frazer center
gather. learn. flourish.

The Frazer Center
Child Development Program

PARENT HANDBOOK
2026 - 2027

Frazer Center fosters inclusive communities where children and adults, with and without disabilities, gather, learn, and flourish.

This handbook outlines the policies and expectations of the Frazer Center's Child Development Program. By continuing enrollment, families acknowledge and agree to support the center's policies to maintain a safe and inclusive environment. Failure to adhere to the policies outlined in this handbook may affect your child's enrollment status at the discretion of Frazer Center administration.

CONTACT INFORMATION

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OUR MISSION

Frazer Center fosters inclusive communities where children and adults, with and without disabilities, gather, learn, and flourish.

OUR CORE VALUES

● *Inclusion:* Strength, creativity, and fun come from our diversity of people and ideas. ● *Welcome:* Everyone who enters our doors is valued, respected, heard, and supported. ● *Gifts:* Every person's unique talents are celebrated and contribute to our success. ● *Excellence:* As professionals, we always do our best and always work to do better. ● *Heart:* We are called to this work, and it shows in our passion and commitment.

OUR HISTORY

The Frazer Center is a nonprofit agency with a long-standing history of providing exceptional services to infants, preschoolers, and adults with physical and intellectual disabilities. The Center has assisted children, adults and their families with therapeutic, educational and vocational services that maximize the potential for independence since 1949.

Ann Lane and Rebecca Frazer, believed that children with cerebral palsy would benefit from remaining in the community and living with their families. Just two short years after they founded the Cerebral Palsy School Clinic, the school moved from the basement of a local church to the thirty-nine acre estate it currently occupies. Over the years, the program expanded its role in the disabilities community, first serving young children with cerebral palsy, then serving young adults as those children matured, and finally serving children and adults with a variety of disabilities.

The Center was later renamed Rehabilitation and Education for Adults and Children, Inc. (REACH) to reflect the diversity of the population. In January of 1999, the Center celebrated its 50th Anniversary by honoring the continued guidance of Rebecca Frazer and naming the

Center, “The Frazer Center.”

The Frazer Center is located in Druid Hills on the original estate of Cator Woolford, co-founder of Retail Credit Company, now Equifax. He began building his home on the property in 1916, and his mansion was the home of The Cerebral Palsy School Clinic until 1959. In 1959, a school building was built on the rear of the property, which the Frazer Center now inhabits. The beautiful property offers a serene setting which offers children and adults educational, recreational, and vocational opportunities.

The grounds include walking trails through the old-growth Frazer Forest and Cator Woolford Gardens. The Gardens are rented to the general public for wedding ceremonies and receptions, retreats, luncheons, dinners, corporate functions, and film shoots. They are listed on the National Register of Historic Places. Revenue generated from Gardens rentals directly benefits services provided by the Frazer Center.

OUR GOALS AND PURPOSE

PRESERVING THE EXPERIENCE OF CHILDHOOD

Adult values, experiences, and activities constantly press on the experience of childhood, pushing children into adult experiences before they are ready. The Center honors the experience of childhood, recognizing that children need time to be children so that they can progress and grow into healthy adults.

CREATING A CARING COMMUNITY

Modern life is challenging for most young families. The Center operates as a community of children, parents, staff, board members, and interested friends who work interdependently in support of each other’s healthy growth and development, and create joyful experiences in a loving environment.

FAMILY ARRANGEMENTS

The Frazer Center recognizes that families have different structures and that some families may live apart due to a variety of circumstances. Frazer Center teachers and staff are sensitive to the needs of children in these situations and will work to support the entire family. Please contact the Director of CDP to discuss what works best for you and your family so that appropriate accommodations can be put into place.

THE NATURE, PURPOSE, AND VALUE OF PLAY

At the Center, a primary requirement of our teachers is to have a comprehensive understanding of play and its relationship to learning. A primary goal of our program is to sustain and enhance the play activity of our children. As early education professionals, we make the statement that play is children’s “work.” Play is the activity by which children learn and develop. Research has proven that developmentally appropriate play-based early education helps children develop both

cognitive and social skills that are key to success throughout their life, including in the workplace.

PROVIDING A QUALITY WORK ENVIRONMENT

The Center treats its staff with care and respect, recognizing that the quality and well-being of the staff determines the quality of the program. We are committed to maintaining a supportive, professional work environment that enables our staff to deliver high-quality care and education.

PERSON-FIRST LANGUAGE

As an inclusive community, we want to put the person first in everything we do, including our speech. We strive to use person-first language, and encourage you to do so, too. This simply

means that when you are speaking or communicating about a person with a disability, recognize the person before the disability.

OUR PHILOSOPHY

The philosophy of Frazer Center is the foundation for the quality of experience provided to children. It shapes how the program is organized, how staff are selected, and how they interact with children.

At the Frazer Center Child Development Program, we promote the optimum development of each child. We recognize that every experience at the Center—learning and caring, play and work—is interconnected. Our goals are informed by the child and family, NAEYC (National Association for the Education of Young Children), Bright from the Start: Georgia Department of Early Care and Learning, and the Creative Curriculum educational approach.

We believe children learn best through play and child-directed learning. Our program follows the Georgia Early Learning and Development Standards (GELDS) to create a developmentally appropriate learning environment.

Our curriculum includes:
- Early Learning Curriculum for infants through preschool
- Creative Curriculum for Pre-Kindergarten students

We focus on promoting all areas of development:

- Physical development: gross and fine motor skills
- Social development: awareness, respect, cooperation, and sharing
- Communication: verbal and non-verbal skills
- Self-esteem: fostering self-awareness and a positive self-image
- Cognitive skills: comprehension, problem solving, and skill acquisition

Our approach encourages each child to develop their unique talents and supports a strong

foundation for continued learning and development.. We aim to create an “active learning” environment that supports kindergarten readiness through GELDS.

We empower children to become confident, life-long learners and caring individuals. Our program encourages children to engage in activities they initiate and carry out themselves. We provide opportunities for children to explore their community, ask questions, and solve problems in formal and informal ways. Our teachers guide children to develop the confidence and self-discipline necessary to gain increasingly sophisticated knowledge and skills.

ADMISSIONS POLICY AND PROCEDURES

Enrollment is open to any child—6 weeks of age through 5 years—without discrimination based on sex, race, color, national/ethnic identity, ability, or creed, provided the child will benefit from the program offered and not pose a threat to the health and safety of other children enrolled or to the staff. Enrollment priority is given to children with disabilities, siblings of currently enrolled children, and children of employees. A number of other factors are considered and determine admission of individual children, including the date of application and philosophic compatibility of parents or caregivers with the program.

The process of “matching” is also a central factor. In this process, the leadership team in the children’s program assesses the composition of the group. Factors considered in this process include but are not limited to: age/date of birth, characteristics of development, and balance of boys/girls in groups.

INITIAL APPLICATION PROCESS

Families interested in enrollment at the Center are asked to complete the following activities in the process of applying to the program:

- Visit our website at www.frazercenter.org to gain general information about our program and to schedule a tour.
- Submit the completed application form including a non-refundable $84 application fee per child. Applications may be submitted electronically via the website. *Parents with siblings already enrolled must follow the same procedure.*
- All children must be observed prior to enrollment. Most observations are completed during the initial tour of our facility. This individual screening provides an opportunity for us to observe each applicant in a peer group setting, and lasts approximately 30 - 60 minutes. The purpose of the observation is to help determine if our program is recommended for your child. If a child requires one-on-one therapeutic support in the classroom, families must have those arrangements made prior to enrollment.

Although the admission and the readmission process begins in the Spring, we do experience some vacancies during the year. We will contact families throughout the year as spaces become available; however, most of our enrollment vacancies occur in August of each year.

We hold everyone's applications on our wait list throughout the year in the event a vacancy occurs. Families who do not reply to the enrollment opportunity email, or who decline offers for enrollment two times will be removed from the waitlist.

ENROLLMENT FORMS

In addition to the application for admission, a packet of enrollment forms must be completed and signed *before* the child enters the program. Upon confirmation of admission, our Program

Assistant and/or Inclusion Specialist(s) schedules time with new parents to review all forms, requirements, and procedures.

TUITION

Tuition, Pre-K morning care and after care tuition, and Pre-K meal fees are due on the 1st of each month. Tuition is for the entire month, including holidays, regardless of attendance.

A deposit equal to one month's tuition is required to hold your child's spot in advance of their start date. After the child's ***last month of attendance***, the deposit will be refunded, less any outstanding fees, provided all withdrawal policies are followed and the parents are in good standing with the Center. Refunds may be withheld or adjusted under special circumstances, including but not limited to disruptions to the workplace or any unethical conduct.**.** If a family pays the deposit, and subsequently decides not to enroll, the deposit will be refunded, less a $200.00 administrative fee.

While Frazer Center values positive relationships between our staff and all children, we do not follow a continuity of care model where children remain with the same teacher as they progress. Because our dedicated staff serve all families within the Center, we kindly ask that parents do not hire current Frazer Center employees to provide private caregiving outside the Center. This helps ensure that our entire community benefits from their expertise. Please note that if a family hires a staff member away from the Center to serve as a full-time caregiver or nanny, the family will forfeit their deposit upon withdrawal from Frazer Center.

For your records, a statement showing the amount paid each month will be emailed to the primary payer on your account around the 15th of each month.

Additional details regarding tuition:

- Tuition is due on the 1st of each month regardless of whether the 1st is on a weekend or holiday.
- Please ensure your payment is received on time. Payments not received by the 5th will be charged a $35 late fee. Additional fees of $10/day will be assessed for every day after

the 5th that payment is late. If tuition is not paid by the 15th, enrollment may be terminated.

- Frazer Center's preferred method of payment is monthly automatic drafts to your bank account. This reduces the likelihood of late fees in case your payment isn't received on time. To sign up for automatic monthly bank drafts, please complete the EFT Authorization Form on the website at: https://www.frazercenter.org/child-development-program/eft-authorization-form. ● If you would prefer to make payments by check, please place them in the lock box in the lobby. Credit card payments are accepted and include a non-refundable convenience fee of 3%. A credit card authorization form is available on the website to fax or deliver to the Center in person. Please note that credit card processing is costly to the Center, so automatic bank draft or check is preferred if possible.
- A $35 service fee is charged for any returned check or declined credit card payment.

- Tuition will not be prorated should you decide to withdraw your child from the program before the required 30 day notice. See Withdrawal Policy (page 8) for more information. ● Tuition rates are increased as needed at the beginning of each school year (August 1) to cover the costs of increased expenses. Administration will make every effort to inform you of increases in a reasonable amount of time before they go into effect, typically with re-enrollment each spring.

LATE PICK-UP POLICY

Operating hours are 7:30– 5:30 for infants through preschool. After a 5-minute grace period, a late fee of $32 per child will be assessed. Please make all efforts to pick your child up on time to respect our teachers who need to go home to their families. Calling the Center does not waive the late pick-up fee.

PRE-K EXTENDED CARE FEES

To avoid unnecessary charges we ask for your cooperation in promptly picking up/dropping off your child after signing in and out. Pre-K hours are from 8:00 AM - 2:30 PM. After 2:35 PM a late fee of $32 will be billed. If you are interested in enrolling in Before Care and After Care, please contact the Pre-K Site Director and Program Assistant for more information. Before Care hours are from 7:30 AM - 8 AM and cost $93 per month. After Care hours are from 2:30 PM - 5:30 PM and costs $595 per month. Before and After Care costs $655 per month.

EXTENDED HOUR FEE INFORMATION

Parents will be billed $32 per day for each day you pick up after 2:35 PM, up to six days in a given month. If your child attends seven or more days of aftercare in a given month, and is picked up late you will automatically be billed for a full-month's tuition.

FINANCIAL AID

To assist families with the cost of tuition, a limited amount of financial aid is available. To apply

for financial aid, please complete the Financial Aid Application, which can be found on our website. Additional questions about Financial Aid should be directed to the Vice President of Finance and Administration.

ANNUAL FEES

ACTIVITY FEE

An annual activity fee of $147 is assessed September 1st to help provide art materials, enrichment activities, and special events for the children.

RE-ENROLLMENT FEE

A non-refundable re-enrollment fee of $60 will be assessed to all families on March 1st. If a family is choosing not to return for the upcoming school year, this information must be provided in writing, prior to April 1st, to the Director of CDP, Accounting Department, and Program Assistant.

WITHDRAWAL

It is important for your child to be given an opportunity to say good-bye and have a sense of closure when he or she leaves the program. Please let your child and the staff know in advance of your child's last day, so that the transition can be a positive experience for your child, his or her friends, and teachers.

A one-month written notification is required to withdraw your child from the program without penalty. The written notice must be given by the first day of the month. The Frazer Center does not prorate tuition for families leaving before the end of the month. This notice should be given to the Director of CDP, and the Accounting Department. Once notice is received, you will still be responsible for your full tuition for the next calendar month. Please make note that families who hire staff members away from the Center to serve as full-time caregivers/nannies will forfeit the refund of their deposit when withdrawing their children. Refunds may be withheld or adjusted under special circumstances, including but not limited to disruptions to the workplace or any unethical conduct.

OPERATIONAL DETAILS

HOURS OF OPERATION

The Frazer Center is open year-round, Monday through Friday. To ensure your child receives all scheduled meals, please plan to arrive before meal times. *Please note that parents are not permitted to enter the facility after 5:30 PM, except when attending scheduled Center events.*

MEAL TIMES

Breakfast

- 8:30 AM - 9:00 AM
- Pre-K Before Care 7:30 AM - 8:00 AM - Must register for this program

Lunch

- Infants and Young Toddlers 11:15 AM
- Older Toddlers and Preschool 11:30 AM
- Pre-K 12 PM

Afternoon Snack 2:30 PM (2:45 PM for Pre-K) - Pre-K families must register for this program

The Infant classroom schedules may vary slightly due to individual schedules. Parents of young infants are responsible for bringing formula/breast milk and jar food. Center food is available upon parent/guardian written request. See more information in your infant welcome packet.

