

KUSUM'S CHILD CARE & PRE-SCHOOL POLICIES & PROCEDURES
CONTRACT HANDBOOK

Kusum's Child Care & Pre-School



**SLOGAN/MOTTO: PROVIDING QUALITY
CHILDCARE & PRESCHOOL**

Parent Policy and Procedure Handbook Licensed as
a Family Home Child Care Facility by the Depart-
ment of Early Learning, State of Washington

***KUSUM'S FAMILY CHILD CARE
& PRE-SCHOOL***

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Addendums

1. Addendum A: Policies & Procedures Contract Handbook
2. Addendum B: Parent Handbook Acknowledgement
3. Addendum C: Pick up & Drop Off Policy Procedure (not to be signed)
4. Addendum D: Introducing your Child
5. Addendum E: Keep Me Home if... (for Information purposes)
6. Addendum F: Child Care Registration Form
7. Addendum G: Child Care Agreement Form
8. Addendum H: Liability Insurance Notice for Family Child Care
9. Addendum I: Certificate of Immunization Status (or an updated completed Doctor/ clinic record of immunizations)
10. Addendum J: Sunscreen Authorization Form
11. Addendum K: Diaper Cream/Ointment Authorization Form
12. Addendum L: Emergency 3 Day Supply List (not to be signed)

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13. Addendum M: Health & Safety Policy Changes letter (to be reviewed)
14. Addendum N: Child Care Parent/ Guardian Permission Form
15. Addendum O: Child Care Resources Media Release Form
16. Addendum P: Medication Authorization Form
17. Addendum Q: Covid-19- Keep me home if.. (For information)
18. Addendum R: Individual Care Plan for Child if child requires special needs

Please read this handbook thoroughly.

I have a copy of Washington's Minimum Licensing Requirements available for review.

I look forward to our very important relationship as parent, child and care provider.

My home has been inspected by a state licenser and meets the minimum licensing requirements as required by Washington State law

Mission Statement

Our goal as a Family Home Child Care & Pre-School Provider is to provide and promote licensed, high quality, affordable, diverse, and accessible early learning to meet the needs of children and families in the City of Seattle.

Our Vision and values is to provide a safe, developmentally, inclusive environment for toddlers and preschool children

Our Focus and values are to provide a safe, relaxed, trusting, healthy, fun, loving, creative, nurturing, diverse, racially inclusive and caring atmosphere where children are encouraged to pursue their own interests, develop friendships and grow in confidence, independence and respect for themselves and others.

Our Goal is to support and nurture the children's and our own natural desire to be lifelong learners by allowing the children to have the opportunity to develop his or her own hands-on learning style, giving the child the chance to learn at his or her own pace, allowing them to master a skill with which they are comfortable.

We provide childcare and preschool services for children aged 12 months to five years before transitioning to kindergarten.

We are committed to the families and community we serve by providing support and encouragement and we are committed is to serve the neighborhood community and strive to reach a community of diverse races, ethnicity, religious beliefs, socioeconomic status, language, geographical origin, gender and/or sexual orientation to bring their different knowledge, background, experience, and interest for the benefit of their diverse community to our childcare and preschool program.

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Philosophy and Program Description

As a parent, having three kids of my own, two kids who are now graduates and a twelve year old, I would like to share this environment and learning experience with your child. I intend to provide a loving, caring home program and to be the facilitators of learning through your child's play where the children will grow in their understanding and respect for each other and learn to make the correct choices towards independent growth and development.

Our Core Values are:

- **Quality Care and Trust:** When parents are looking for early learning and childcare programs they need to find someone they can trust. We will continue in our efforts to ensure and continuously improve our services to meet the needs of the children and families we service.
- **Life Long Learning:** We believe that we all share a responsibility to support and nurture the children's and our own natural desire to be lifelong learners. We put ourselves and our learning on the same level as the child's and commit to our own professional development and personal growth. We learn alongside the children and their families and embrace the opportunity to learn and grow each day.
- **Partnership:** Respectful relationships are very important and on which our organization operates. We believe that quality of care we provide is measured by the quality of relationships we have with children, families, employees, school boards, funders, and legislators. We are committed to ensuring these relationships are respectful; warm and caring; honest and open; fair and equitable.
- **Fiscal Responsibility:** We are committed to financial prudence and sustainability – to making decisions that take into consideration the overall financial health of the organization in order to meet our goals and objectives. We conduct ourselves in a manner that is professional and according to all business practices that are legal and ethical.

