. Instead, efforts are made to bring special events and activities into the center (i.e. library readings, yoga instruction, etc.) With family permission, preschool classes do occasionally take trips to the public library, located within walking distance of the center. Families are notified well in advance of the excursion. The group's staff to child ratio is maintained at all times on walking trips. Teachers are provided with safety vests and stop signs to aid in the safe crossing of Frankfort Avenue for these walking trips.

## GRADUATION / SUMMER CAMP

We do not have a "graduation ceremony" for our pre-K classes. While some of our pre-K children leave our center at the end of the traditional school year, as a year-round program, many of our pre-K children stay through the summer as well. This creates a "rolling" end to the year that is different for every child and can be confusing for children if we celebrate the "end" of school, followed by many of them continuing to come to school for up to 8 more weeks. Instead of celebrating "graduation," we mark the end of the traditional school year in pre-K with a "summer camp" style of programming for the summer months. During "summer camp," the curriculum coordinator and pre-K teachers work together to plan lots of outdoor fun for the summer months!



# Meals and Snacks

St. Joe's CDC participates in the Child and Adult Care Food Program (CACFP), also known as the Federal Food Program. The center provides breakfast, lunch and snacks for children in attendance. Weekly menus are posted and are published in Brightwheel documents for families' reference. Families can also access a hard copy of the menu each week at the CDC front desk.

## INFANT

As part of the CACFP, the CDC provides one kind of infant formula. Families may also choose to provide their own formula or breast milk. If desired, families may choose to provide their own purees and/or cereal. Once infants are ready to begin eating table food, The CDC provides table food. Families may also choose to provide their own if preferred. Infants are fed on demand according to families' instructions.

It is important that families introduce all new foods to children at home several times before having those foods served at the center to observe adverse reactions or allergies.

## TODDLER-PRESCHOOL

Meals for toddlers and preschool age children are served "family style" as much as possible, allowing children to have second servings if desired and allowing children to serve themselves whenever possible. Children are encouraged to eat a little of each of the foods served. However, they are not required to do so.

## FOOD ALLERGIES OR SPECIAL DIETARY REQUIREMENTS

As per CACFP regulations, any child who has a food allergy, is a vegetarian/vegan, or has other dietary restrictions must have appropriate paperwork on file. \*Without proper paperwork, we are unable to claim a child's meal accommodation with CACFP and therefore must assess families an additional food fee of \$175 per year. To avoid this fee, please see the Director/Assistant director for a copy of the forms needed.

## MEALTIMES

Breakfast is served at 8:30 a.m. Lunch is served at 11:30 a.m. Afternoon snack is served after nap at 2:30.



# Communication & Family Involvement

Open communication between staff and families is essential to a successful childcare center. We have many ways for staff and families to communicate.

## FACE TO FACE

Short informal chats at pick-up and drop-off times are often the most meaningful and effective communication between families and staff. These conversations are where relationships and partnerships are built! We do ask that families keep in mind that the teachers are also caring for other children during those times, so it may not be possible to talk at length. Families are encouraged to schedule a conference if more than a brief discussion is needed.

## BRIGHTWHEEL

The Brightwheel app is another avenue for communication at the CDC. Families can communicate with CDC leadership staff via the app, including the Director, Assistant Director and Team Leaders. While we understand the desire of some families to have real-time communication and updates throughout the day, **our center does not support continuous real-time updates on an app.** Our philosophy is that the care of children will always be our FIRST PRIORITY. If teachers are continually entering real-time information into an app, it interferes with the care they are providing for your children.

***In recent surveys, we have heard from our families, however, that they want more communication, especially pictures that help families feel connected to their children's learning. Starting in August 2025, our Senior Teachers will have access to the Brightwheel app in the classroom. We will be setting clear guidelines with Senior Teachers about when they can be on tablets (nap time, times when a third staff is available for support, teacher planning times, etc.) to make sure that children are still getting what they need while we also work to better meet the needs of our families.***

***We will continue to ask that our teachers keep written documentation of feeding, diaper changing, sleeping, etc. on the classroom whiteboard. This process is an important part of our daily safety routines. Senior Teacher will enter information for parents when the schedule allows, as stated above. Families can always check the whiteboard at pick up if we have a day where we are unable to update the app.***

***Team Leads have access to Brightwheel as well and can carry out urgent communication during the day and send occasional pictures for families!***

We also understand that some children and families have a unique need for immediate, detailed information regarding feeding, sleeping or changing. These needs are often due to medical conditions or developmental concerns. If this is the case for your family, please discuss that unique need with your team leader and the classroom teachers so that we can create a plan that will meet your family's needs without interfering with our expectations for classroom supervision and engagement.

## LOBBY POSTINGS

Important information related to licensing, ALLSTARS, and CACFP (the federal food program) is posted in the CDC lobby.

## NEWSLETTER AND ALERTS

The Director sends out a newsletter (at least monthly, usually weekly) via Brightwheel to all families. The newsletter is an attempt to get everything you need to know in one place! Occasionally, however, additional emails or text message alerts are used to communicate timely information and important reminders.