HOLIDAYS

The Center observes several holidays throughout the year. Holidays will include Martin Luther King Jr. Day, Memorial Day, Juneteenth, July 4th, Labor Day, Thanksgiving, the Friday after Thanksgiving, Christmas Eve, Christmas, New Year's Eve, and New Year's Day. We are closed between Christmas Eve and New Year's Eve. ***Please refer to the School Calendar for holiday***

closures.

STAFF IN-SERVICE

In addition to holiday closures, the Center is closed to children for in-service training days throughout the school year. The dates can be found on the School Calendar available to parents on the website.

LOADING AND PARKING

Please adhere to posted signage regarding the speed limit (10 mph) and use caution when driving throughout the property and especially in the parking lot. The Center sees a lot of pedestrian and bike traffic on the property each day. There are families with small children and adults with disabilities moving through the parking lot at various times throughout the day, so please be on alert and drive carefully.

There is absolutely no parking or loading from the sidewalk directly in front of the building. Cars should not remain in front of the building idling for any reason, since this creates a potential health hazard. This area needs to remain clear of cars so that families with disabilities and emergency vehicles have easy access to the building. There are 15-minute active loading zones along the side of the building for your convenience. All other loading must be from the central or side parking lots. Additionally, parking is only allowed in designated spaces—please do not park on the grassy areas, driveway or sidewalks.

NOTE: The Frazer Center strongly encourages employees and families to remove all personal belongings from their vehicles when entering the building. While the Center does contract with a security patrol, has external cameras, and other security measures, the Center is not liable for loss or damage to personal property left in vehicles, even with security measures in place..

ENTRANCE TO THE CENTER

For the safety and security of all children and staff, all parents and visitors must enter and exit the building using the main entrance only. **Use of the Atrium doors is prohibited except during authorized functions taking place in the Atrium.**

The Ridgewood Road (back) gate is only open from 8:00 AM–5:00 PM Monday through Friday when the Center is open. It is closed at all other times. *This entrance is meant for Marta Mobility*

vehicles and emergency vehicles only. All other vehicles, including parents, staff, and visitors, must use the S. Ponce de Leon entrance, according to the DeKalb County zoning ordinance.

DROP-OFF AND PICK-UP

Electronic Sign-In/Sign-Out: Parents and guardians must electronically sign their child in and out each day using Brightwheel via the QR code located in the lobby. Please use the kiosk to complete this process before going to your child's classroom for drop-off or pick-up. This procedure helps us track everyone in the building and prevents unauthorized access.

Time Limit for Drop-Off and Pick-Up: Please limit drop-off and pick-up time to 5-10 minutes per child. If you need to stay longer, you are required to stop by the front desk to sign in and receive a visitor's pass or schedule a meeting with your child's teacher.

Drop-Off Transition Tips

We understand that drop-off times can sometimes be stressful for both children and parents. To make drop-off quick and easy, we suggest the following strategies:

- **Develop a Consistent Goodbye Ritual:** A special hug, high-five, or a few kind words helps provide reassurance and predictability.
- **Keep Goodbyes Brief and Positive:** Prolonged goodbyes can increase anxiety. A short, confident farewell lets your child know you'll be back soon.
- **Arrive on Time:** Being punctual helps your child settle into the daily routine smoothly. ● **Prepare the Night Before:** Lay out clothes, pack bags, and review schedules to minimize morning confusion.
- **Talk About the Day:** Before arriving, remind your child of exciting activities planned for the day to build enthusiasm.
- **Offer Encouragement:** Acknowledge your child's efforts and reassure them that you and their teachers are there to support them.
- **Communicate with Teachers:** Share any concerns or helpful information with your child's teachers during drop-off or through notes so they can support your child effectively.
- **Crying Child:** It is not uncommon for children to cry at drop-off. Please rest assured that our teachers are trained in comforting and redirecting children to help them transition into the classroom and feel secure..

Benefits of Quick Drop-Offs and Pick-Ups

- Helps children adjust smoothly to classroom routines and transitions.
- Reduces distractions and interruptions during critical learning and transitional times. ● Allows teachers to focus their attention on the children and the planned activities. ● Creates a calm and efficient environment that supports your child's sense of security.

Using these tips and understanding the benefits of quick drop-offs and pick-ups can help your child feel safe and supported, making the transition into their classroom a positive experience.

First-Time Visitors for Pick-Up: Anyone picking up a child for the first time must check in at the front desk with a valid photo ID for verification. Only individuals listed on your child's authorized pick-up form will be allowed to take the child unless we receive prior written consent from the parent or guardian via email or Brightwheel. We are unable to release a child to an unauthorized individual under any circumstances.

To add additional authorized pick-up persons, please complete the Authorization to Pick Up Child(ren).This form is available in the lobby or can be requested from the front desk.

Arrival Time: Children are expected to arrive before 9:00 AM to participate fully in classroom activities and support smooth morning transitions. Drop-offs after 10:00 AM may not be accommodated unless documentation of a medical appointment is provided. Please communicate with the front desk in advance if a late arrival is necessary.

Late Arrivals Policy

To support a consistent classroom experience, we ask that all children arrive before 11:30 AM. Children arriving after this time may not be admitted unless prior arrangements have been made due to special circumstances, such as therapy appointments or Early Intervention Program needs. Documentation may be required. Arriving late beyond this time disrupts the learning environment for both the child and their classmates.

We understand that sometimes late arrivals are unavoidable.Accommodations may be made for children receiving therapy, those enrolled in our Early Intervention Program, or those with individual support needs, in consultation with program leadership.

Thank you for your understanding and cooperation in supporting a consistent and focused learning experience for all children.

Pick-Up Promptness: To support uninterrupted classroom routines, we ask that pick-ups occur after 2:30 PM when possible. If you need to arrange an earlier pick-up, please notify the front desk and your child's teacher in advance so we can support a smooth transition.

Our staff have meetings and commitments immediately after school hours, so if you anticipate being late, please call the Center as soon as possible. If there is no answer, leave a message at the front desk or send a Brightwheel message for the closing administrative staff. Consistent late pick-ups may be addressed with a written notice or meeting to ensure alignment on expectations and staffing needs.

DRS. APPOINTMENTS AND RETURN TO SCHOOL

If your child has a morning doctor's appointment and you intend for them to return to school afterward, please ensure that you bring them back before their classroom naptime, ideally before 11:00 AM. If your child returns to the Center after the class's scheduled lunch period, please ensure they have eaten prior to arrival, as lunch service will not be repeated. For smoother routines in the classroom, we encourage families to schedule appointments outside of core instructional hours, when possible, to support consistency in classroom routines. Thank you for your cooperation in maintaining our classroom routines.

RELEASING YOUR CHILD

Normal procedure is to release a child to no one other than his or her parents or to another party the parents designate. **If someone other than a child's parents plan to pick a child up, please notify the teacher and the front desk as soon as possible.Verbal notice may be accepted only if the individual is already listed on the child's authorized pick-up list and has valid ID..** ***If the person is not on the list of designated parties, we must have written permission to release the child.*** **Written authorization may be granted by filling out an Authorization to Pick Up Form, available at the front desk or on the website,** to include the authorized person's full name, address, and phone number. Identification is required when someone other than the parent picks up a child as a measure of protection.Unless otherwise restricted by the parent or legal documentation, emergency contacts listed on file are considered authorized to pick up children in urgent situations.

If information is needed by the Frazer Center staff regarding custody please provide us with the formal paperwork. Frazer Center requires a copy of any legal custody documentation that limits parental access. Without such documentation, we must allow either parent to pick up their child. If a parent arrives in a manner that violates a legal order we have on file, the Center will contact the other parent and notify law enforcement to intervene. Law enforcement will be contacted to handle custody disputes and determine lawful action based on the documentation provided.

Additional Procedures:

- For children not picked up or dropped off by parents, a signed and dated Authorization to Pick Up Form is required.
- Staff will check the photo ID of any individual not personally known to them before releasing a child.
- If a parent is late without communication, emergency contacts will be called. ● All children must be signed in and out daily at the front lobby by a parent or guardian. ● Parents must always escort their children in the building and on the grounds. Siblings

must be supervised; children may not run in hallways.Unaccompanied children are not permitted to enter or exit the facility alone for safety and security reasons. ● Parents with multiple children should pick up infants first to avoid disruption. ● It is the parent or guardian's responsibility to ensure children are properly secured in an age-appropriate car seat. Staff will address any observed safety concerns directly with families, but Frazer Center is not liable for car seat compliance.

CURRICULUM AND APPROACH TO DISCIPLINE DETAILS

Experience Curriculum®, The Creative Curriculum®, and Second Step®

At Frazer Center, we provide developmentally appropriate, research-based curricula tailored to support every child's growth and learning stage.

Infant through Preschool Classrooms: Experience Curriculum®

Our Infant through Preschool classrooms use the Experience Curriculum®, a play-based program designed to foster physical, emotional, social, and cognitive development through responsive caregiving and meaningful exploration. This curriculum respects each child's unique pace and abilities while nurturing early brain development and strong caregiver-child relationships.

Parents receive weekly lesson plans outlining classroom activities and developmental goals, as well as monthly newsletters highlighting key learning themes and objectives. Additionally, a mobile app is used to share daily observations and track your child's progress, fostering ongoing communication between families and teachers. For more information, visit www.mothergoosetime.com.

Pre-Kindergarten Classrooms: The Creative Curriculum®

Pre-K classrooms implement The Creative Curriculum®, an evidence-based framework promoting comprehensive development in physical, social, emotional, communication, and cognitive domains. This curriculum encourages confident, independent learners equipped with lifelong skills for success.Parents receive monthly newsletters to keep informed about learning focuses and upcoming activities. Learn more at www.teachingstrategies.com.

Older Toddlers through Pre-K: Second Step® Social-Emotional Curriculum

To support social-emotional growth, our Older Toddler through Pre-K classrooms incorporate the Second Step® curriculum. This program teaches important skills such as empathy, emotion management, problem-solving, and positive communication. Second Step® helps children develop self-regulation and interpersonal skills essential for school readiness and healthy relationships.

NATURE-BASED CURRICULUM AND OUTDOOR PLAY

At Frazer Center, we believe that outdoor play is essential for children's physical health and gross motor development. Keeping specific children indoors during scheduled outdoor play time can lead to feelings of exclusion, isolation, or punishment, which we strive to avoid.

Children will participate in outdoor play daily except during times when conditions are unsafe or unsuitable, such as active precipitation, wind advisories, extreme temperatures, or high smog alerts. During such times, children will spend their outdoor play time indoors in the Atrium.

Children in Older Toddler, Preschool, and Pre-K classes participate in outdoor nature-based learning sessions twice a week. This outdoor learning time is in addition to their daily scheduled playground time. The benefits of being exposed to nature are significant. Research shows natural settings provide a restorative experience for both students and teachers. On our 39-acre campus, including the old-growth Frazer Forest, children have the opportunity to explore and learn in diverse ways.

Young children are to spend a minimum of an hour and a half outdoors each day, and infants are to spend an hour outdoors daily. Please dress your child appropriately and provide jackets or coats as needed according to the weather. Children should wear play clothes and shoes that adequately protect their feet and provide good traction, such as tennis shoes. Please avoid flip-flops or shoes without a back strap.

As our Center is located in a heavily wooded area, mosquitos and ticks can be a concern at certain times of the year. Please provide your child with insect repellent containing DEET to protect them from these pests.

If a child needs to remain indoors during scheduled outdoor play for health reasons, including infants, a doctor's note is required. Accommodations based on a doctor's note cannot exceed two weeks without re-evaluation and updated documentation. This ensures fair and consistent

support of each child's health and well-being.

We appreciate your understanding that outdoor play and outdoor learning are vital parts of our program and promote healthy physical and social development.

ASSESSMENTS AND SCREENINGS

At Frazer Center, ongoing assessment is an integral part of our curriculum to monitor each child's development and progress. This valuable information guides our curriculum planning and supports individualized learning tailored to each child's needs.

Assessment Components: Our assessments include developmental checklists, anecdotal notes, screenings, and work samples. These are compiled into a personalized portfolio for each child, which is maintained and updated throughout the year.

Assessment Methods: Most assessments occur naturally during play in small or large group settings within the daily routine. When more formal screenings are necessary, they are conducted one-on-one with a familiar teacher. These brief (10–15 minute) sessions are child-friendly and relaxed to ensure comfort.

Access to Portfolios: Each child's portfolio is securely available on Brightwheel. Parents receive formal summary reports during our twice-yearly virtual parent-teacher conferences (Fall and Spring). Access to portfolios is limited to Frazer Center staff and parents. Any sharing of assessment information beyond this requires written parental consent.

Parent-Teacher Conferences and Communication: Parent-teacher conferences provide an opportunity to review your child's academic and developmental progress. If families require assessment information in languages other than English or in alternative formats, please notify the Lead Teacher or Curriculum Coordinator.

Inclusion of IEPs and IFSPs: Children with an Individualized Education Plan (IEP) or Individualized Family Services Plan (IFSP) should submit these documents to be included in their portfolio and records. Teachers, parents, and administration collaborate to incorporate goals into the child's learning plan. Parents are encouraged to share home observations, such as through tools like the Ages and Stages Questionnaire, to support the assessment process.

Additional Screenings: Frazer Center may recommend additional screenings when beneficial. Parents will be informed, involved, and asked for consent prior to any assessments conducted by outside agencies or professionals.

PHYSICAL ENVIRONMENT

At Frazer Center, our physical environment is carefully designed to meet the developmental and safety needs of all children. Infants, toddlers, and preschoolers each have their own outdoor play areas with age-appropriate equipment and activity spaces that encourage safe, active, and engaging exploration.

Indoors, our classrooms are set up to promote independence, creativity, and social interaction. Learning centers are thoughtfully equipped with materials and furnishings suited to each age group's interests and abilities, fostering exploration and discovery in a warm and welcoming setting.

Safety is our top priority. All equipment, toys, and materials are regularly checked and maintained to meet the highest safety standards. Our facilities minimize hazards while encouraging movement and learning.