My family members and I are bilingual in 4 languages, English, Kiswahili, Hindi, and Gujrati (one of India's regional languages) and therefore hope to incorporate our cultural heritage into a bilingual childcare program. Culture is central to learning and culture plays a role not only in communicating and receiving information but also in shaping the thinking process of groups and individuals. Our program therefore follows the "Culturally Responsive Teaching" methodology that acknowledges, responds to, and celebrates fundamental cultures and offers full, equitable access to education for students from all cultures and implements a foundation for children on how to interact with diverse cultures and how to resist bias.

For a child, play is the essence of learning. With this in mind, we proceed into each day ready to play, sing, dance and paint with the children. We laugh, cry, and most of all...share love together. We have very regular schedules for meals, naps, and school however the rest of our time is spent allowing the children to choose their activities. As we see interests arise, we offer guidance and instruction to help your child learn through his/her own curiosities.

During guided play, your children learn both play skills and life skills. We spend a lot of time teaching and modeling lessons in sharing, negotiating, cooperating, and following simple instructions; skills they'll need for Kindergarten. Our job is not to focus on the ABC's' and 123's,

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but to equip them with the skills, confidence, and self-esteem in preparation for successful learning. Your children have 13 years or more of formal school instruction ahead of them so for now... WE PLAY.... but we always appreciate the learning that is happening during the play! My childcare provides a warm, secure setting where each child can develop to his/her own potential socially, emotionally, physically, and intellectually. This program is based on the following important beliefs:

- Process is more important than product.
- Children learn by doing.
- Each child's unique creativity should be encouraged whenever possible.
- Each child and family have individual needs.

The program maintains a child centered philosophy that accepts each child at his/her own developmental level and encourages him/her to learn through rich experiences. When planning, we provide experiences that reflect families' interests, hobbies, cultures, and languages. We encourage discovery, creativity, development, and exploration in a safe, respectful, yet stimulating, relationship-based environment. We put this in action through our curriculum and daily programming designed to help all children learn and grow in positive ways. While your child is here, we will be helping him/her:

- Actively engage in and enjoy the learning process.
- Learn to question, to think, to problem solve, and to discover.
- Be creative and flexible.
- Discover his/her own unique talents and wonderful possibilities.
- Learn to function comfortably as a member of a group.
- Become confident, strong, and competent.
- Learn to resolve conflicts in peaceful, respectful ways.
- Appreciate and respect individual differences among people and families.
- Assimilate and apply necessary pre-academic skills.
- Learn more than just the "right" answers.

You and your child will also see and experience strong, caring parent-care-giver partnerships; educated care givers and staff; nutritious meals and snacks; positive, respectful interactions among adults and children; hands-on learning activities appropriate to your child's age and development; and a nurturing environment where children, families, and staff thrive.

Other Benefits of Kusum's childcare are

- It fits with the schedules of working parents as it is open past regular working hours, from 7.30am to 5.30pm.
- It cares for all ages of children, so parents don't have to split them up and take them to different locations if within the age groups that I care for which is for infants through school age.
- My program meets all health and safety requirements to make sure your child is always safe.
- My program serves nutritious diverse ethnic home-cooked meals which meets the USDA Child Meal pattern nutrition requirements with Weekly menus are posted so parents know in advance what we are serving every day and photos and description of the food served is posted in the parent group.

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- My program's teachers are selected for their knowledge of child development, their experience with children, and their warmth and love for children. Most of my program's teachers have been with my program for more than 10 years.

The parent and their child will see and experience strong, caring parent-care-giver partnerships; educated care givers and staff; home cooked nutritious meals and snacks; positive, respectful interactions among adults and children; hands-on learning activities appropriate to your child's age and development; and a nurturing environment where children, families, and staff thrive.