## CELL PHONES

The CDC Director, April Manning, is available via cell phone at (502) 609-6465 any day of the week from 10 a.m. until 10 p.m. Staff and families can also text the Director at this number any time of day. If a voice or text message is not returned within 24 hours, please re-send, as the Director typically responds within a few hours.

Classroom teachers are NOT allowed to have their cell phones during work time. While some staff members choose to give out their personal cell phone numbers to families, they are in no way required to do so. If families choose to communicate with classroom staff via personal text message, please know that messages cannot be read and responded to while staff are working.

## TELEPHONE AND EMAIL

All St. Joe's CDC staff can be reached by phone at 502-893-0242 Monday – Friday from 8:30 a.m.- 5 p.m. An automated system will answer, and a direct extension can be entered (see below for staff and classroom extensions). Staff can also be reached via email, although classroom staff do not check email often. Telephone and Brightwheel are more reliable ways to reach Senior Teachers and Team Leaders.

Name	Job Title	Phone Ext.	Email
April Manning	Director	247	<a href="mailto:aprilm@sjkids.org">aprilm@sjkids.org</a>
Niela Cobble	Asst Director	312	<a href="mailto:nielac@sjkids.org">nielac@sjkids.org</a>
April Crow	Curriculum	315	<a href="mailto:aprilsc@sjkids.org">aprilsc@sjkids.org</a>
Rebecca Bynum	Development / Behavior	214	<a href="mailto:rebeccab@sjkids.org">rebeccab@sjkids.org</a>
Jena Monsma	CDC Office	298	<a href="mailto:jenam@sjkids.org">jenam@sjkids.org</a>
Elaine Brown	CDC Office	298	<a href="mailto:elaineb@sjkids.org">elaineb@sjkids.org</a>

Room #	Phone Ext.		Room #	Phone Ext.
103	209		005	220
104	236		006	249
105	322		007	314
106	251		008	232
110	203		009	221
111	227		010	242
112	248		011	
113	229			
114	252			
115	215			
119	231			

## CONFERENCES

Conferences can be scheduled at the request of the classroom teacher, the child's family, or CDC Leadership. The CDC also offers one conference day each year in February when families can schedule time to meet with their Senior Teacher.

## FAMILY INVOLVEMENT AND SUPPORT

St. Joe's CDC encourages families to be actively involved in the program. In addition to regular communication with staff, families are welcome to visit their child(ren)'s classrooms. Please note that the center acknowledges that there are times during children's development that visitation can be emotionally disruptive. For example, children who are experiencing heightened feelings of "stranger danger" and/or separation anxiety may be upset by visitors to the classroom. If visiting becomes disruptive to your child or other children in the classroom, we reserve the right to ask families to limit visitation temporarily.

Visits to other classrooms are encouraged if your child is due to transition to another classroom. Visits to classrooms other than your child's room should be scheduled with the Director or Assistant Director so that you may be properly introduced to those teachers at a time that does not interfere with supervision, engagement or rest times.

Families are also encouraged to be a part of the center's Parent Involvement Committees. Committees meet as needed throughout the year to plan family friendly events and plan and fund appreciation events for the center's staff. Meetings for the parent committee are typically held via ZOOM in the evenings.

In addition to family-friendly events, the center also provides educational opportunities for families. Positive Discipline Workshops, family storybook yoga, and Kindergarten Readiness are examples of educational programs offered in the past. Family educational opportunities are announced in the Director's newsletters.



## Curriculum

St. Joe's CDC uses a combination of research-based, child-centered approaches to learning that focus on educating the whole child. Our classrooms offer a balance of active and quiet play, provide opportunities for individual and group play, and give children opportunities to make decisions.

Our staff engage in ongoing learning about Emergent Curriculum and Reggio Emilia inspired teaching and learning. Through a partnership with Community Coordinated Childcare, staff attend frequent workshops and receive in-classroom coaching to strengthen our teaching and learning practices.

Our staff also receive training on the Kentucky Early Learning Standards and how to use these standards in their daily lesson plans. The Kentucky Early Learning Standards address physical, emotional, social, intellectual and language development, including a variety of content areas (literacy, math, science, art, music, culture).

In addition to the daily classroom activities and learning opportunities, the center offers an inhouse Enrichment program. Enrichment may be provided by enrichment teachers or embedded into classroom instruction with the help of our curriculum coordinator, April Crow!



## WHAT IS EMERGENT CURRICULUM?

Rather than relying on pre-written lesson plans or fixed units, emergent curriculum **emerges** through observation, reflection, and thoughtful planning. This approach allows learning to grow organically from the children's own interests, questions, and experiences.

Emergent curriculum is a **responsive framework** for teaching. It is:

- Guided by children's interests, questions, and daily interactions
- Built through ongoing observation and documentation
- Flexible and dynamic—not scripted
- A method that brings joy, curiosity, and meaningful engagement into learning

This approach empowers educators to build relevant, real-world connections that deepen children's understanding and support development across all learning domains.