Together, our indoor and outdoor spaces create a rich and supportive environment where children can grow physically, cognitively, socially, and emotionally.

SCREEN TIME

Screen time is not allowed in classrooms except for educational lessons, programs, or online books that require screen use. Any use of screen time as a teaching tool must receive prior approval from the Curriculum Coordinator.

APPROACH TO DISCIPLINE AND GUIDANCE

We believe that clear, consistent, and appropriate limits are essential for the well-being and successful development of young children. Our approach focuses on fostering a positive sense of self-esteem and encouraging independent, responsible, and caring behavior.

The limits we set focus on two key areas:

- Not hurting oneself or others
- Respecting the physical environment

Our goal is to help children develop awareness in these areas and build effective “inner discipline” or self-control, reducing their need for adult-imposed control. We view setting limits as a learning process.

When a child’s behavior is unsafe or inappropriate, we use educational consequences that match the child’s age, behavior, and individual needs. Our first step is positive redirection—for example, guiding a child to another activity or facilitating “win-win” problem solving. These approaches generally work well.

If these strategies are not successful, we may use a “quiet corner” where the child can take a short, calming break with adult supervision. This space is child-initiated and intended to help the child regain control; it is not punitive like a “time out.” Please note, Frazer Center does not use “time out” as a discipline strategy.

Discipline at the Center is always meant to teach, not to punish. Additionally, children will never lose playground or outdoor time for disciplinary reasons. Physical activity, including outdoor play,

is part of every child's day.

Effective Strategies and Examples Teachers Use

To support positive behavior and help children learn appropriate social skills, our teachers use a variety of effective strategies, including:

- **Positive Reinforcement:** Praising children when they exhibit kind, respectful, or safe behavior, such as saying "Thank you for sharing your toys!"
- **Modeling Behavior:** Demonstrating respectful communication and problem-solving skills that children can imitate.
- **Clear Choices:** Offering limited, age-appropriate choices to help children feel empowered—e.g., "Would you like to build with blocks or draw a picture?" ● **Role-Playing and Storytelling:** Using stories or role-play activities to teach concepts like empathy, sharing, and cooperation.
- **Problem-Solving Discussions:** Guiding children through conflict resolution by helping them express their feelings and brainstorm solutions together.

- **Visual Cues and Reminders:** Using pictures, charts, or simple verbal reminders to reinforce classroom rules and expectations.
- **Setting Routines**: Establishing predictable daily routines to create a safe and secure environment where children understand what's expected.

If inappropriate behaviors continue despite these methods, the child's caregivers will be notified. Should challenges persist after working with the family and applying positive guidance, Frazer Center reserves the right to place a temporary suspension for the child. This measure helps avoid punitive practices while ensuring a safe and supportive environment for all.

BEHAVIOR SUPPORT AND INTERVENTION PROCESS

At Frazer Center, we believe in partnering with families to support children in developing positive behaviors. When challenging behaviors arise, we follow a collaborative, step-by-step approach called the Behavioral Protocol to understand and support your child.

1. Observation and Documentation
Teachers begin by collecting behavioral anecdotal notes. Both parents and the Curriculum Coordinator review and sign these notes to raise awareness about the behavior.

2. Classroom Observation and Strategies
The Curriculum Coordinator observes your child and classroom to identify possible triggers. They work with teachers to suggest strategies like adjusting the classroom environment, activities or providing additional support.

3. Behavior Protocol Initiation
If behaviors persist, parents will be notified through a formal letter that we will begin our

Behavior Protocol. Teachers will start tracking behavior daily using Behavior Incident Reports (BIRs), which document what happens and when. Copies are shared with parents and kept in the child's file.

4. Data Collection Using ABC Sheets

If challenging behaviors continue, teachers will complete an ABC (Antecedent-Behavior-Consequence) Data Sheet during identified behavior times to gather more detailed information. The Curriculum Coordinator reviews the data and coaches teachers on best strategies.

5. Implementation & Environmental Review

Next, the Curriculum Coordinator uses an Implementation & Environmental Checklist to ensure the classroom supports your child's needs and may recommend additional training for teachers.

6. Early Intervention Team Involvement

When behaviors continue, the Curriculum Coordinator refers the child to the Inclusion Team. The Inclusion Team reviews all documentation, meets with family and staff, and conducts

observations. They provide coaching for teachers and suggest inclusive support like social skills groups or adaptive equipment.

7. Follow-Up and Support Planning

A follow-up meeting with the Teacher, Curriculum Coordinator, Inclusion Team, and family reviews progress and determines next steps, which may include recommending formal Early Intervention services.

Throughout this process, communication and collaboration between staff and families are key to supporting your child's success.

DISENROLLMENT PROTOCOL FOR EXTREME OR REPETITIVE BEHAVIORS

We are committed to inclusive practices and supporting the diverse needs of all children, including those with developmental or behavioral challenges. In some cases of extreme or repetitive challenging behaviors, we follow a clear and fair process to ensure appropriate support for the child and family while maintaining a safe setting for all.

Step 1: Documentation and Communication

- Teachers will document behaviors with detailed anecdotal notes.
- Parents and the Curriculum Coordinator will review and sign these notes to acknowledge awareness of the concerns.

Step 2: Behavioral Protocol Initiation

- If behaviors continue, the administrative team will implement the Behavioral Support and Intervention Process (please see our dedicated policy for details).
- Parents will receive a formal letter from the Curriculum Coordinator notifying them that the behavioral protocol has been initiated.

Step 3: Suspension and Family Meetings

- If concerning behaviors continue, the administrative team may determine that a temporary removal (up to 1 day) is needed to maintain safety. This will always be followed by a family meeting to review concerns and collaboratively develop a support plan.
- If behaviors persist, a ***3-day suspension*** will be issued, followed by another family meeting to review progress and adjust supports as needed.

Step 4: Therapeutic Support Requirement

- If additional behavioral support is necessary, families may be asked to partner with an external behavioral specialist. Frazer Center will work with families to explore reasonable accommodations in alignment with licensing and safety requirements.

Step 5: Disenrollment

If behaviors do not improve despite these interventions and supports, Frazer Center reserves the right to disenroll a child only after all reasonable supports and interventions have been explored and when it is determined that the Center cannot safely or appropriately meet the child's needs, consistent with licensing regulations and

organizational policy. This decision is made with great care and only when it is clear that the program cannot safely meet the child's needs.

Our priority is always to work in partnership with families to support children's success. We encourage open communication and collaboration throughout this process.

CLASS ROSTERS

Class rosters are posted in the lobby mid-July, and the release date is shared with parents well in advance. While we understand that change can be difficult and some families may be disappointed if their child is not placed in the same classroom as a particular friend, we are unable to accommodate any parent requests for roster changes.

Teacher Room Assignments

Teacher assignments are typically announced in mid-July, and we share this information as soon as placements are finalized. Please note that every year, teacher room assignments are subject to change. This approach allows our teaching staff the opportunity to gain experience with different age groups and collaborate with various co-workers, enriching their professional growth and benefiting your child's learning experience. This is why we do not practice continuity of care, as rotating assignments help teachers develop a broader skill set and provide fresh, dynamic classroom experiences for all children.

How Class Assignments Are Made

When creating class rosters, we consider a variety of factors to ensure a nurturing and balanced learning environment, including:

- Diversity
- Gender balance

- Age range
- Learning abilities

Our goal is to provide each child with a rich classroom experience where they can thrive socially, emotionally, and academically. Please refer to the attached information on our universal learning approach to understand how we support diverse learners.

CLASSROOM PLACEMENT PROCESS

Classroom placements are developed collaboratively by teachers and the administrative team: ● Teachers provide detailed feedback based on each child's developmental progress. ● Our Curriculum Coordinators, Inclusion Team, and Director of CDP carefully review this information to thoughtfully craft class rosters that best support every student's needs.

These decisions are made with your child's best interests in mind and aim to foster inclusion, diversity, and personal growth. As children transition to new classes, they will have opportunities to build new friendships, embrace diverse perspectives, and expand their individual potential. 22

CLASSROOM TRANSITIONS

Families will be notified directly by the Curriculum Coordinators about transition dates and plans for their children.

Understanding that transitions can be challenging, we facilitate children to help children feel comfortable and confident in their new classroom environments before the school year begins.

During the July In-Service period:

- Current teachers will meet with new teachers to share transition notes highlighting each child's strengths, areas for improvement, and effective teaching strategies. ● Our Inclusion Team will hold individual meetings between outgoing and incoming teachers of students with special needs to share goals, strategies, and accommodations, ensuring a smooth transition from the outset.
- Additionally, the Inclusion Team develops individual transition plans for students enrolled in our Inclusion program. They collaborate closely with teachers and parents to create these plans. Parents and the Inclusion Team work together through a formal meeting to develop a transition plan tailored to the child's unique needs. The Inclusion Team also partners with Curriculum Coordinators to identify and support students who do not have an identified need but may require extra support during the start of the school year.

This collaborative approach supports a smooth transition and helps your child settle successfully into their new classroom.

If your child is transitioning out of our program—to Kindergarten or another school—we want to support you as well. Throughout your child's enrollment, we gather assessments, screenings, and portfolio information that can be very helpful to his/her new teachers and caregivers. Upon request, we will gladly provide you with copies of this information to share with your child's next educational setting.

RATIOS OF ADULTS TO CHILDREN

Our experience aligns with research that shows one of the most important factors in providing a high-quality environment for children is having an appropriate number of trained, professional teachers available for interaction and care.

Having more staff in the classroom not only ensures better supervision and safety but also offers children a wider variety of personalities and caregiving styles. This increases the chance that your child will find a “special someone” they connect with and bond to in their classroom. We believe that when a child forms such a bond, they are more likely to feel happy, secure, and thrive during their time at school.

AGE GROUP	NAEYC/QR RATIOS	STATE RATIOS	GROUP SIZE (MAXIMUM)
Infants	1:4	1:6	12
12-28 months	1:4	1:8	16
21-36 months	1:6	1:10	20
30-48 months	1:9	1:15	30
Four-year-olds	1:10	1:18	36

PARENT VOLUNTEERS

Research shows that parent involvement in children’s learning positively impacts student achievement levels. We believe that your participation at the Frazer Center will make a difference and will positively impact your child’s progress and development. We encourage all parents, legal guardians, and adult family members to become actively involved at the Frazer Center by serving as parent volunteers. Your time, talent, and enthusiasm are an integral part of the day-to-day functioning of the Center and the overall academic development of your child.

There are a number of ways you can volunteer at the Frazer Center. Possible volunteer

activities to support the Center include:

- Mystery Reader
- Fundraising activities
- Special events assistance
- Work in the forest
- Leadership activities such as serving as the parent representative for your child's class, and/or participation in the Parent Teacher Action Committee (PTAC)

WHAT TO BRING ON THE FIRST DAY

Please label all items with your child's first name clearly visible. To help your child have a smooth and comfortable start at Frazer Center, we ask that you send the following items on their first day:

- Diapers or pull-ups
- Wipes
- 3-5 changes of clothes (including underwear, socks, and outerwear)
- 1 pair of backup shoes
- Sunscreen and insect repellent — products must match those listed on the intake form ● Blanket for nap time
- Diapering creams and ointments
- 360° sippy cup **only** (for children 6 months and older) with your child's first name visibly displayed — no nipple or straw sippy cups allowed unless a medical note is provided ● Clear backpack measuring 12" x 12" x 6" **only**, with your child's first name visibly displayed ***(Backpacks are available for purchase through Frazer Center or can be bought online, such as on Amazon.)***

These are the essential items used daily in our classrooms. Please check with your child's teacher and Curriculum Coordinator regarding any additional supplies needed for your child's specific age group or classroom. ***Please refer to the age group Welcome Packets for age specific details.***

Please remember that children participate in activities involving paint, water, markers, glue, and other potentially messy materials daily. To ensure comfort and ease, dress your child in "play clothing" suitable for messy play. **Please refer to our Dress Code Policy for appropriate attire guidelines.**

Please note: If your child brings a sippy cup or backpack that does not meet these guidelines, **teachers will not allow the backpack or sippy cup into the classroom** and will send it home with your child. *Preschool and Pre-K children may bring their own water bottle of any kind.*

To maintain a safe environment for all children, Frazer Center requires that only clear backpacks measuring approximately 12” x 12” x 6” be brought to the Center. These backpacks are to be used solely for resupplying clothing and other non-hazardous personal items.

HAZARDOUS ITEMS AND BACKPACK POLICY

Prohibited items in backpacks include but are not limited to:

- Medication
- Sunscreen
- Insect repellent
- Lip balm
- Baby wipes or wet wipes
- Gloves
- Plastic bags
- Nut-containing snacks or products
- Sharpies or permanent markers
- Scissors or other sharp or broken items
- Any other items that could be considered hazardous or pose a safety risk

Any medication, including over-the-counter topicals, must be dropped off at the front desk with the program assistant, along with any relevant documentation from a physician. Labeled insect repellent and sunscreen may be dropped off directly with your child’s teacher, along with the insect repellent/sunscreen form completed in the intake packet.

In compliance with DECAL Bright from the Start regulations, all hazardous items must be physically handed to your child’s teacher or placed on the designated shelf above the cubbies. These items will be stored safely, out of reach of children or locked away, to protect the health and safety of every child in our care.

Children love to explore. Please do not bring toys, snacks, or candy unless requested by teachers for special occasions such as show-and-tell or classroom parties. Please note that no toy guns or weapons of any kind are permitted at the Center.

This policy helps us ensure the safety of our community and remain in full compliance with licensure requirements. If you need to provide any prohibited items for your child’s use, please coordinate directly with the Curriculum Coordinator.