Our Home Child-care is licensed and complies with all applicable licensing regulations and standards. These standards relate to our home, staff, health, safety procedures, nutrition, care giver to child ratios, and record keeping. We believe that these standards are in the best interest of the children. Our home is subject to inspection by state and city nutrition/food, health, fire, and licensing officials.

Program Quality and Accreditation: we are enlisted with the Washington States Department of Early Learning's Early Achiever's Quality Care Rating and Improvement Service. Early Achievers, Washington's quality rating and improvement system (QRIS), is voluntary for licensed childcare providers and helps early learning programs offer high-quality care. The rating is done by independent University of Washington Early Childhood Education staff

Early Achievers helps achieve the following:

- Connects families to childcare and early learning programs with the help of an easy-to-understand rating system.
- Offers coaching and resources for childcare providers to support each child's learning and development. Research shows this kind of assistance helps providers improve the quality of their programs. And when more young children are ready for school, we all benefit.

My home childcare has achieved a level 3+ status of the Early Achievers QRIS 5 level standards and was re-rated in 2019, again maintaining the Level 3+ status and now intend to apply for the Level 4 status. Rerating occurs every 3 years.

We are enrolled with the City of Seattle Pilot Pre-School Program (SPP) for home childcares to implement the Creative Curriculum with children 3 and older and observe, assess and evaluate children using the Teaching Strategies Gold (TSG) to have them be prepared for kindergarten and building a strong academic base for lifelong success. This program provides free to low-cost pre-school for income eligible families. We accept low to medium income families on DSHS subsidies and City of Seattle income eligible subsidy families.

The Creative Curriculum is a Research based curriculum and empower confident creative and caring learners. This curriculum

- Differentiates Learning for Every Child by providing individualize instruction by understanding how children's abilities progress and supporting them with unique color-coded progressions that show the typical development of skills from birth through third grade. Effectively scaffold learning experiences to respond to each child's current strengths and needs with embedded guidance and strategies located on curricular resources.

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- Inspire Children With Project-Based, Investigative Learning by building children's confidence, creativity, and critical thinking skills through hands-on, project-based investigations. Promote discovery and inquiry with opportunities for children to think critically and develop process skills with rich, hands-on investigations of relevant and interesting topics in the classroom. Reinforce learning with family-friendly activities designed for home.
- Engage Families and Navigate Changing Learning Environments by providing access to the entire spectrum of digital preschool curriculum materials anywhere, anytime, including new content updates, family-friendly resources, a Digital Children's Library, and two-way communications with families to reinforce learning at home and facilitate a close home-school connection.
- Build the Social–Emotional Foundation Children Need by promoting social–emotional (SEL) development with support from a new foundation volume focused on social–emotional, physical, and cognitive development; Teaching Guides with a special SEL learning focus, including The First Six Weeks: Building Your Preschool Classroom Community; Daily Resources designed to build SEL skills; and embedded coaching and support for SEL development.
- Promote Language and Literacy Skills by providing children's book collection and Digital Children's Library which includes books filled with illustrations and storylines that reflect the diverse families and communities to which children belong. Books in The Creative Curriculum Cloud include a truly interactive e-reader experience, are available in English and Spanish, and provide both educators and families with access.
- Drive Intentional and Inclusive Teaching with Embedded Coaching by building teacher skill and confidence through coaching and expert support provided by a comprehensive Getting Started guide, rich foundation volumes, and guidance embedded in all curricular resources. Reinforce your implementation with ongoing professional development, including online tutorials.
- Improves Kindergarten Readiness.
- Supports the Whole Child. It supports academic learning alongside social-emotional, cognitive, and physical development.
- Research-Based and Field Proven. Early childhood development research provides the foundation for The Creative Curriculum for Preschool
- Aligned to Your Early Learning Standards It is aligned to early learning guidelines in each state and the Head Start Early Learning Outcomes Framework, so you can demonstrate that your program is meeting all requirements while focusing on the needs of individual children.