## LESSON PLANS

As a Kentucky ALL STARS 4-Star rated center, St. Joe’s Child Development Center (CDC) uses weekly lesson plans that are:

- Rooted in **Kentucky Early Childhood Standards**
- Informed by **observation and documentation**
- Aligned with children's developmental levels and interests

A lesson plan is a tool to organize meaningful, intentional instruction. It outlines goals, connects ideas, and provides a daily guide for facilitating learning experiences. A lesson plan is not a static plan that will be followed perfectly. It is a dynamic, living document that adapts and changes with the needs of the children!

While we follow the children’s interests, **we also teach “to the standards.”** Standards help break down key learning objectives that support children’s developmental growth.

Effective lesson planning addresses all developmental domains—not necessarily all in one day, but intentionally over time. The key developmental domains are:

- **Approaches to learning**
- **Social-emotional development**
- **Physical development**
- **Cognitive development**
- **Language and early literacy**
- **Creative expression**
- **Early math and science**
- **Health and mental wellness**



## Discipline

At St. Joe’s Child Development Center, our staff are encouraged to view mistakes as opportunities for learning. Staff are trained in positive discipline techniques that are respectful, encouraging, kind and firm.

Positive discipline techniques promote a sense of belonging and teach children important social and life skills for the future, such as respect and concern for others, problem solving, and cooperation.

Sometimes children need extra support from an adult when navigating big feelings. When this happens, children are given opportunities to co-regulate with an adult in a quiet, safe space or take a walk together to get a break from the classroom setting.

**Positive  
Discipline**



## Meeting Children's Individual Needs

It is the goal of St. Joseph Child Development Center to serve every child and family and to meet their childcare needs. The CDC works with families to consider measures to promote optimal inclusion of children with individualized needs.

Families will receive assistance obtaining specialized support, such as physical, occupational or speech therapy, if necessary to enroll and keep their child in care.

A team approach, consisting of CDC leadership, teachers, families, and support professionals, is used in service planning, care provision, and transition planning.

Teachers who are responsible for working with children with special needs will receive any additional training needed to meet the specific needs of children in their care. Consultants and other professionals are brought in when necessary for this training. These additional supports may be at the expense of the child's family.



### DEVELOPMENTAL SCREENING

One important step to meeting individual needs in children is being able to identify those needs! Developmental screening provides a quick check of a child's development and helps determine if a child is meeting the appropriate milestones for their age.

Each year, St. Joe's CDC asks families to participate in a developmental screening of their child(ren) by completing the Ages and Stages Questionnaire (ASQ). Staff score the ASQ and share the results with families.

If ASQ screening results indicate a potential developmental delay, CDC staff will meet with the child's family to identify any additional resources needed for the child and develop a plan of action. If needed, families are responsible for the cost of further assessment.

If further assessment indicates the need for therapy or other intervention, families are expected to pursue those, at their own expense, with a provider of their choice, within 30 days of the sharing of initial screening results. Failure to implement and complete recommended steps may jeopardize a child's placement in our program.



## CHALLENGING BEHAVIORS

Occasionally, children can present with challenging behaviors in the classroom. **Challenging behavior is defined as any repeated pattern of behavior, or perception of behavior, which interferes with or is at risk of interfering with a child's optimal learning or engagement in positive social interactions with peers and adults. It's characterized by behaviors that are persistent, disruptive, or destructive, and may be hurtful to the child or others.**

### Positive Discipline and the Pyramid Model

At St Joe's, we are committed to fostering a safe, supportive, and inclusive environment where all children can thrive socially and emotionally. Our program uses discipline practices rooted in the principles of the **Pyramid Model** and **Positive Discipline**, which promote positive relationships, proactive strategies, and a collaborative approach to addressing challenging behaviors.

With the foundation of social-emotional learning and discipline supports built into the structure of how our classrooms are managed, many minor behavior concerns resolve themselves. Visual schedules, predictable routines, feelings charts, and problem-solving resources help children navigate their classroom experience while learning valuable social-emotional and regulation skills.

Positive Discipline is kind, firm, and respectful discipline based on what research tells us about how the brain develops. It validates feelings and helps guide children through behaviors and emotional upset through co-regulation, limited choices, and authentic learning.

The Pyramid model is a framework of supports designed to improve the social-emotional competence of young children and reduce behavioral challenges. All St. Joe's CDC staff receive ongoing training and coaching on positive discipline strategies and pyramid model supports.

### Documentation of Developmentally Appropriate Challenging Behaviors

Documentation of challenging behaviors begins when teachers identify or observe developmentally appropriate behavior through the lens of duration, frequency, and intensity. If a behavior lasts longer, happens more often, or is more intense than behaviors of same age peers, it should be documented and shared with parents/caregivers, and St. Joe's leadership. The teacher communicates with parents about behaviors and shares preliminary interventions and plans to reduce the behaviors. **Communication is a vital piece of the puzzle that should happen throughout the support process, and should be ongoing, kind, and focused on solutions!**

The Development and Behavior Coach supports teachers, children, and families by providing in-classroom support, sharing resources, and meeting with families (if requested). If frequency, intensity, or duration continues to be a concern for teachers or parents, an ASQ-3 may be repeated, and an ASQ-SE2 can be completed and referral for support services can be done. If a need for services has been identified, parents are responsible for following steps to ensure that those services can be implemented, within a reasonable time frame, by KEIS (formerly known as First Steps) or another provider. St. Joe's CDC does have a few providers who regularly see children here at the center and we are happy to share those provider names with families.