STUDENT DRESS CODE

To maintain a safe, respectful, and comfortable learning environment, we ask that students adhere to the following dress code guidelines:

- **Jewelry:** No necklaces, bracelets, rings, hoop earrings, beads, or hair jewelry are allowed. Only stud earrings may be worn.
- **Shoes:** Shoes must have a secure backing (such as straps or closed heels) to provide proper support and safety during activities.
- **Makeup:** Makeup is not permitted for students.
- **Shorts and Skirts:** Shorts and skirts must be knee-length or longer. Short shorts and skirts are not allowed.
- **Under Dresses:** Children must wear biker shorts or similar undergarments beneath dresses for comfort and modesty.
- **Hazardous Items:** Children are not permitted to wear pacifiers or other hazardous items around their necks or attached to their clothing.

ARRIVAL AND HYGIENE POLICY

Children must arrive at the Center in a fresh diaper, pull-up, or underwear and with good personal hygiene. For health and safety reasons, we recommend that children's hair be pulled up or secured to help prevent exposure to lice.

We provide care only for well children. Children who are ill should stay home until their symptoms have subsided and they no longer pose a risk to the health and well-being of other students and staff. Please refer to our Illness Policy for more details.

CLOTH DIAPERS

Some parents may opt to use cloth diapers as opposed to disposable diapers. Cloth diapers must include an absorbent, inner lining that must be completely contained within an outer covering made of waterproof material that prevents the escape of feces and urine. Both the inner and outer covering must be changed as a unit during each diaper change.

BIRTHDAY CELEBRATIONS

Birthdays are a special time for each child to feel important and celebrated. We recognize that families have different ways of honoring these occasions and warmly welcome celebrations in the classroom with some guidelines to ensure safety and inclusivity:

- If you choose to bring treats for the class, all food items must be store-bought and **nut-free**. Homemade food is not permitted to be served in the classroom. ● Please notify the parents of all children in your child's class if you plan to bring treats, so they can choose to opt out if needed. Healthy treats are preferred to promote well-being. ● If balloons are part of your celebration, please do NOT bring latex balloons. Mylar balloons are acceptable and safer for the classroom environment.

We understand families may also host birthday parties outside of the Center. If you wish to invite classmates, please invite the entire class. You may send your invitations via email or provide a flyer to the Curriculum Coordinator to distribute through Brightwheel or email on your behalf. Due to confidentiality policies, we cannot share mailing addresses of families.

You are welcome to coordinate birthday celebrations directly with your child's teacher to ensure everyone is included and informed.

SLEEPING & REST TIME ACCESSORIES

State licensing regulations require each child under the age of one be placed on his/her back to sleep. Stuffed toys, pillows are prohibited. Children under the age of two cannot have a pillow at rest time.

Parents are asked to provide children sleeping on mats with a small blanket (labeled with child's first name) for rest time. Blankets are sent home every Friday to be washed. Children sleeping on mats are also welcome to bring a stuffed, soft animal or doll, as well as transitional items such as "lovies" or pacifiers to which the child is attached and finds comforting. It is the policy of the Center to give children who aren't sleeping a quiet activity after 30 minutes of rest. This determination is considered with the best interest of all children in the classroom. Children who do not sleep will not be required to remain on their mat for longer than an hour, in accordance with licensing requirements.

INFANT SLEEP POLICY (for all infants 12 months and younger)

- All infants will be placed on their backs to sleep, unless written medical instructions from the infant's primary health care provider directs otherwise.

- Infants capable of turning over by themselves from their backs to their fronts and back again will be allowed to remain on their stomach if the child rolls over. A sign will be visible on a child's crib when they are able to turn over by themselves.

- Infants will be placed on a firm mattress that will be covered by a tight-fitting sheet flush with the sides of the crib. Swaddling is not permitted.

- Health Code prohibits the following conditions or materials for use in an infant crib or bassinet: loose bedding, blankets, bumper pads, pillows, toys, and sleep positioning devices not medically prescribed.

- Every child will have their own designated crib/mat to sleep in.

- Infants will not be allowed to sleep or nap in a car safety seat.

- Infants will never be allowed to sleep in bouncy seats, infant swing, or highchairs, or other furniture/equipment not designed and approved for infant sleep purposes. Infants found sleeping in other than a safe sleep environment must be moved to a safe sleep environment upon discovery.

- All bibs, necklaces, and garments with ties or hoods are prohibited and will be removed before being placed in a crib. This reduces choking and tangling hazards.

- Staff will maintain constant line-of-sight supervision of observing sleeping infants every 15 minutes for signs of stress or distress that may require intervention (overheating, irregular breathing, etc.). If an infant is in any physical or medical distress, staff will take immediate emergency response as needed.

INCLUSION & EARLY INTERVENTION SUPPORT SERVICES

Inclusion is founded on the belief that young children with disabilities and their typically developing peers benefit from learning and growing together in the same classroom or community setting reflecting the rich diversity of society.

Research shows that:

- Access to regular early childhood curriculum and interaction with typically developing peers provides learning opportunities that may not exist in segregated or special education settings.
- Inclusive environments are more challenging, stimulating, and rewarding for all children compared to segregated classrooms.
- Typically developing children learn to develop positive attitudes toward differences, gain realistic understanding of disabilities, and strengthen their skills by assisting peers. ● Families can teach children about acceptance and individual differences in inclusive settings.
- Federal and state laws support educating children with disabilities alongside their same-age peers in the least restrictive environment possible.

At Frazer Center, our inclusive early education program embraces the meaningful participation of children with disabilities and developmental delays alongside their typically developing classmates. Inclusion means children with and without disabilities learn, play, and participate together in daily activities and routines.

Children with delays or disabilities are actively engaged—they build friendships, share celebrations, and form nurturing relationships with teachers. Each child receives individualized learning goals and the tailored support needed to achieve them.

We are committed to providing a nurturing, inclusive environment where every child can thrive.

How many children in the program have a disability or developmental delay?

According to the Centers for Disease Control, about 17% of children ages 3 to 17 in the United States have one or more developmental disabilities (physical, learning, language, behavior). It is difficult to estimate this number before age 3 since many disabilities are not recognized or diagnosed until children begin missing developmental milestones.

Frazer Center believes the most effective model for inclusion is one that reflects the diversity of our community. We strive for around 30% of our program enrollment to include children with diagnosed disabilities or those who do not yet have a diagnosis but who are receiving therapy and/or diagnostic treatment for developmental delays. We believe this mix allows us to provide

the level of support children with disabilities need to fully benefit from an inclusive classroom while providing a high-quality school readiness program for all children.

The percentage of children with disabilities varies by classroom. The percentage is usually lower among infants and young toddlers and higher among older toddlers and preschoolers because disabilities like autism are not usually diagnosed until a child is older. The percentage of children with disabilities also varies among classrooms in the same age group. For example, one preschool classroom might have only two children who have extensive support needs, while another classroom will have four children who need accommodations in the classroom, but who are more independent.

What is the definition of Inclusion according to the DEC (Division for Early Childhood) and NAEYC (National Association for the Education of Young Children)?

The defining features of inclusion–**access, participation, and supports**–are central to the mission and practices of our Inclusion Program. What Is Meant by Access, Participation, and Supports?

Access means providing a wide range of activities and environments for every child by removing physical barriers and offering multiple ways to promote learning and development.
Participation means using a range of instructional approaches to promote engagement in play and learning activities and a sense of belonging for every child.
Supports refer to broader aspects of the system, such as professional development, incentives for inclusion, and opportunities for communication and collaboration among families and professionals to assure high-quality inclusion.
— from the Joint Position Statement of the Division for Early Childhood (DEC) and the National Association for the Education of Young Children (NAEYC)

What type of Early Intervention Support is provided for all students at Frazer Center?

- The Ages and Stages Questionnaire, a screening tool for children's development, will be conducted twice a year in the Fall and Spring. Parents are asked to complete the assessment and return the results to their child's teacher
- Throughout the school year, teachers collect data and track development through observation based assessments. The results of these assessments are shared with

parents during our biannual parent-teacher conferences

- If it has been observed that a child may be displaying a developmental delay or challenging behaviors, the behavior protocol will be initiated. The behavior protocol is a Frazer-specific document that supports young children struggling during structured and unstructured activities. It allows the Frazer team to utilize all interventions before recommending that families explore options for community-based services. This may include (but is not limited to) speech therapy, ABA therapy, occupational therapy, physical therapy, or developmental pediatric or psychological evaluations. A licensed therapist or your healthcare provider should be consulted for diagnostic purposes.

What type of additional early intervention support is provided for children with a known developmental delay or disability?

Multidisciplinary Collaboration

- Collaboration is a cornerstone of quality inclusive education. For children who are eligible, an Early Intervention Support Team composed of parents, teachers, therapists, and an Inclusion Specialist is formed to provide additional early intervention support. All team members work together to ensure the child has a quality learning environment and an instructional plan that addresses their individual needs. Upon enrollment, guardians are given a Family Rights and Responsibilities Agreement form to ensure that parents have more information about their role in the Early Intervention Support Team.

What services or supports are provided by our Inclusion Team?

- Before orientation, the family will meet with the Inclusion Team. This meeting is meant to learn your child's strengths and developmental needs. Together, guardians help the Inclusion Team complete an information sheet that is used throughout the school year. The information gathered during this meeting will create individualized learning goals and determine which processes must be initiated. For any child who is determined to be medically fragile or requires any support such as feeding tubes or medication, a medical plan will also be created. Those specific policies and requirements will be reviewed with the Inclusion Team. DECAL regulations coupled with Frazer-specific policies will also be initiated during the meeting. Families will provide specific documentation and be given five business days to provide said documentation. If, however, a child does not have an identified medical need, only the Individualized Family and Child Support Plan will be created.
- Regular communication with therapists to ensure knowledge of a child's therapeutic goals
- Translation of therapeutic goals to the classroom setting. Our Inclusion Specialists are meant to bridge the gap between what is happening in therapy and support teachers and staff in integrating those therapeutic goals into the early learning environment.
- Regular time spent observing and interacting with the child and teachers in the classroom. After individualized goals are created, the Inclusion Specialists model effective techniques or adaptations for the teachers that will allow meaningful inclusion and help

each child progress with their individualized goals. After modeling, the Inclusion Specialists observe the teachers using the same techniques/adaptations and provide feedback. This process is iterative and will take place throughout the school year.

Can Frazer Center teachers or support staff provide one-on-one support for a child?

- Frazer Center's staffing model does not allow for one-on-one support. If it is determined that a child requires one-on-one support for a significant portion of the day to ensure meaningful inclusion or the safety of the child or the other children in the classroom, parents must obtain that support from an outside source (e.g. ABA services).

Access to therapy rooms

- Frazer Center does not have therapists on staff. However, we provide private therapy space for "pull-out" or adaptations for "push-in" services in the classroom for any child enrolled in the Inclusion Program. Outside therapists are welcome and encouraged to provide therapy on-site so we can work together to help each child progress in their development. Therapists will communicate with Inclusion Specialists and classroom teachers so that they are knowledgeable about the therapeutic goals and strategies that are in place.
- When applicable, our Inclusion Specialists can provide parents with information about therapy companies that currently provide services at Frazer Center.

Enrollment for children with a known developmental delay or disability

- After completing the online enrollment application, parents will receive an email from an Inclusion Specialist requesting an interview for initial screening. In addition, parents will be asked to provide the Inclusion Specialists with the most recent developmental evaluations and/or reports. This information will be reviewed by the Admission Team.
- Once the initial screening information is reviewed, if it is determined that Frazer Center cannot be recommended for a child's Early Education placement, every effort will be made to provide information and referrals for appropriate services in the community. If, after the initial screening information is reviewed, there is the potential for enrollment in the program, the Inclusion Specialist will contact the parents to schedule an in-house observation. This observation provides an opportunity for us to observe and interact with each child individually and in a group setting. The observation typically lasts approximately 45-60 minutes, and will take place in a classroom with children of a similar age. After the in-house observation, the admission team will meet to determine if enrollment in the program is recommended. Parents will be notified within 72 hours of the team's decision. If it is determined that Frazer Center cannot be recommended for a child's early childhood placement, every effort will be made to provide information and referrals for appropriate services in the community.

COMMUNICATION

Daily communication will be sent out via Brightwheel app which helps parents build connections with your child's teachers. Brightwheel helps to connect parents to the learning that is taking place in your child's classroom with daily reports, multimedia SEL playlists, engaging activities, and two-way messaging with your child's teacher. In addition, you will receive a monthly newsletter from your lead teacher, with an overview of the monthly curriculum, special events/dates, and classroom needs. A parent bulletin board also exists in the lobby for advertisement of community wide events and information of interest. Please also follow us on social media outlets @FrazerCenter.

COMMUNICATION WITH TEACHERS

At Frazer Center, we encourage all communication with your child’s teachers to be conducted through official Frazer Center channels only. Requesting or using personal cell phone numbers of staff is not encouraged. The Center is not responsible for any issues that arise from communication outside of our official systems.

Please refrain from texting or calling teachers on their personal phones. Our no personal cell phone use policy during classroom hours helps ensure teachers’ full attention is on your child’s safety and learning.

If you need to contact a teacher, please call the front desk at 404-377-3836. All communication related to Frazer Center business should occur via Frazer Center email accounts or by calling the front desk.

IMMUNIZATION AND ILLNESS POLICY

IMMUNIZATION AND HEALTH SCREENINGS

For the protection of all children and families, Children enrolled in the program must be current on immunizations recommended for their age by the American Academy of Pediatrics, unless exempt under Georgia law. Acceptable exemptions include a notarized Affidavit of Religious Objection (DPH Form 2208). The Program Assistant or Director must receive copies of immunization records within 30 days of enrollment.

Upon turning 4 years old, parents are required to submit vision, hearing, nutrition, and dental screenings within 90 days of enrollment or within 90 days of reaching their fourth birthday. If you are abstaining from immunizations for religious reasons, please submit a notarized Affidavit of Religious Objection to Immunization (DPH Form 2208).

If a child's immunization or health screening records are not received within the required timeframe, a temporary exclusion from attendance may be necessary until documentation is received. Families will be contacted to resolve the matter promptly.

Illness Exclusion Policy

- Parents must exercise good judgment and keep ill children at home, seeking medical attention as needed.
- Children exhibiting signs of illness too severe to comfortably participate, or when care for the sick child would compromise care for others, will not be allowed to attend or remain in the center.