We assess our children's progress on a regular basis and use the Teaching Strategies Gold (TSG) for Evaluation and assessment of the children. TSG is drive differentiated, effective instruction. Inform instruction without disruption by embedding authentic, observation-based assessment into each part of the day. TSG helps us to also look at each child as a whole. We really like the reports. They are parent-friendly and make it easy to show where their child is and where we want to see them by the end of year. GOLD is very easy to use and doesn't take a ton of time

- Capture Observations in the Moment. With TSG, assessment is an authentic part of instruction, not a disruption. Embedded in your everyday interactions with children in the

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classroom or at home, formative assessment is an effortless, organic part of your teaching day. You can easily capture, organize, and store notes, photos, videos, and digital samples of children's work in the moment to make observations authentic, objective, and easy to remember.

- Understand Each Child's Needs Based on Developmentally Appropriate Milestones. The assessment model used in TSG follows widely held expectations for children from birth through third grade and enables a whole-child approach to assessment. Color-coded progressions guide teachers toward selecting and adapting activities that support each child's development and learning. Meaningful reports inform classroom practices and individualized instruction.
- Connect the Dots Between Curriculum and Assessment. Automatically connect assessment data and observation capabilities with daily instructional resources, creating an instantaneous and ongoing feedback loop of information to individualize learning and empower teachers to capture observations in the moment.
- Strengthen Family Partnerships. Engage family members with family observations, family-facing learning resources, and two-way communication. Teachers can seamlessly integrate family observations into their documentation to inform checkpoint ratings, whether in a traditional classroom or distance learning setting.
- Aligned to Your Early Learning Standards. TSG aligns to early learning guidelines in each state and the Head Start Early Learning Outcomes Framework, so you can demonstrate that your program is meeting all requirements while focusing on the needs of each individual child.
- Data-Driven Decisions in Real Time. TSG provides administrators with the data they need for real-time reporting and large-scale, programmatic decision-making. Easily manage and maintain users, classes, and child records and generate outcomes reports.
- Reliably Administer Valid Assessment. Rigorously and regularly tested, TSG yields reliable, valid, and culturally sensitive information. With Interrater Reliability Certification for teachers, administrators can ensure a valid and reliable assessment process at scale.
- Research-Based. TSG is research-based, validated, and shown to be effective by extensive independent research.
- For Teachers, TSG has tools to sharpen the teacher's assessment skills. Powerful professional development options are available to enhance your GOLD efficacy and boost learning outcomes.

Children who participate in high quality early learning are more likely to enter kindergarten prepared to succeed. One goal is to ensure that classrooms are high-quality and continue to improve. We use evidence-based curriculum and promote culturally responsive, engaging, and nurturing adult/child interactions to create quality learning environments. Another goal is to eliminate the racially disproportionate kindergarten readiness gap. Our approach is to support teachers to meet the needs of all children through student-focused coaching, ongoing curriculum training and data analysis that uses a racial equity lens.

We have had an Environmental Rating Scale completed by a The Early Childhood Rating evaluators.

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We employ certified or credentialed teachers and staff who have passed a Background clearance check, have Food safety, first aid, CPR certified and meet the minimum training and continuing ECE education requirements

My Family and Background

As earlier stated, I am originally from India, Asia, and moved to Kenya, Africa after marriage. Having lived in both countries and experienced the different cultures and values for the better half of my life, we then immigrated to the USA, to raise our two children, now adults, and experience the western culture. We now have a third child, our fifteen-year-old high schooler daughter, who is hearing impaired but uses both the sign and spoken languages. I have always taken care of children and love kids with three of my own.

I love to cook, and my family loves traditional Indian cooked dishes and we love to go out to picnics and camping.

I also love to read books to young children. I used to volunteer in the pre-school and kindergarten and always visited the local public library or community/Family Center sessions for story and play/art & craft sessions when our daughter was younger.

My Training and Experience

I started taking a keen interest in childcare as this is what made me feel satisfied, happy, good and content in what I was doing.

It started off when we immigrated to the USA and I worked as an assistant in a home day care in San Diego, CA. When we moved to Seattle, WA, over ten years ago, I started taking up nanny positions with various families and have all good strong references to go by from these nanny positions.

Presently my spouse, our high schooler and I have completed the required Background Checks, TB tests, 20hrs initial STARS training in early childhood and the required CPR, First Aid and HIV-blood borne pathogens training for infants, children and adults. They help out and assist in the childcare whenever possible.