### Documentation of Challenging Behaviors that are Not Developmentally Appropriate

If challenging behaviors present that are not deemed developmentally appropriate for the child's age, the aforementioned steps are followed, but in a more expedited manner. An ASQ-3 and ASQ-SE2, referral for services, and meeting with family happen soon after the emergence of behavior. An example of behavior that is not developmentally appropriate would be biting that emerges in a four-year-old classroom, or severely aggressive behaviors that are injurious to self or others.

## Communication and Evidence/involvement in Therapeutic Supports

Communication is key when supporting children and families through challenging behavior. It is important that parents and staff have agreed upon expectations for communication. Parents and staff will work together to develop goals and plans for how best to share information, how often, and specifics that influence a child's behavior.

If a need for services has been identified, parents are responsible for following steps to ensure that those services can be implemented, within a reasonable time frame, by KEIS (formerly known as First Steps) or another provider. We may ask to be included in meetings, for parents or therapists to share tips, goals, and/or strategies. Sharing information with the support team members can be helpful for consistency of language and expectations for children.

### Reducing daily window of care/attendance

To provide the highest level of quality of care, we may ask for a child's drop off and pick up times to be adjusted to align with times of the day that we are appropriately staffed to meet the needs of all children in our care. We cannot staff classrooms sufficiently to support children's individual behavior needs before 8:30am and after 3:30pm.

It is rare, but St. Joseph CDC reserves the right to send a child home for the day for the safety of the child or other children.

### Reasons we may be unable to serve a child/family

While it is the goal of St. Joe's CDC to be able to serve every family and to meet their childcare needs, there may be times that a child has greater needs than we can safely and sustainably support. The following are reasons we may not be able to continue to serve a child and family-

- **No observable change-** No changes in the challenging behaviors after assessment and a reasonable amount of time and multiple attempts to stabilize using different strategies, supports, and resources.
- **Aggression-** Repeated aggressive or harmful behavior that interferes with our ability to provide a safe learning environment is a factor in determining if we can continue to serve a child in our program.
- **Elopement-** Children who elope pose a serious safety risk to themselves, as well as others. Frequent elopement attempts by a child are a factor in determining if we can continue to safely meet the needs of a child in our program.
- **Recovery time and need for staffing-** The time that it takes a child to get regulated and safely return to the classroom environment, and behavior that requires one-to-one staffing for longer than we can manage will also influence our decision about how to safely balance the needs of the family and the needs of the center.

**If the decision is made** that we can no longer serve a child, a two-week notice will be given, in addition to resources directing the family to childcare facilities that may be better equipped to meet their family's needs.

# Health and Wellness Policies & Procedures

## HANDWASHING

Handwashing is our best defense against the spread of germs among children and staff. Staff are expected to follow all licensing regulations and postings about hand washing and to teach those expectations to children.

**Families are asked to assist their child(ren) with handwashing upon arrival to the classroom.**



## CLEANING

In addition to handwashing, frequent cleaning and sanitizing of toys and surfaces help us keep staff and children healthy. The CDC has a cleaning staff at night that is responsible for cleaning our bathrooms, sinks and floors. Classroom staff are charged with maintaining the day-to-day cleanliness of the classrooms.

## IMMUNIZATIONS

Per licensing regulations, the CDC must have a current immunization certificate on file for all children in care. Immunizations must be documented on the Commonwealth of Kentucky immunization certificate. No other documentation meets our regulatory requirement. Immunization certificates expire at different time intervals based on the age of the child and their immunization schedule. Families must provide a new immunization certificate each time the current certificate expires. The expiration date can be found here:

  
COMMONWEALTH OF KENTUCKY  
**IMMUNIZATION CERTIFICATE**

(Required for any child enrolled in day care center, certified family child care home, other licensed facility which cares for children, preschool programs, and public and private primary and secondary schools.)

Name of Child: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
(Last) (First) (Middle)

Name of Parent or Guardian: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip code)

**DATES IMMUNIZATIONS WERE ADMINISTERED (Month/Day/Year)**

Diphtheria, Tetanus, Pertussis\* #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_ #3 \_\_\_/\_\_\_/\_\_\_ #4 \_\_\_/\_\_\_/\_\_\_ #5 \_\_\_/\_\_\_/\_\_\_

Hib\*\* #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_ #3 \_\_\_/\_\_\_/\_\_\_ #4 \_\_\_/\_\_\_/\_\_\_

PCV (Pneumococcal) #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_ #3 \_\_\_/\_\_\_/\_\_\_ #4 \_\_\_/\_\_\_/\_\_\_

Polio #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_ #3 \_\_\_/\_\_\_/\_\_\_ #4 \_\_\_/\_\_\_/\_\_\_

Hepatitis B\*\*\* #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_ #3 \_\_\_/\_\_\_/\_\_\_ or Adult dose: #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_

MMR (Measles, Mumps, Rubella) #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_

Varicella #1 \_\_\_/\_\_\_/\_\_\_ #2 \_\_\_/\_\_\_/\_\_\_ or child has had chickenpox or zoster disease (X) \_\_\_

Tdap #1 \_\_\_/\_\_\_/\_\_\_ or Td #1 \_\_\_/\_\_\_/\_\_\_ Meningococcal #1 \_\_\_/\_\_\_/\_\_\_

\*DTaP, DTP, or DT. \*\*Hib not required at 5 years of age. \*\*\*Hepatitis B vaccine is a two dose series of approved adult hepatitis B vaccine for adolescents 11 through 15 years of age.