● Contagious illnesses that risk spreading to other children or staff require exclusion.

Before Enrollment

- Families are encouraged to have a back-up child care plan in case of short or long-term exclusions due to illness.
- Inclusion/exclusion decisions will be made by program staff based on established criteria and capacity to care for the child safely.
- Emergency contacts listed must be reliable and responsive in case primary parents are unavailable.

SPECIFIC ILLNESS GUIDELINES

Children will NOT be allowed to attend while experiencing:

● Fever: 100.4°F or higher. Children must be fever-free without medication for 24 hours before returning. Temperatures will be rechecked 3 times before sending home. ● Vomiting: More than typical infant spit-up. Children must be free of vomiting for at least 24 hours before returning.

- Diarrhea: Frequent watery or green-colored stools not linked to food or medicine. After two incidents, exclusion applies until 24 hours symptom-free.

● Rash: Undiagnosed rashes (excluding mild diaper or heat rash) require a doctor's note with diagnosis, symptoms, contagious status, treatment, and clearance to return.

Additional Symptoms Requiring Parent Notification and Possible Exclusion

- Behavioral changes: unusual tiredness, irritability, crying, paleness, lack of appetite.

● Respiratory issues: wheezing, prolonged cough, yellow/green nasal discharge. ● Sore throat with concerning signs that may require culturing.

- Eye drainage indicating possible infection.
- Nosebleeds: After three or more in one day, children will be sent home for monitoring.

Procedures

- Children arriving with symptoms will be sent home.
- If symptoms develop during the day or a significant accident occurs, parents will be contacted immediately.
- Ill children will be supervised in a designated area of the classroom, away from others when possible, until picked up.

● After three attempts to reach parents, emergency contacts will be called. ● Parents must arrange for their child to be picked up within one hour of notification. If emergency contacts cannot be reached, the program may escalate to appropriate authorities or, in severe cases, emergency services to ensure the child's safety. ● In emergencies, 911 will be called alongside contacting parents.

- An illness report will be provided and must be signed by the parent or guardian to confirm receipt. This helps maintain clear communication about your child's health and care needs.
- **To support community health, children must remain home for the entire day following exclusion (not just 24 hours from symptom onset or medication). For example, if a child is sent home on Tuesday, the earliest they may return is Thursday, pending symptoms have resolved.**

Contagious Illness Notification

● Parents must notify the center immediately if their child contracts a contagious illness. ● The Center will notify affected classrooms about confirmed cases of contagious illness, including general information about symptoms, transmission, and control measures. No personally identifying information about the child or family will be disclosed.

Monitoring and Decision Making

● Classroom staff and administrators monitor children's health throughout the day. ● Attendance and return-to-care decisions after illness will be made by CDP administrators based on current Bright from the Start and public health guidance to ensure the safety and well-being of all children.

INCIDENT AND ILLNESS REPORT POLICY

To ensure clear communication and maintain the safety and well-being of all children, our center follows the Bright from the Start (DECAL) requirements regarding the documentation and notification of incidents and illnesses.

Documentation: Any incident or illness affecting a child during their time at the center will be documented promptly by staff using an official Incident or Illness Report form. This documentation will include detailed information about what occurred, any action taken, and the child's condition.

Parent Notification: Parents or guardians will receive a call anytime there is an incident or illness symptoms, no matter how big or small. Additionally, parents will be informed as soon as possible, and always within 24 hours of the incident or illness. The notification will include details necessary to keep families fully informed.

Parent Signature: Parents or guardians are required to review and sign all Incident and Illness

Reports. Signing the report acknowledges that the parent has been informed of the situation, but does not necessarily indicate agreement with the content. If a parent is unavailable to sign on the day the incident occurs, the report will be sent home for the parent's signature at the earliest possible time.

Brightwheel Notifications: Brightwheel messages are sent to families as reminders to sign the incident or illness reports upon pick-up.

Copies of Reports: Parents or guardians may request a copy of any Incident or Illness Report at any time.

Record Keeping: Signed copies of all Incident and Illness Reports will be maintained confidentially in the child's file.

MEDICATION POLICY

To ensure the health and safety of all children, our center follows the Georgia Department of Early Care and Learning (DECAL) Bright from the Start regulations regarding the administration of medication.

Medicine Administration Guidelines

We will administer prescription medication or over-the-counter (OTC) medication only with a completed Medication Authorization Form. Prescription medication requires a copy of the prescription. OTC medication must include dosing instructions consistent with the label or a doctor's note if dosage differs from standard instructions. If you bring medicine to school, you must:

- Provide a copy of your child's prescription or a written recommendation from the pediatrician for over-the-counter medication to the Assistant Director.
- Make sure the medicine is in the original, child-proof container labeled with your child's full name.
- Fill out a Medication Authorization Form, stating:
- What the medicine is
- The purpose of the medication
- When it is to be given
- The required dosage

Authorization forms are valid for up to two weeks for short-term medication. For ongoing conditions requiring long-term medication (e.g., allergies, asthma), an extended authorization and care plan must be submitted and updated every 3 months or as needed. All medication and authorization forms must be given to a CDP Administrator. No medication will be allowed to be left in the classroom.

The Center does not administer injectable medication except in emergency cases where an authorized Emergency Action Plan is in place, and only trained staff may administer such medication.All medications are stored securely in a designated locked cabinet or refrigerator (if

required), accessible only to authorized staff.

Additional Medication Guidelines

1. Authorization: Medication will only be administered with a completed and signed Medication Authorization Form from the parent or guardian in accordance with the doctor's instructions.

2. Types of Medication: We do not allow the administration of over-the-counter (OTC) medications unless accompanied by a doctor's written recommendation. Only prescription medications or OTC medications with a doctor's note and authorization will be administered.

3. Medication Storage: All medications will be stored in a secure, inaccessible location, with refrigeration if required.

4. Administration Procedures: Medication will be administered only by trained staff following the instructions on the authorization form. Staff will document each instance of medication administration including the date, time, dosage, and administering staff member's name.

5. Parent Responsibilities: Provide medications in sufficient quantity and ensure medication is current and picked up when no longer needed. Inform the center immediately, both verbally and with proper documentation, of any changes to your child's medication or health status.

6. Emergency Medications: Emergency medications (e.g., EpiPens, inhalers) must be provided with clear usage instructions and updated Healthcare Plans if applicable.

7. Refusal or Missed Medication: If a child refuses medication, staff will not force administration but will notify the parent immediately and document the refusal.

8. Exclusions: The center will not administer expired medications or any medication without proper authorization. Over-the-counter medications without a doctor's written recommendation will not be administered.

Medication will only be administered during center hours as specified on the authorization form. For ongoing or long-term medication needs, additional documentation such as a physician's treatment plan may be required.

FOOD AND NUTRITION POLICY

Frazer Center provides children with meals and snacks that support their overall wellness. Our kitchen manager is ServSafe certified, ensuring adherence to the highest standards of food safety, including basic food safety, personal hygiene, cross-contamination and allergens, time and temperature control, and cleaning and sanitation.

Meals and Menus

- A monthly menu is created in advance and shared with parents.
- Our menu offers a variety of foods with a focus on lean protein, complex carbohydrates, fresh vegetables, and fruits.
- *WG* = *Whole Grain*.
- Menu is subject to change without notifying.
- Meals and snacks meet or exceed the nutrition guidelines established by the Georgia DECAL Bright from the Start regulations and the Child and Adult Care Food Program (CACFP).

Milk Allergy Requirements

- If your child has a milk allergy, please provide a doctor's note specifying the type of milk and/or brand they can safely consume.
- If your child cannot have any type of milk, a doctor's note stating that they are limited to drinking only water is required.
- Please note that we cannot serve alternative milk options until the appropriate

documentation is on file.
- Should there be any new food restrictions or allergies, please inform the Program Assistant, or CDP Director.

Medical Documentation

We require a current medical statement signed by a licensed healthcare provider for any child with a food allergy or special dietary need. This documentation must specify: ● The child's allergy or dietary restriction

- The foods to be avoided or modified
- Appropriate substitutions or accommodations
- Any necessary emergency care instructions

Special Dietary and Feeding Needs

If your child has special dietary or feeding needs, an individualized feeding care plan will be developed and maintained, working closely with parents and healthcare providers.

Food Brought From Home

As we prioritize the health and safety of all our students, we kindly ask for your cooperation in adhering to our lunch and snack guidelines:

- We encourage you to pack nutritious snacks and lunches for your child to supplement any food provided at school that you may not want them to eat or if you anticipate they will not enjoy the offerings.
- Avoid sending foods that present choking hazards per licensing regulations, including grapes, hot dogs, popcorn, raw peas, hard pretzels, and raw carrots—even if sliced. ● All food must be labeled clearly with your child's name and the date.
- Food must be sent ready to eat; we do not warm up meals.
- Portion sizes should be appropriate; keep portions small unless your child has a larger appetite.
- Limit sweets and starches to no more than once a week. Sweets and chips often lead children to eat only these and neglect the more nutritious parts of their meal. ● The center provides milk or water in a cup during meals.
- Please aim to provide a balanced meal aligned with USDA food guidelines. Staff will supplement lunches that do not meet these standards.

Suggested Foods to Include:

- Proteins: pieces of meat, yogurt, cheese (with crackers), eggs, chicken, cottage cheese, tuna (Note: The Center restricts all nuts and nut butters due to allergies.) ● Fruits: any fresh fruit except grapes, unsweetened applesauce
- Vegetables: celery, peas, cherry tomatoes, raw broccoli or cauliflower, or other fresh vegetables (except raw peas or carrots)
- Carbohydrates: whole wheat bread, whole grain crackers

Meal Times, Supervision and Family Style Dining

● Frazer Center practices family style dining during meal and snack times to promote social interaction, independence, and healthy eating habits among children. ● Children are encouraged to serve themselves appropriate portions with guidance from staff, fostering motor skills and self-regulation.
● Staff model positive eating behaviors and engage with children to create a warm, inclusive mealtime environment.
● Family style dining supports children in developing decision-making skills about food and encourages trying new foods in a relaxed and supportive setting.
● Meals and snacks are served on a consistent schedule to promote healthy eating habits. ● Children are supervised at all times during meals to encourage safe eating and positive social interaction.

Food Safety and Hygiene

● All food preparation and serving follow strict hygiene and sanitation protocols mandated by DECAL Bright from the Start and CACFP.
● Children and staff wash hands before eating.
● Allergy prevention measures are strictly enforced to avoid cross-contact and protect children with food allergies.

Celebrations and Special Occasions

● Parents wishing to provide food for special events must coordinate in advance with the center to ensure compliance with allergy management and safety protocols. ● Healthy food options are encouraged for celebrations.
● The Center's provided food must be served first before any outside food is offered.

Compliance and Monitoring

● The center regularly monitors adherence to Georgia DECAL and CACFP nutrition standards.
● Staff receive ongoing training related to nutrition, food safety, and allergic reaction prevention.
● Parents will be notified promptly about any changes to menus or food policies.

NUT RESTRICTION

Frazer Center implements a strict program-wide policy that prohibits all nuts, including peanut butter, almond milk, and other nut-containing foods. The Center will not purchase or serve any

foods or snacks containing nuts. To maintain a safe environment for all children, especially those with nut allergies, we require the full cooperation of all parents in refraining from sending nuts or nut-containing items in your child's breakfast, lunch, or snacks.

FORMULA BOTTLES AND BREASTFEEDING

● All infants under 12 months old must have an up-to-date feeding plan on file that specifies the type of food or milk to be given, the time, and the amount. Bottles and feeding supplies must be properly labeled and handled. It is acceptable for parents to update existing feeding plans with new information rather than completing a new form each time there is a change in their infant's eating habits. The new information should be notated (i.e., initial or signed, and dated) to clearly indicate the information that was updated.

● We accept formula or breast milk for infants enrolled.

● All bottles—formula or breast milk—must be labeled with the infant's name and the date and come prepared.

● Formula must be mixed according to the manufacturer's instructions. Bottles cannot contain solid foods unless there are written instructions from a physician. ● Bottles will be heated only once using a bottle warmer; no microwaves will be used. ● Cow's milk may not be served to infants younger than 12 months.

● Parents must pack enough pre-made bottles for the day plus one extra bottle in case a bottle falls or the child requires an additional feeding.

● Breast milk must be provided in ready-to-feed sanitary containers and cannot be stored in the refrigerator for more than 48 hours (or 24 hours if previously frozen). ● If you choose to actively breastfeed your infant, please notify a staff member so we can accommodate your needs comfortably.

● Frazer Center offers several private breastfeeding rooms for parents and employees. Parents and employees are encouraged to use these private spaces whenever needed.

PARENT CODE OF CONDUCT

Frazer Center expects staff, parents, and all adult family members of enrolled children to behave in a manner consistent with the values our Center represents. Our goal is to provide an environment where individuals can gather, learn, and flourish. This ideal environment is the responsibility of every person who enters Frazer Center, including employees, parents, and family members.

Repeated or serious violations of this Code of Conduct by parents or family members may result in restricted access to Frazer Center property and may impact continued enrollment, subject to review by the administrative team. Employees are also expected to uphold these standards. Violations will be addressed in accordance with Frazer Center's Employee Handbook policies on conduct and discipline.

Core Expectations

- **Be Respectful:** We respect ourselves and others, including their ideas and feelings. Problems are solved through respectful dialogue and active listening. We care for our environment, equipment, and materials.

● **Be Responsible:** We take responsibility for our words and actions. When challenges arise, we seek positive and calm solutions through constructive problem-solving. ● **Be Safe:** We prioritize safety at all times to protect ourselves and others from harm. ● **Be Supportive of Learning:** We value advancing each child's growth and learning and support teachers and administrators in their educational roles.

Examples of Unacceptable Behavior

- **Bullying and Intimidation:** Includes physical, verbal, emotional, social, or cyber-bullying (e.g., hitting, pushing, name-calling, mocking, exclusion, spreading rumors, whether in person or through technology).
- **Harassment:** Behavior that demeans, humiliates, or embarrasses others (e.g., offensive jokes, yelling, personal insults, threats, inappropriate touching).
- **Abuse:** Any form of sexual, physical, or psychological abuse, including verbal or written. ● **Discrimination:** Against any person or group based on race, color, ancestry, nationality, ethnicity, religion, age, sex, gender, sexual orientation, marital/family status, income source, political beliefs, or physical/mental disability.
- **Endangering Others:** Acts that place others at risk of harm, including violence or threats (with or without weapons), and misuse of technology (email, social media) consistent with the Center's technology use policy.

Guidelines for Parent Conduct

● **Respectful Interaction:** Parents are expected to communicate respectfully with staff and other parents. Negative comments or disruptive behavior are prohibited. ● **Supportive Partnership:** Parents should collaborate with staff to support their child's education, respect educator expertise, and follow established communication protocols. ● **Constructive Feedback:** Feedback related to school policies, practices, or personnel should be constructive and submitted through appropriate school channels. ● **Confidentiality:** Parents must respect the privacy of other students and families, avoiding discussion of sensitive information in public forums.

Conflict of Interest, Babysitting, Confidentiality, and Respectful Communication

Conflict of Interest: Parents and guardians must avoid situations that create a conflict of interest with our staff. This includes refraining from requesting or engaging in personal arrangements with employees outside of our official programs and services.

Babysitting Policy: To maintain professional boundaries and avoid conflicts of interest, parents are strongly discouraged from requesting babysitting or other personal services from staff. Any such arrangements must not interfere with staff duties or violate Center policies. Such requests compromise professional boundaries and the integrity of our childcare environment.

Confidentiality: All interactions between parents and staff are subject to strict confidentiality. Staff members are bound to protect the privacy of all families and children in our care. Parents are expected to respect these confidentiality boundaries and understand that staff cannot share

personal information outside the scope of their professional responsibilities.

Respectful Communication: To ensure a positive and healthy environment, parents are encouraged to bring any concerns or feedback regarding staff to the administration directly. Repeated dissemination of unsubstantiated or inflammatory claims in public or online forums may be considered a violation of our respectful communication standards.

Consequences: If Frazer Center becomes aware that a parent has asked or pressured staff to babysit or engage in any personal childcare arrangement, or if there is evidence of negative talk or gossip that harms our work environment, these actions will be considered serious breaches of policy. In such cases, the employee involved may face disciplinary action leading to termination, and we reserve the right to review the family's continued participation in our programs.

CONFLICT OF INTEREST AND BABYSITTING POLICY

Frazer Center teachers owe their primary commitment to the Frazer Center, its students, and their families. The Center does not recommend, endorse, or become involved in arranging babysitting or private caregiving services between staff and families outside of Center premises. Any such arrangements are strictly between the parent and the staff member, and Frazer Center is not a party to these agreements.

To maintain appropriate professional boundaries and ensure the integrity of the caregiver-child relationship at Frazer, families are discouraged from engaging Frazer staff in personal caregiving arrangements outside of the Center. Employees may not offer or promote babysitting or caregiving services to families through Frazer Center channels, nor may they use Center communications or events to seek such arrangements.

Staff must exercise sound judgment when engaging in any outside caregiving work to ensure it does not interfere with their duties at Frazer Center. Employees must not disclose any information obtained through their role at Frazer—including details about children, families, staff, or Center operations—during any outside employment or caregiving arrangements.

All time spent providing outside babysitting or caregiving is considered personal time and is not compensated by Frazer Center. The Center disclaims any responsibility or liability for injuries or other claims arising during these private arrangements. Frazer Center's insurance, supervision, and child protection policies do not extend to any off-site or private caregiving activities. Families and staff who enter into such agreements do so independently and assume full personal responsibility.

Any breach of this policy by staff may result in disciplinary action, up to and including termination of employment. Families who knowingly participate in violations of this policy may also be subject to disenrollment at the discretion of Frazer Center leadership.

We appreciate your cooperation in maintaining professional boundaries and ensuring a safe, ethical environment for all children and families.

CLAIMS AGAINST STAFF AND FAMILIES

This policy outlines the procedures for addressing claims made against staff members and families within our organization. This policy aims to promote a safe, fair, and just environment for all staff and families, ensuring that claims are investigated thoroughly and fairly, while also protecting the rights and reputations of those involved.

1. **Evidence Requirement:** All claims made against staff or families will be taken seriously and evaluated through a fair and objective process. While final actions will be based on the available facts and findings, all concerns will be documented and reviewed.

2. Investigation Process: Upon the receipt of a claim, a preliminary assessment will be conducted to evaluate the credibility of the claim and gather initial information. A formal investigation will follow if there is sufficient evidence to warrant one. All parties involved will be required to provide statements and evidence relevant to the claim.

3. Interim Measures: If a claim warrants further investigation, temporary reassignment, administrative leave (with or without pay), or restricted duties may be implemented as appropriate. This is a precautionary measure and does not indicate wrongdoing. Parents may be temporarily prohibited from the premises pending the outcome of the investigation to ensure a safe environment for all.

4. Confidentiality: All parties involved in the investigation are required to maintain strict confidentiality regarding the details of the claim and the investigation process. Breaching confidentiality by sharing information with other staff members or families will result in disciplinary action.

5. Training and Warnings: Should an investigation conclude without sufficient evidence to the claim, the staff member (if accused) will receive no formal action. However, training or coaching may be offered as a preventative and supportive measure.

6. Retaliation Claims: Claims made with malicious intent or in retaliation against a staff member or family member are strictly prohibited. False or retaliatory claims made with malicious intent are considered a serious violation and may result in disciplinary action, up to and including termination or disenrollment..

7. Documentation: All claims, investigations, statements from involved parties and witnesses, and outcomes will be meticulously documented to provide a clear record of the investigation process.

8. Appeals Process: The staff and/or family have the right to contest the findings of an investigation by submitting a written appeal to the designated authority within **5 business days** of receiving the investigation outcome. The appeal should provide justification and any new evidence relevant to the case.

9. Review and Amendments: This policy will be subject to annual review and amendments as necessary to ensure alignment with best practices and organizational standards.

Consequences for Violations

1. **Verbal Warning:** Parents will receive a verbal reminder about the policy and potential consequences. An email will confirm the discussion for documentation.
2. **Written Warning:** If behavior continues, a formal written warning will be issued outlining the violation and future expectations.
3. **Meeting with Administration:** Parents may be requested to meet with school administrators to discuss the issue and clarify policies.
4. **Limited Access and Premises Restrictions:** Repeated violations may lead to restricted access to school events, volunteer opportunities, or meetings. In serious cases, specific parents or family members may be prohibited from entering the school premises to protect the community.
5. **Probation Period:** A probationary period may be established to monitor compliance. Continued violations during this time can result in more serious consequences. 6. **Temporary Suspension of Communication:** In cases of confidentiality breaches, communication privileges with staff or participation in meetings may be temporarily suspended.
7. **Disenrollment:** Continued or serious violations may result in the disenrollment of the family from the school.

Documentation: All incidents and actions taken will be recorded in the student's file to ensure transparency and to assist with future communications or actions.

FAMILY DISENROLLMENT POLICY

We strive to provide a supportive and nurturing environment for all children and families. However, there may be circumstances that necessitate the disenrollment of a child or family. This policy outlines the conditions and procedures related to disenrollment.

1. Reasons for Disenrollment

Disenrollment may occur for, but is not limited to, the following reasons:

- Non-payment or consistent late payment of fees
- Failure to comply with program policies and procedures
- Behavior issues that jeopardize the safety and well-being of the child, other children, staff, or families
- Parents or guardians breaching confidentiality
- Parents or guardians causing disruptions that affect the program environment
- Failure to adhere to our Code of Ethics
- Withdrawal of consent or failure to provide required documentation
- Extended absence without prior notification
- Video recording, audio recording, and taking photos of staff or other children, unless during a center event
- Any other cause deemed significant by the administration to warrant disenrollment

2. Notification Process: Whenever possible, families will receive written notice of disenrollment in advance, including the reason(s) and effective date. In certain cases involving serious safety concerns or egregious policy violations, immediate disenrollment may occur. This decision will be made at the discretion of the Director or designee and communicated to the family as soon as possible.

3. Final Enrollment Status: Upon disenrollment, all outstanding fees must be settled, and any materials or property belonging to Frazer Center should be returned promptly. Tuition deposits may be withheld in cases of policy violations, in accordance with the terms outlined in the enrollment agreement.

4. Commitment to Fairness: We are committed to ensuring that disenrollment decisions are fair, transparent, and in the best interest of all parties involved.

USE OF VIDEO, AUDIO, AND PHOTOGRAPHS

Our program values the privacy and security of all children and families. To safeguard student privacy under the Family Educational Rights and Privacy Act (FERPA), the following policy regarding the use of video, audio, and photographs applies:

1. Prohibited Personal Recordings: Parents, guardians, and visitors are prohibited from taking videos, audio recordings, or photographs within the Center, except during designated events authorized by administration. Any violation may result in restricted access to the facility or other consequences in accordance with Center policy.

2. Center Surveillance: The facility uses video cameras throughout the building, including classrooms, to promote child safety and security. Recordings are used for safety, training, and documentation purposes and are reviewed only by authorized personnel.

3. Educational Records and FERPA: Video, audio, and photographic records that are maintained by the center and directly related to a student are considered educational records under FERPA. Such materials are protected and may only be disclosed in compliance with FERPA regulations.

4. Access to Recordings: Parents or guardians may access recordings involving their own child upon request and under special circumstances, such as incidents requiring review. If a recording contains other children, access will be limited to segments where privacy can be reasonably maintained. The Center reserves the right to deny access to protect the confidentiality of others.

5. Consent and Use: The center obtains signed consent forms from parents/guardians regarding the use of photographs or recordings for educational and promotional purposes. Without consent, no images or recordings of children will be shared publicly.

6. Confidentiality and Distribution: All recordings and images are confidential and may not be distributed or shared outside of Center-authorized staff or the child's legal guardians without express written permission.

7. Violations: Unauthorized recording or distribution of protected media may result in removal from the premises, disenrollment, or referral to law enforcement when appropriate.

USE OF OBSERVATION ROOMS

To maintain a productive and respectful environment, parents wishing to observe classrooms through the operational observation rooms must adhere to the following procedures:

- **Scheduling Observations:** Parents must schedule all classroom observations in advance by making an appointment with the Curriculum Coordinator. Scheduling ensures that observations are coordinated and that both the parent and staff representatives view the classroom simultaneously, allowing for meaningful discussion of any concerns and collaborative problem-solving.
- **Joint Observation and Discussion:** Observations will be conducted jointly with a staff member or Curriculum Coordinator present. This shared observation experience allows both parties to see the same classroom activities and behaviors, facilitating constructive conversations and solutions tailored to your child's needs.
- **Observation Times:** Observations can be scheduled anytime during the day except between 12:30 PM and 2:30 PM, which is children's nap time and staff lunch breaks. The maximum observation time is one hour unless additional time is necessary.
- **No Recording Allowed:** To protect the confidentiality and dignity of all children and staff, the use of any recording devices during observation is strictly prohibited.

Parents are encouraged to work collaboratively with the Curriculum Coordinator and administration to support their child's growth and address any classroom concerns. For appointment scheduling please contact the Curriculum Coordinator.

CONFIDENTIALITY

Program staff and administration at the Frazer Center understand the importance of confidentiality regarding your family's information. Unless authorized to do so, personal information including address, phone number(s), and email addresses will not be released. Information related to your child will not be discussed with anyone other than Frazer Center staff members without your consent, unless required by law. Children's files are located in secure

locations, accessible to the program administrators. Access to records is limited to authorized administrative personnel, and files are kept in compliance with applicable child care and data protection regulations.

EMERGENCY PROCEDURES

The Center is well prepared for both individual and mass disaster emergencies. Several procedures have been established in order to provide for protection against and care in the event of an emergency.

SEVERE WEATHER, FIRE AND PHYSICAL PLANT EMERGENCY

In case of fire, the Center staff will follow the evacuation procedures posted by the exits. Children will be taken to a safe waiting area and parents/guardians will be contacted for pick-up. The Center conducts fire drills periodically to practice these procedures. Should parents arrive at the Center during a periodic evacuation drill, there will be staff members stationed in the driveway to halt traffic from moving into the upper lots while children are present. If parents are inside the Center when a drill occurs, please plan to participate. **Cars will not be allowed to enter or exit the upper lots during evacuation drills.**

In case of severe weather (tornado/storms) children and staff will be evacuated from rooms and into the central hallway as indicated by the exits. Parents/Guardians will be contacted as soon as possible, without compromising the safety of the children or the staff. The Center conducts tornado drills periodically to practice these procedures. **Children will not be released during severe weather occurrences.**

Please note, also, that if there is a problem as mentioned above, staff may not be able to answer the phones. Additionally, if there is a power outage, our phone system will not work. You will be contacted as soon as safely possible.

EMERGENCY CLOSURES AND INCLEMENT WEATHER POLICY

At Frazer Center, the safety of our participants and staff is our highest priority. Decisions regarding closing or modifying operating hours due to inclement weather or other emergencies are made independently of the local school districts and based on real-time conditions affecting our campus and surrounding areas.

The decision to close or delay opening will typically be made by 6:00 AM on the day of the potential closure. In rare cases where weather or emergency conditions worsen during the day, Frazer Center may decide to close early. In such cases, families will be notified by 12:00 PM to ensure ample time for safe pickup and staff departure.

Communication of Closures

Closure notifications will be shared through:

- Mass email or text alerts
- Direct phone calls when appropriate

- Frazer Center website or social media updates

Please ensure your contact information is current with our front desk to receive timely alerts. During emergency events, communication delays may occur due to power outages or high call volumes.

Expectations for Attendance

- If Frazer Center remains open, employees are expected to report to work if it is safe to do so.
- Families are encouraged to plan ahead for alternate child care in case local schools are closed but Frazer Center remains open.
- Employees are urged to make child care arrangements in advance for days when Frazer Center is open but other area schools are closed.