This child is current for immunizations until \_\_\_/\_\_\_/\_\_\_, (14 days after the next shot is due) after which this certificate is no longer valid, and a new certificate must be obtained.

I CERTIFY THAT THE ABOVE NAMED CHILD HAS RECEIVED IMMUNIZATIONS AS STIPULATED ABOVE.

\_\_\_\_\_  
(Signature of physician, APRN, PA, pharmacist, LHD administrator, or nurse designee) (Date)

\_\_\_\_\_  
(Name of Office or Licensed Healthcare Facility)

This certificate should be presented to the school or facility in which the child intends to enroll and should be retained by the school or facility and filed with the child's health record.



## WELL-CHECKS

In addition to the Immunization Certificate, the CDC requires documentation of an annual well-child checkup. This is a separate form and is in addition to immunization certificates. Well checks are good for one year from the date of service.

Well-check documentation can be a Preventative Healthcare Form- The front page looks like this, but this is a 2-sided form, and we need both the front and back!

We can also accept an electronic medical record print-out from your child's MY CHART account as proof of a well check. Just make sure that it includes your child's name and date of the well-visit.

KDE/005 KDESH002

**PREVENTATIVE HEALTH CARE EXAMINATION FORM**

All local boards of education shall require a preventative health care examination of each child first entering a Kentucky public school within a period of twelve (12) months prior to initial admission to school and within one (1) year prior to entry to sixth grade. Local school boards may extend this time out to exceed two (2) months. (KRS 162.010)

**PLEASE COMPLETE THE PREVENTIVE INFORMATION AND RECORDS**

**IDENTIFYING INFORMATION**

Student Name: \_\_\_\_\_ Gender:  M  F Grade: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ yrs \_\_\_\_\_ months Preferred Language: \_\_\_\_\_  
Parent or Guardian Name: \_\_\_\_\_

**RECORD OF IMMUNIZATIONS TO BE REPORTED ON IMMUNIZATION CERTIFICATE FORM, KPID 246**

**MEDICAL HISTORY**

Allergies: \_\_\_\_\_  
\_\_\_\_\_

Current Prescription Medications to be taken daily at school: \_\_\_\_\_  
\_\_\_\_\_

Significant Historical Information: \_\_\_\_\_  
\_\_\_\_\_

**SCREENING RESULTS**

Height: \_\_\_\_\_ ft \_\_\_\_\_ inches Weight: \_\_\_\_\_ lbs BMI: \_\_\_\_\_ BVP: \_\_\_\_\_ NY: \_\_\_\_\_

Value	Right Ear	Failed	Hearing - Right	Failed	Left Ear	Failed
Visual	<input type="checkbox"/>					
Left Ear	<input type="checkbox"/>					

Options: **ENTRIGS:** \_\_\_\_\_ **Lead:** \_\_\_\_\_ **Utinobin:** \_\_\_\_\_

Cervical dental (teeth and gums)  Normal  Abnormal **Referral:** \_\_\_\_\_  
Fluoridation  Normal  Abnormal **Referral:** \_\_\_\_\_  
Keratins/Prone/Prone  Normal  Abnormal **Referral:** \_\_\_\_\_  
Chest/Emphysema  Normal  Abnormal **Referral:** \_\_\_\_\_  
Asthma  Normal  Abnormal **Referral:** \_\_\_\_\_  
Respiratory assessment  Normal  Abnormal **Referral:** \_\_\_\_\_

## PHYSICIAN STATEMENTS

An additional written physician's statement is required if a child has any of the following:

- significant health problems that could affect the day-to-day care of the child
- allergies to any food/milk that the center may serve
- if they may need rescue medications during the school day (EpiPen, breathing treatments, etc.)
- limitations for physical activity
- special positioning for sleep due to reflux
- other conditions or modifications needed for the health and safety of your child

## ILLNESS AND EXCLUSION FROM CARE

St. Joe's CDC strives to safeguard the health and wellness of all children enrolled in our center. While we recognize that it is difficult for a family member to leave or miss work to care for a sick child, we must at times exclude a child from group care due to illness. We ask that all families have a backup care plan if a child is too ill to attend or becomes ill during the day and must be excluded from care.

Based on the recommendations of the American Academy of Pediatrics, St. Joseph CDC staff consider the following three questions when determining whether a child must be excluded from childcare:

1. Can the child comfortably participate in the daily schedule and programming?
2. Does the child require a level of care that is greater than we can safely provide in a group care setting, without putting the safety and well-being of the other children at risk?
3. Is the child at risk of spreading a reportable, communicable illness to others?



Each child will be given a brief visual health inspection upon arrival. Any child showing signs of significant illness shall not be admitted.