Decision to Close: Frazer Center will make the decision to close independently, always prioritizing the safety of participants and staff. The Center considers the ability to maintain mandated staff-to-participant ratios, as well as operational and financial challenges that may arise due to inclement weather.

Exceptions: Should conditions deteriorate during the day necessitating an early closure, families will be contacted by 12 PM and are urged to pick up children before the designated closing time to ensure safe travel for families and staff. In the event of unsafe conditions such as loss of power, heat, water, or other critical issues, immediate or extended closure may be implemented. Participants and employees will be notified as soon as possible.

Delayed Openings: Decisions to delay opening will be made independently with safety in mind. On delayed opening days, the Children's Program lunch schedule may be adjusted, so parents are asked to provide a snack before drop-off.

Inclement Weather, At-Risk Closings, and Makeup Days

- Due to the nature of our business, makeup days or tuition credits for missed days will not be offered.
- Frazer Center follows the DeKalb County School District's schedule for weather-related or unforeseen closures.
- Tuition fees remain the same regardless of attendance or closures. Families should plan accordingly.

Important Family Responsibilities

- Families are responsible for keeping contact information current with the front desk to receive timely emergency notifications.
- Please understand during weather events that communication may be delayed as our staff manages high call volumes or power-related issues. You will be contacted as soon as safely possible.

CHAIN OF COMMAND COMMUNICATION AND GRIEVANCE PROTOCOL

This policy establishes a clear communication protocol for parents to address concerns related to classroom activities, curriculum, or student matters. By following this structured approach, we promote respect, understanding, and efficient problem resolution within our school community.

Guidelines

1. **Individual Concerns Only:** All concerns must be expressed by individual parents, not groups. Group meeting requests and group emails are ***prohibited*** to ensure each parent's unique concern is properly acknowledged and addressed.

2. **Role of Classroom Representatives:** Parents may ask the classroom representative to schedule a meeting with teachers and the Curriculum Coordinator to discuss group concerns. This streamlines communication while ensuring multiple perspectives are shared responsibly.

3. **Avoiding Disruption:** Group communications to staff or administration can cause workplace disruptions, create divisions, and involve parents who may not wish to participate. Therefore, parents should address only their own concerns and refrain from representing others.

4. **Focus on Personal Concerns:** Concerns should specifically address your child and services provided. Issues concerning program policies, other families, or personal staff matters will not be addressed.

5. **Collaborative and Positive Feedback:** Frazer Center values constructive feedback related to your personal experience. We encourage positive, solution-focused communication to foster a supportive environment.

Steps for Addressing Concerns

1. **Initial Contact – Classroom Teachers:** Address your concern first with your child's classroom teacher. This encourages open dialogue and allows teachers to respond directly.

2. **Second Contact – Curriculum Coordinator:** If unresolved, contact the Curriculum

Coordinator. Please allow 24-48 hours for a response.

3. **Escalation to Director:** If needed, escalate to the Director with a written account of your concerns and previous communications.

4. **Response Time from Director:** The Director will investigate and respond within 3-5 business days. Please be patient during this review.

5. **Further Escalation to Human Resources:** If still unresolved, contact the Human Resources department, providing previous communication records for context.

6. **Final Escalation to CEO:** As a last step, concerns may be forwarded to the CEO with full documentation of prior communications.

7. **Skipping Steps:** Skipping any step will result in referral back to the beginning of the process. Following the full chain of command ensures proper resolution.

By adhering to the Chain of Command Communication Policy, parents can help ensure that concerns are handled in an organized and effective manner. We appreciate your cooperation in following this protocol, contributing to a respectful and constructive atmosphere within our school community.

To further support this spirit of collaboration, we distribute parent satisfaction surveys each fall and spring to gather your feedback.

REPORTING ABUSE OR NEGLECT

At Frazer Center, the safety and well-being of every child is our highest priority. Any suspected cases of abuse, neglect, or deprivation—whether occurring at home or within the Center—must be reported immediately.

All concerns should first be reported to the Director of Child Development Programs. If the Director is unavailable, reports may be made to any member of the administration team, who will ensure that the information is promptly forwarded to the Department of Family and Children's Services. This reporting is required by law.

Frazer Center Child Development Program staff are mandated reporters. This means staff are legally required to report any suspicions of child abuse or neglect. Staff who report concerns in good faith are protected from retaliation under Georgia law, even if the report is not substantiated.

Reports are treated as confidential within the Center. While reporter identity is not disclosed to the family by Frazer, mandated reports may include identifying information in DFCS records as required by law. To support the child's well-being, administrators and relevant classroom staff may meet to discuss behavioral or safety concerns. However, the details of a DFCS report remain confidential and are not shared with staff or families.

Additionally, the following serious incidents that occur while a child is in our care must be reported to Bright from the Start: Department of Early Care and Learning within 24 hours:

1. Death of a child
2. Any serious illness or injury requiring hospitalization or medical attention beyond first aid
3. If any employee acquires a criminal record while employed at the Center 4. Any lapse in supervision

Frazer Center is committed to maintaining a safe, supportive environment for all children and families. Frazer staff are trained on mandated reporting procedures during onboarding and through ongoing professional development, in compliance with Georgia law and Bright from the Start requirements. If you have any questions about our reporting procedures, please contact the Director of Child Development Programs.

SUPPORT US

With your support, the Frazer Center can continue to expand our programs, strengthen our community, and create even more spaces where everyone belongs.

We strongly encourage you to get involved. For more information about any of these opportunities, please contact Meredith Gray, Director of Development, at m.gray@frazercenter.org.

- **Annual Fund:** Making a gift every year has an impact in supporting the operations of the Center. Every dollar makes a difference and participation increases our availability to raise funds successfully through corporations and local and national foundations. Give online at www.frazercenter.org/give
- **Monthly Gift:** Adding an extra amount on your monthly tuition payment is an easy, but impactful, way to give back
- **Gift of Stock and Securities:** Reach out to your broker to have stock transferred to The Frazer Center's account with the information below. Please also notify

m.gray@frazercenter.org so we can correctly identify your gift.

Raymond James

Attn: Sean O'Toole

880 Carillon Pkwy

St. Petersburg, FL 33716

The Frazer Center's Account Number: 414AR308

Raymond James' DTC Number: 0725

- **Workplace Giving:** Many companies will double or triple your gift. Other companies will donate when their employee volunteers with an organization. This is an easy way to make a big impact!
- **Planned Giving:** Consider adding the Frazer Center in your legacy plans to support long-term plans for the Center.

ORGANIZATIONAL STRUCTURE

BOARD OF DIRECTORS

Roles and Responsibilities

The Board is responsible for overseeing and ensuring the welfare of the corporation as well as any and all activities of the organization; furthermore, it is responsible for ensuring that the philosophical integrity of the program remains intact. The Board does not concern itself with day-to-day design and management of the program except in its role of overseeing the Chief Executive Officer. It does concern itself with evaluating and approving the long-range development of services offered by the Center. As the legal body responsible for the Center, the Board carefully reviews the legal implications of all activities of the Center.

The Board is made up of community volunteers including interested parties from the finance industry, the political arena, the fundraising and development community, as well as therapists, educators, and pediatricians. We also strive to have an active parent on the Board at all times. If you are interested in becoming a part of the Board, please contact the CEO.

The majority of the Board's time and energy is devoted to financial affairs. One aspect of this activity involves approving the budget and overseeing the financial operation of the Center. The other primary aspect of financial activity involves raising funds to support the Center.

Illness Fact Sheets

Please refer to our illness policies for more information.

- Parents must notify the center immediately if their child contracts a contagious illness.
- Children exhibiting signs of illness too severe to comfortably participate, or when care for the sick child would compromise care for others, will not be allowed to attend or remain in the center.
- The Center will notify affected classrooms about confirmed cases of contagious illness, including general information about symptoms, transmission, and control measures. No personally identifying information about the child or family will be disclosed.
- Attendance and return-to-care decisions after illness will be made by CDP administrators based on current Bright from the Start and public health guidance

to ensure the safety and well-being of all children.

- Contagious illnesses that risk spreading to other children or staff require exclusion.

Conjunctivitis (Pink Eye)

Overview

Pink eye, also known as conjunctivitis, is one of the most common and treatable eye conditions. It is an inflammation (or swelling) of the conjunctiva, the thin, clear tissue that lines the inside of the eyelid and the white part of the eyeball. This inflammation makes blood vessels more visible and gives the eye a pink or red color.

Symptoms

- Pink or red color in the white of the eye(s)
- Swelling of the conjunctiva (the thin layer that lines the white part of the eye and the inside of the eyelid) and/or eyelids
- Increased tear production
- Feeling like a foreign body is in the eye(s) or an urge to rub the eye(s)
- Itching, irritation, and/or burning
- Discharge (pus or mucus)
- Crusting of eyelids or lashes, especially in the morning

Conjunctivitis always involves eye redness or swelling, but it also has other symptoms that can vary depending on the cause. These symptoms can help a healthcare professional diagnose the cause of conjunctivitis.

Pink Eye spreads by:

- Highly contagious; contact with secretions from eyes of an infected person or contaminated surface

Prevention Tips

- Hand Washing
- Clean and disinfect surfaces, toys, linens, and doorknobs frequently

- Avoid rubbing/touching eyes with unwashed hands
- If you or your child have been diagnosed with Conjunctivitis, you are to remain at home for 24 hours after beginning to utilize the prescribed medication from your physician.

When Can a Child Return to Childcare:

A child with pink eye (conjunctivitis) can generally return to childcare under the following conditions:

1. Viral Conjunctivitis: Typically, a child can return once their symptoms are improving and they are no longer experiencing excessive discharge or tearing. There is no specific time frame, but it's often advised to keep them home for at least a few days to avoid spreading the virus.
2. Bacterial Conjunctivitis: If a child is diagnosed with bacterial pink eye and prescribed antibiotic eye drops, they can usually return to childcare 24 hours after starting the medication, provided symptoms are improving.
3. Allergic Conjunctivitis: A child can return to childcare as soon as they feel well enough to participate, as it is not contagious.

It's always best to check with a healthcare provider for personalized advice and to follow the policies of the childcare facility regarding return-to-care protocols.

Hand washing is an effective method of preventing the spread of germs, including Conjunctivitis (Pink Eye). Cleaning and sanitizing surfaces and items that may be soiled with body fluids is also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing child care environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

More Information from the CDC:
Visit CDC's Conjunctivitis (Pink Eye) Website

Respiratory Syncytial Virus (RSV)

Overview

Respiratory syncytial (sin-SISH-uhl) virus, or RSV, is a common respiratory virus that usually causes mild, cold-like symptoms. People with RSV are usually contagious for 3 to 8 days and may become contagious a day or two before they start showing signs of illness. Children are often exposed to and infected with RSV outside the home, such as in school or childcare centers. They can then transmit the virus to other members of the family.

Symptoms

- Runny nose
- Decrease in appetite

- Congestion
- Coughing
- Sneezing
- Fever
- Wheezing or difficulty breathing

Antiviral medication is not routinely recommended to fight infection. Most RSV infections go away on their own in a week or two. However, RSV can cause severe illness in some people. Call your healthcare professional if you or your child is having difficulty breathing, not drinking enough fluids, or experiencing worsening symptoms.

RSV can spread when:

- A person who has RSV coughs or sneezes near you
- You get virus droplets from a cough or sneeze in your eyes, nose, or mouth ● You have direct contact with the virus, like kissing the face of a child with RSV ● You touch a surface that has the virus on it, like a doorknob, and then touch your face before washing your hands

Prevention Tips for Children with RSV (Respiratory Syncytial Virus) 1. **Hand Hygiene:** Teach children the importance of washing hands frequently with soap and water, especially after using the bathroom, before meals, and after coming home from public places.

2. **Avoid Close Contact**: Keep young children away from individuals who are sick, particularly during RSV season, which typically peaks in the fall and winter months. 3. **Limit Exposure:** Avoid crowded places and public gatherings during peak RSV season to reduce the risk of infection.

4. **Promote Cough Etiquette:** Encourage children to cover their mouths and noses with a tissue or their elbow when coughing or sneezing to prevent virus spread. 5. **Disinfect Surfaces:** Regularly clean and disinfect commonly touched surfaces, toys, and shared items to minimize the risk of transmission.

6. **Breastfeeding:** If possible, breastfeeding can provide antibodies that may help protect against RSV.
7. **Healthy Lifestyle:** Encourage a balanced diet, regular exercise, and adequate sleep to strengthen the immune system.

8. **Avoid Smoking:** Maintain a smoke-free environment as exposure to tobacco smoke can increase the severity of RSV infections.

Return to Childcare Guidelines:

Children infected with RSV can typically return to childcare when:

1. **Symptoms Improve:**
    - If a child has been fever-free for at least 24 hours without the use of fever-reducing medications and is no longer exhibiting severe respiratory symptoms.
2. **Doctor's Clearance:**
    - It's beneficial to consult with a healthcare provider for personalized advice, as some children may need additional time to recuperate.
3. **No Transmission Risk:**

- Ensure the child is no longer contagious, which usually occurs when symptoms significantly improve and respiratory secretions have decreased.

By adhering to these prevention tips and understanding when a child can safely return to childcare, parents can help protect their children and others from RSV.

Hand washing is an effective method of preventing the spread of germs, including RSV. Cleaning and sanitizing surfaces and items that may be soiled with body fluids is also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing child care environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

More Information from the CDC:
Visit CDC RSV Information

Influenza (Flu)

Overview

Influenza (flu) is a common contagious viral respiratory illness that can affect the nose, throat, and lungs. Flu viruses spread mainly by droplets made when people with flu cough, sneeze or talk. Flu illness can vary from mild to severe.