Should a child become mildly ill during the day, but does not require exclusion from care, the staff member will notify the child's family. Depending on the severity of the symptoms, staff may choose to call the family immediately to describe the symptoms or may choose to wait until pick-up time to inform the family.

Should a child become ill enough to require exclusion from care during the day, the family will be notified immediately and will be asked to pick up the child within the hour of being notified of the illness. Staff will try to keep the child comfortable. The child may be excluded from all activities until an authorized pickup arrives.

Exclusion from care may be required for any of the following:

- Lethargy, inconsolability or discomfort that prevents participation in daily routines and activities
- Illness that results in a need for greater care than we can provide without additional staffing
- No urine output for 8 hours
- Jaundice appearance
- Fever at or above 100.4 degrees F
- Diarrhea- defined as repeated watery stool that is frequent enough to result in a need for greater care than we can provide without additional staffing
- Black stool, or blood or mucus present in stool
- Vomiting more than once in 24 hours (the Center reserves the right to exclude children from care after only one vomiting episode when multiple children have been sent home for vomiting)
- Signs of persistent respiratory distress (with or without fever), including rapid breathing with audible wheezing, color change in face, chest retractions, or inability to perform normal physical activities.
- Sores in the mouth or on the lips that cause uncontrollable drooling and/or cause a significant decrease in the child's ability to eat or drink
- Rash with fever
- Rash with open sores
- Eyes that are crusty, oozing, swollen and red in the whites of the eye (eye discharge alone, and/or crusting of the eye after sleep is not considered a cause for exclusion from care)
- Visible live head lice in the hair



After an illness that requires exclusion from group care, a child may return to the center when the following applicable conditions have been met:

- The child is free of symptoms (fever, vomiting, diarrhea, or other symptoms noted above) for 24\* hours without the use of fever-reducing or other symptom-reducing medications.
- To return prior to 24 hours, the family must present a medical statement that indicates that the child has been seen by a medical provider, is not contagious, and is deemed able to return to group care.
- The child can participate comfortably in all usual activities.
- The child is free from open, oozing skin conditions and/or drooling related to mouth sores. Unless the child's physician signs a note stating that the child's condition is not contagious, or the involved areas can be covered by a bandage without seeping or drainage through the bandage.
- In the case of head lice, the child must be treated with a medicated anti-lice treatment (over the counter or prescription) and the child must be free of visible live lice, as determined by an inspection by the director, assistant director or St. Joe's nurse.
- \*If a child has a reportable communicable disease, the center reserves the right to require a symptom-free period that is longer than 24 hours, based on recommendations by the Center for Disease Control, the local and/or state health department, or other medical professionals, as well as a medical note indicating the child can return to group care.

## MEDICAL EMERGENCIES

All CDC staff receive basic training in CPR and First Aid. Staff are encouraged to attend onsite training for certification in CPR and First Aid, as well. Our goal is for 80% of our staff to be certified in CPR and First Aid. If a child becomes seriously ill or injured while in the center's care, Emergency Medical Services (EMS) will be contacted in addition to the child's family. If EMS feels that the child requires a hospital visit and the family is unable to be reached or cannot arrive in a short period of time, a staff member will accompany the child to the hospital.

Staff will share the family's preferred hospital with EMS staff; however, EMS reserves the right to transport the child to the facility they deem most appropriate for the emergency.

## MEDICATIONS

Teachers can administer medication to non-infectious children in attendance, but only when ALL the following conditions are met:

- The family has given daily written permission in the form of a completed medication waiver. Medication waivers are available in the child's classroom or in the CDC office or can be sent via Adobe sign from the director by request.
- All medications are in their original container. (For drops and creams, this includes the BOX they came in, as that is where the prescription and/or dosage information is indicated.)
- We can follow all manufacturers' recommendations and/or prescription directions. (Please note that we cannot give your child medication prescribed for a sibling or other family member, nor can we give your child a medication that is expired. In addition, we cannot administer medication that says "for children under the age of \_\_\_ consult a physician" without a physician statement.
- We cannot dose by weight without written verification of the weight and correct dose from a medical professional.) The amount the family specifies on the drug waiver and the dosage listed on the medicine container are consistent.

Please note the following exclusions for medication administration:

- We will not administer over-the-counter medicine for more than three consecutive days unless a physician prescribes it for a specific time period.
- We **cannot** administer medication "**as needed**" per our licensing regulations. Specific instructions regarding dose and time must be provided.
- Medical waivers must be signed daily. (Emergency Rescue Medications and routine medications like diaper rash cream and sunscreen are exceptions and each have their own form.)
- All medicine should be handed to a staff member in the office for safe storage.
- St. Joe's CDC is required by state regulation to keep all medicine out of children's reach in a locked container or cabinet.

## OVER-THE-COUNTER CREAMS AND LOTIONS

One exception to the above procedure is for over-the-counter creams, lotions, and other similar products. Teachers may apply over-the-counter non-medicated lotions / creams with one-time written permission from the family.

This includes:

- sunscreen
- bug spray
- lotion
- Chapstick
- diaper rash cream



These items do not need to be signed in and out daily but do need to be stored out of reach of children at all times. Families must complete a one-time form that gives permission for the administration or application of the product. The form can be completed via Brightwheel. To request the form, email the Assistant Director or Director and they can release the form to you to sign.

## EMERGENCY RESCUE MEDICATIONS

The other exception to the above procedure is for emergency rescue medications.

This includes:

- inhalers
- EpiPens
- seizure medication

Medications that are administered in an emergency medical situation require a separate form, called an EMERGENCY MEDICATION WAIVER. These forms describe in detail for our staff the nature of a medical emergency that would require the medication to be given, how to give the medication, and how to proceed following the administration of the medication. If your child has the need for an emergency medication to be kept at the center, please email the director so that we can ensure that a proper emergency medication plan is in place.



## Outdoor Play

At St. Joe's CDC, we believe that outdoor learning should never stop—regardless of the weather. Outdoor play supports children's physical, cognitive, and social-emotional development, and it's a core part of our curriculum.

Children need daily time outside, even when it's wet, chilly, or muddy. Nature provides endless opportunities for exploration, risk-taking, and discovery.

Please dress your child appropriately with proper shoes and outer garments for the current temperature and weather. Shoes are required for children 1 year old and older for safe outdoor play. Because of rocks, sticks, mulch and other outdoor elements, we highly encourage closed-toe, flat shoes.



## ATTENTION! ATTENTION!

### WE GET MESSY!

Children are encouraged to dress in clothing that is comfortable, practical, and safe for PLAY! Learning can be messy, so consider that when choosing clothing to wear to the center.

Children who are 1 year old and up play outside daily (weather permitting), including short periods during winter months and even during light rain or snow.

**We don't want to miss any opportunity to make joyful memories in mud and puddles! For children over the age of 2 ½, please ensure that your child has:**

- **A raincoat, boots, and seasonally appropriate layers**
- **Extra weather-appropriate clothes to leave at school for wet or muddy days**

All children should have 2 whole sets of weather-appropriate clothing (including underwear and socks) for times when we get really messy!

We now accept donations of clothing to keep here for emergencies. Our stash is "just in case" and is mostly for potty training friends.



## Did I mention that WE GET MESSY??

We do not require one, however, we highly recommend if families choose to invest in a “mud suit” for **REALLY** messy play. You can find them on amazon by searching words like “toddler rain suit” or “muddy buddy” or “child coverall.”



A few other things to note regarding outdoor play:

- While we mostly believe “there is no such thing as bad weather, only poor clothing choices,” we do realize that weather can present real threats to safety. Temperature, weather, and air quality are all taken into consideration during outside play to maintain the health, safety and comfort of children.
- Most outdoor play at the center takes place on our fenced natural playground. However, the CDC is located on a large campus that provides ample green spaces and a covered pavilion for children and staff to enjoy. Each family signs an outdoor play waiver as part of the Enrollment Agreement that acknowledges the center’s use of the front lawn and other areas of the campus for outdoor play and/or campus walks.



## NATURAL PLAYGROUND

Our playground, located on the front lawn, is a natural space where children can explore and create. The playground is divided into 3 sections, allowing for different kinds of play and meeting the development needs of different age groups.



## SUNSCREEN

The center currently provides **Coppertone Pure and Simple** sunscreen for children aged 6 months and up. Staff apply sunscreen to exposed areas of skin, including the face, before going outside from the first day of April through the last day of September. Each family is required to sign the sunscreen waiver as part of the Enrollment Agreement. If a family chooses to send their own sunscreen, the over-the-counter form must be submitted and must indicate the brand of sunscreen they will be providing and directions for application. Families may also choose to provide hats, shirts or other protective clothing to prevent over-exposure to the sun during outdoor play.



## MOSQUITO SPRAY

From April to October, the CDC playground is sprayed by our pest company to help control mosquitoes during the summer. The playground is sprayed once per month. The director is notified when technicians arrive to spray, and all children are kept off the playground for the time recommended by the pest control company.

**GARDENING** As part of our Natural Playground, our 2–5-year-old children have access to gardening experiences. Children can plant, water, weed and harvest herbs and vegetables throughout the year. Mr. Finbar, our chef, then incorporates their harvest into a meal or snack. Voila! A miniature farm-to-table learning experience!



# Miscellaneous

## TECHNOLOGY / SCREEN TIME

The normal daily routine at St. Joe's CDC does not include television or other screen viewing. The use of screen time must be pre-approved by the child's family and CDC leadership, and must be:

- purposeful and supportive of the child's educational and developmental need
- age appropriate
- always monitored by staff

The following exceptions are noted in our annual enrollment agreement:

- Pre-K classes do a weekly viewing of instructional videos from the Leap Frog company that focus on letter recognition, letter sounds, numbers and counting (30 min per week max).
- Children ages 2 and up may use kid yoga, dance, or other movement related videos for movement time (30 min per day max).

## BIRTHDAYS & CLASSROOM CELEBRATIONS

Birthdays and holidays are days to enjoy and celebrate! Each classroom has special ways to honor birthdays and seasonal/holiday celebrations. Families often wish to contribute to classroom celebrations, and we encourage families to get involved! PLEASE NOTE, however, that due to the prevalence of food allergies, we ask that families NOT bring food for classroom celebrations.