Symptoms

- Fever or Feeling Feverish/Chills
- Cough
- Sore Throat
- Runny or Stuffy Nose
- Muscle or Body Aches
- Headaches
- Fatigue

- Vomiting and Diarrhea (more common in children than adults)

Influenza presents the same common respiratory symptoms as many other illnesses. Therefore, it is impossible to tell for sure if you have the flu based on symptoms alone. If your doctor needs to know for sure whether you are sick with the flu, there are laboratory tests that can be done. Also after evaluating you, your doctor may choose to diagnose you with flu without the need for testing based on your symptoms and his or her own professional judgment.

How the Flu Spreads

The influenza virus spreads in several ways:

1. **Person-to-Person Transmission:**
    - When an infected person coughs, sneezes, or talks, they release respiratory droplets into the air. These droplets can be inhaled by people nearby.
2. **Surface Contamination:**
    - The virus can survive on surfaces and objects for several hours. If a person touches a contaminated surface and then touches their mouth, nose, or eyes, they can become infected.
3. **Airborne Transmission:**
    - In some cases, small virus particles can remain suspended in the air and be inhaled by others even after the person with the flu has left the area.
4. **When people are contagious:**
    - Influenza viruses can be detected in most infected persons beginning one day before symptoms develop and up to five to seven days after becoming sick. People with flu are most contagious during the first three days of their illness. Some people, including young children and people with weakened immune systems may be contagious for longer periods of time.

Prevention Tips

- The U.S. Centers for Disease Control and Prevention (CDC) recommends annual flu vaccination for everyone age 6 months or older. The flu vaccine can lower your risk of getting the flu.
- Cover your mouth and nose when coughing or sneezing
- Avoid touching your face
- Also avoid anyone who is sick. And if you're sick, stay home for at least 24 hours after your fever is gone so that you lessen your chance of infecting others.

Return to Childcare Guidelines:

Children with the flu should stay home until the following conditions are met:

1. **Fever-Free:**
    - They should be fever-free for at least 24 hours without the use of fever-reducing medications.
2. **Symptom Improvement:**
    - Symptoms such as cough, sore throat, fatigue, and body aches should be

improving. They should be able to participate in activities without discomfort. **3. General Well-being:**

- Children should have the energy and ability to engage in regular activities at childcare without compromising the care of other children in the program.

Hand washing is an effective method of preventing the spread of germs, including influenza. Cleaning and sanitizing surfaces and items that may be soiled with body fluids is also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing child care environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

More Information from the CDC:
Visit Flu Symptoms & Diagnosis

Head Lice

Overview

Head lice are tiny insects that feed on blood from the human scalp. Head lice most often affects children. The insects usually spread through direct transfer from the hair of one person to the hair of another. Head lice have three forms: the egg (also called a nit), the nymph, and the adult.

Symptoms

- Tickling feeling of something moving in the hair.
- Itching, caused by an allergic reaction to the bites of the head louse.
- Irritability and difficulty sleeping; head lice are most active in the dark. ● Sores on the head caused by scratching. These sores can sometimes become infected with bacteria found on the person's skin.

A person is contagious when:

- When there are live lice on the head.

Prevention Tips

- Avoid head-to-head (hair-to-hair) contact during play and other activities at home, school, and elsewhere (sports activities, playground, slumber parties, camp). ● Do not share clothing such as hats, scarves, coats, sports uniforms, hair ribbons, or barrettes. ● Do not share combs, brushes, or towels. Disinfect combs and brushes used by an infected person by soaking them in hot water (at least 130°F) for 5–10 minutes. ● Do not lie on beds, couches, pillows, carpets, or stuffed animals that have recently been in contact with an infected person.
- Machine wash and dry clothing, bed linens, and other items that an infected person wore or used during the 2 days before treatment using the hot water (130°F) laundry cycle and the high heat drying cycle. Clothing and items that are not washable can be dry-cleaned OR sealed in a plastic bag and stored for 2 weeks.
- Vacuum the floor and furniture, particularly where the infested person sat or lay. However, spending much time and money on house cleaning activities is not necessary to avoid reinfestation by lice or nits that may have fallen off the head or crawled onto furniture or clothing.
- Do not use fumigant sprays or fogs; they are not necessary to control head lice and can be toxic if inhaled or absorbed through the skin.
- Keep hair up in braids, pony tails or messy buns whenever possible

Prevent spreading:

- Should be watched closely for 2 weeks for new head lice. Close contacts need to be examined and treated for crawling lice. **At home:** wash bedding and clothes in hot water or dry-clean or seal in a plastic bag for 10 days. Avoid sharing beds, combs and brushes. **At school**: avoid sharing headgear; hang coats separately; use an individual pillow and sleep mat.

Return to Childcare Guidelines:

- Children can return to childcare after treatment from a licensed professional (pediatrician/Lice Ladies) Treatment note is required.

Lice Ladies:
17 Executive Park Dr NE Suite 230, Atlanta, GA 30329
1-888-924-5423
http://www.liceladiesatlanta.com/

More Information from the CDC:
Visit CDC Head Lice Information

Strep Throat Fact Sheet

Overview

Strep throat is a bacterial infection caused by group A *Streptococcus* or “Group A Strep.” Individuals who are sick with strep throat are considered highly contagious.

Symptoms

- Sore Throat
- Pain when swallowing
- Fever
- Red and Swollen Tonsils

- Tiny Red Spots on the Roof of the Mouth,
- Swollen Lymph Nodes in the Front of the Neck

Your doctor can do a quick strep test to see if group A strep bacteria are causing your sore throat. If the test is positive, your doctor can prescribe antibiotics. Antibiotics help you feel better sooner, prevent serious health problems, and help prevent spreading the bacteria to others.

Strep Throat can spread by:

- Contact with droplets from nose and mouth; close crowded contact

Prevention Tips

- Wash your hands often
- Cover your mouth and nose when coughing or sneezing
- Do not drink from the same glass, eat from the same plate, or share utensils with someone who is sick
- If you have strep throat, stay home from work, school, or child care until you no longer have a fever and have taken antibiotics for at least 24 hours. This will help keep others from getting sick

Return to Childcare Guidelines

- A child can typically return to school 24 hours after starting appropriate antibiotic treatment for strep throat, provided their fever has subsided and they are feeling well enough to participate in school activities.
- It's essential for the child to complete the full course of antibiotics as prescribed by a healthcare provider.
- Additionally, they should be free of any symptoms such as sore throat or significant fatigue before returning to ensure a smooth transition back to school without compromising the care of other children in the program.
- Always consult with a healthcare professional for specific recommendations regarding your child's health.

Causal contact with an infected person rarely leads to illness. The incubation period for streptococcal bacteria is 2-5 days after exposure.

Hand washing is an effective method of preventing the spread of germs, including strep throat. Cleaning and sanitizing surfaces and items that may be soiled with body fluids is

also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing child care environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

More information from the CDC Visit:
https://www.cdc.gov/group-a-strep/about/strep-throat.html

Croup

Overview

Croup is an illness that is usually caused by a virus. The tissues of the windpipe (trachea) and voice box (larynx) become swollen. The swelling narrows the trachea, which makes it harder for air to get into the lungs.

Symptoms

- A runny nose, a stuffy nose, and slight cough
- A cough that turns into a "seal's bark"
- Laryngitis (losing his or her voice)
- Fever

How its spread:

1. **Person-to-Person Transmission:**
   - Direct contact with a person, or fluids from another person. Contact with droplets from the nose, eyes or mouth of an infected person.
2. **Surface Contamination:**
   - Croup Virus can live on surfaces (toys, tissues, doorknobs) for several hours.
3. **Respiratory Droplets:**
   - When an infected child coughs or sneezes, tiny droplets containing the virus can be inhaled by other children nearby.
4. **Close Environments:**
   - Croup often spreads in close quarters, such as daycare centers or schools, where young children are in close proximity to another.
5. **When children are contagious:**
   - Children are contagious from the day before symptoms begin to 5 days after **onset.**

Prevention Tips:

- Cover your mouth and nose when coughing or sneezing.
- Avoid touching your face.
- Also avoid anyone who is sick. And if you are sick, stay home for at least 24 hours after your fever is gone so that you lessen your chance of infecting others.
- Hand washing is an effective method of preventing the spread of germs, including Croup. Cleaning and sanitizing surfaces and items that may be soiled with body fluids is also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing child care environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

When Can Children Return to Childcare:

Children with **Croup** should stay home until the following conditions are met:

1. **Fever Free:**
   - Children should be fever-free for at least 24 hours without the use of fever-reducing medications.
2. **Symptom Improvement:**

- Children with croup can typically return to school when they are feeling better and are fever-free for at least 24 hours without the use of fever-reducing medications. It's also crucial that their symptoms, such as coughing and breathing difficulties, have improved significantly**.**

3. General Well-being:

- Children should have the energy and ability to engage in regular activities at childcare without compromising the care of the other children in the program.

More information from the CDC Visit:
https://www.hopkinsmedicine.org/health/conditions-and-diseases/croup 71

COVID-19

Overview
COVID-19 most often causes respiratory symptoms that can feel much like a cold, the flu, or pneumonia. COVID-19 may attack more than your lungs and respiratory system. Other parts of your body may also be affected by the disease. Most people with COVID-19 have mild symptoms, but some people become severely ill.

Symptoms

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Sore throat
- Congestion or runny nose
- New loss of taste or smell
- Fatigue
- Muscle or body aches
- Headache
- Nausea or vomiting
- Diarrhea

COVID can spread by:

COVID spreads when an infected person breathes out droplets and very small particles that contain the virus. Other people can breathe in these droplets and particles, or these droplets and particles can land on others' eyes, nose, or mouth. In some circumstances, these droplets may contaminate the surfaces they touch. Anyone infected with COVID can spread it, even if they do NOT have symptoms.

Return to Childcare Guidelines

- Children can go back to normal activities when, for at least **24 hours**, **both are true**:
    - Symptoms are getting better overall, **and**
    - Not had a fever (and are not using fever-reducing medication).

- Please, take added precaution over the next 5 days, such as taking additional steps for cleaner air, hygiene, masks, physical distancing, and/or testing. This is especially important to protect people with factors that increase their risk of severe illness from respiratory viruses.
    - Keep in mind that children may still be able to spread the virus that made them sick, even if they are feeling better. They are likely to be less contagious at this time, depending on factors like how long they were sick or how sick they were.
    - If they develop a fever or start to feel worse after returning to activities, stay home and away from others again until, for at least 24 hours, both are true: symptoms are improving overall, and they have not had a fever (and are not using fever-reducing medication). Then take added precaution for the next 5 days.

When a positive case of COVID is reported to us, the affected classroom(s) will be notified within 24 hours. The person testing positive is required to stay home until they are fever-free (without the use of medication) for at least 24 hours, and symptoms are improving. If a staff member or visiting therapist tests positive, they are required to wear a mask for 5 days upon their return. If it is a child who tests positive, we strongly advise parents to send their child back to school with a mask. However, we leave that decision to the parents.

We ask that everyone err on the side of caution, to help ensure the safety of everyone at Frazer Center. **If your child, or someone in the household, develops symptoms that may be**

related to COVID-19, or another contagious illness, we ask that you remain home until a diagnosis can be obtained.

Hand washing is an effective method of preventing the spread of germs, including COVID and respiratory illness. Cleaning and sanitizing surfaces and items that may be soiled with body fluids is also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing childcare environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

More Information from the CDC:
Visit https://www.cdc.gov/covid/prevention/index.html

Hand, Foot, and Mouth Disease (HFMD)

Overview

Hand, foot, and mouth disease, or HFMD, is a contagious illness that is caused by different viruses. It is common in infants and children younger than 5 years old. However, older children and adults can also get HFMD.

Symptoms

- Fever

- Flu-like Symptoms
- Mouth Sores
- Skin Rash/Blisters (typically found on the hands and feet, but It can also show up on the buttocks, legs, and arms).
- Sore Throat
- Eating or drinking less
- Drooling more than usual

HFMD can spread by:

- **Contact with droplets** that have virus particles after a sick person coughs, sneezes, or talks.
- **Touching an infected person** or making other close contact, like kissing, hugging, or sharing cups or eating utensils.
- **Touching an infected person's poop**, such as changing diapers, then touching your eyes, nose, or mouth.
- **Touching objects and surfaces** that have the virus on them, like doorknobs or toys, then touching your eyes, nose, or mouth.

If someone is sick with HFMD, the virus can be found in their:

- Nose and throat secretions, such as saliva, drool, or nasal mucus
- Fluid from blisters
- Poop

Prevention Tips:

1. Good Hygiene Practices:
    - Encourage frequent handwashing with soap and water, especially after using the restroom, changing diapers, and before meals.
    - Use alcohol-based hand sanitizers when soap and water are unavailable.
2. Regular Disinfection:
    - Clean and disinfect toys, surfaces, and commonly touched items frequently, especially if a child has been diagnosed with HFMD.

3. Limit Close Contact:
    - Encourage children to avoid hugging, kissing, or sharing utensils and cups with others while recovering from HFMD.

Return to Childcare Guidelines:

Children diagnosed with HFMD should stay home until:

1. **Symptoms Improve:**
    - They have no fever for at least 24 hours without using fever-reducing medications.
    - Mouth sores have healed, and they are able to eat and drink without difficulty.
    - Blister Healing:
        - Children should stay home until their blisters have dried up and healed. This means that the blisters should no longer be oozing or open. **Must be completely dried.**
2. **Length of Stay Home:**
    - Typically, children can return to childcare about 7-10 days after the onset of symptoms, as long as they are feeling better and are able to participate in activities without issues or any symptoms listed above without compromising the care of other children in the program.
3. **Monitor for Recurrence:**
    - Be vigilant for any new symptoms, as HFMD can sometimes recur or spread.

Hand washing is an effective method of preventing the spread of germs, including Hand, Foot, and Mouth Disease. Cleaning and sanitizing surfaces and items that may be soiled with body fluids is also important. Our employees have received training on proper hand washing as well as cleaning and sanitizing child care environments. We encourage and assist your children with proper hand washing techniques and good hygiene.

More Information from the CDC:
Visit CDC's Hand, Foot, and Mouth Disease Website