Instead of food, we encourage families to get involved by working with the classroom teacher to plan a special non-food "treat" for the class. Consider donating a copy of your child's favorite book to the classroom and coming in to be a "guest reader" to share the book! Lead the class in a favorite game or activity from your family! Bring bubbles and celebrate outside with the class blowing bubbles! There are so many ways to celebrate!

Families sometimes ask to distribute birthday party invitations at the center. If every child in the class is invited, we are happy to allow invitations to be distributed in the classroom. We understand, however, that this is not always possible. When not inviting the entire class, the director can assist with connecting families for individual invitations.



## LOST AND FOUND

The CDC maintains a lost and found. If your child has lost an item, please check with CDC office staff. The location of the lost and found items at any given time depends on the number of items and the space needed to store them but typically can be found in the CDC Lobby just inside door #4. Periodically, the Director will send a last call for Lost and Found items via a message in Brightwheel, after which all items will be donated to Goodwill if not claimed.

## ITEMS FROM HOME

Except for items required (see “what to bring” sections), children should not bring items from home such as toys, chewing gum, candy, money, or other personal items to the center.

Transition objects (e.g. blankets, pacifiers, snuggle toys) are encouraged when needed for individual children to feel safe. Please note that blankets, snuggle toys and pacifier clips are not allowed in infant cribs.

The center staff cannot be held responsible for any items lost or damaged if brought to the classroom.

Toys from home are permitted only on “Show and Tell” Day.



## BABYSITTING

In-home babysitting is not a service of St. Joseph Child Development Center. CDC staff members are selected and retained based on their ability to render childcare services in a controlled and fully supervised childcare program. Families often ask staff to babysit. If families arrange for a staff member to provide care for their child(ren) off premises, the staff member undertake such services on their own behalf and not as an employee of St. Joseph CDC.

St. Joseph offers no assurance on the ability of its staff members for performing these and other services in an environment not professionally supervised, and none should be implied or inferred under any circumstances.

## CONFIDENTIALITY

All information concerning children and families participating in any of our programs is kept confidential. Staff are expected to maintain the privacy and confidentiality of families and children. All files are maintained and disposed of in a manner that protects privacy and confidentiality and in accordance with our regulatory requirements.

## GRIEVANCE PROCEDURES

Every family has the right to file a formal grievance if they believe that their rights have been violated. Most grievances can be resolved internally with open communication. Families may attempt to resolve the grievance by first speaking directly with the party from whom they feel the grievance originated or with the direct supervisor of that party. Should this not resolve the grievance, families may submit notice of grievance in writing according to the Grievance Policy and Procedure.

## REPORTING ABUSE AND NEGLECT

By law, all St. Joe's CDC employees are mandated reporters. This means that all staff of the center are required to report any suspected child abuse or neglect to Child Protective Services, in accordance with Kentucky administrative regulations and training.

## VOLUNTEERS

St. Joe's CDC occasionally has volunteers in our classrooms. Volunteers who work directly with children are subject to the same stringent background checks as our staff. At no time are volunteers left alone with children. Volunteers are not considered part of our staffing ratios.

## USDA NONDISCRIMINATION STATEMENT (PUBLISHED: 10/15/2015 8:28 AM)

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). This institution is an equal opportunity provider.

## RIGHTS OF THE CHILD AND PARENT

Kentucky Administrative Regulation 199.898 gives specific rights for children in childcare programs and their parents, custodians, or guardians. Those rights are as follows:

- (1) All children receiving child-care services in a day-care center licensed pursuant to KRS 199.896, a family child-care home certified pursuant to KRS 199.8982, or from a provider or program receiving public funds shall have the following rights: (a) The right to be free from physical or mental abuse; (b) The right not to be subjected to abusive language or abusive punishment; and (c) The right to be in the care of adults who shall meet their health, safety, and developmental needs.
- (2) Parents, custodians, or guardians of children specified in subsection (1) of this section shall have the following rights: (a) The right to have access to their children at all times the child is in care and access to the provider caring for their children during normal hours of provider operation and whenever the children are in the care of the provider; (b) The right to be provided with information about child-care regulatory standards, if applicable; where to direct questions about regulatory standards; and how to file a complaint; (c) The right to file a complaint against a child-care provider without any retribution against the parent, custodian, guardian, or child; (d) The right to obtain information from the cabinet regarding any type of licensure denial, suspension, or revocation of an operator, and cabinet reports that have found abuse or neglect by any child-care provider or any employee of a child care provider. Identifying information regarding children and their families shall remain confidential; (e) The right to obtain information from the cabinet regarding the inspections and plans of correction of the day-care center, the family child-care home, or the provider or program receiving public funds within the past year; and (f) The right to review and discuss with the provider any state reports and deficiencies revealed by such reports.
- (3) The child-care provider who is licensed pursuant to KRS 199.896 or certified pursuant to KRS 199.8982 shall post these rights in a prominent place and shall provide a copy of these rights to the parent, custodian, or guardian of the child at the time of the child's enrollment in the program.



**Thank You for choosing  
St. Joseph  
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childcare needs!**