I have been licensed for over ten years now and we have been taking the mandatory annual 10 hours of continuing education for the required hours to qualify for the annual continuing education requirement as well as additional other continuing education and trainings. The State of Washington requires that we take annual training on topics related to caring for young children, like immunizations, infant safe sleep and mandatory child abuse reporting. We have also completed the Early Achiever's program as well as the High Scope Early Learning Curriculum and the Creative Curriculum and Teaching Strategies Gold trainings. I am also enrolled with the North Seattle College pursuing Early Childhood Education (ECE) Programs and have completed and pursuing the following:

Completed ECE Initial Certification- <https://northseattle.edu/certificates/early-childhood-education-initial-state-certificate> ; <https://northseattle.edu/certificates/early-childhood-education-short-specialization-certificate> ; <https://northseattle.edu/certificates/state-early-childhood-education-certificate>

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- Introduction of Early Childhood Education
- Child Health, Safety, Nutrition
- Practicum: Nurturing and Focus on Relationships & Communication
- Completed ECE Short Certificates of Specialization in
 - ECE General,
 - Infants & Toddlers and
 - Administration
- Child Development
- Child Guiding Behavior
- In Process State ECE Certification & AAS Degree in Early Childhood Education
- Completed Child Observation & Assessment
- Completed Child/ Family/ Community
- Completed Curriculum Development
- Completed Child Language & Literacy Development
- Completed Infants & Toddlers
- Completed: Administration of Childhood Education Centers
- Completed: Practicum Powerful Interactions with Children
- Completed: Exceptional Child
- Completed: Child Environments

Feel free to ask us about our trainings. I will share any interesting things I learn with the families in my program.

We provide daily freshly homemade healthy nutritious and well-balanced meals and snacks for your child.

As earlier mentioned, we are also enlisted with the Washington States Department of early Learning's Early Achiever's Quality Care Rating and Improvement Service. You can find out more about Early Achievers by looking at the video

<https://www.youtube.com/watch?v=Hr0xkE4SuMo&feature=share&list=UU6OtXzx-bokiXFXqsDwMSUQ>

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Early Achievers helps achieve the following:

- Connects families to childcare and early learning programs with the help of an easy-to-understand rating system.
- Offers coaching and resources for childcare providers to support each child's learning and development. Research shows this kind of assistance helps providers improve the quality of their programs. And when more young children are ready for school, we all benefit.

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<http://www.del.wa.gov/care/qrisc/resources.aspx>

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<https://www.seattle.gov/Documents/Departments/DEEL/FundingOpportunities/RFIs/2017/FCCpilotInfoSessionPPT.pdf>

<https://www.seattle.gov/education/early-learning/early-learning-providers/about-our-early-learning-programs/seattle-preschool-program>

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Admission Requirements and Enrollment Procedures

Introductory Visit

We encourage the parents and the child to visit our program initially as a “get- acquainted” visit to look at the place, ask any questions about the program. We encourage you to bring along your child during this visit so he/she can get to meet us and get a feel of the environment. I can give you our Handbook and issue you with the proper forms to be filled out or you can get these from our website from the Policies page and download the attachments

<https://sites.google.com/site/kusumschildcare/calendar>.

Please limit your visits to no more than half an hour per visit and please schedule in advance either by phone or e-mail.

State Licensing Requirements

Our Home Child-care is licensed and complies with all applicable licensing regulations and standards. These standards relate to our home, staff, health, safety procedures, nutrition, care giver to child ratios, and record keeping. We believe that these standards are in the best interest of the children. Our home is subject to inspection by state and city nutrition/food, health, fire, and licensing officials.

Deposits and Registration Fees

Deposit:

Your child's position is **reserved upon receipt of Two weeks of tuition/ care deposit. This deposit will be applied to the Last Two weeks of care. Note that these two weeks of deposit is not refundable if the child is withdrawn for any reason before the completion of nine months of continuous care.**

Registration Fee:

We require **a non-refundable registration fee of \$300.00** to cover administrative costs.

Supplies Fee:

We require **a non- refundable one-time supplies fee of \$500**

Admission Forms

There are several forms you are required to complete prior to your child's attendance:

19. Addendum A: Policies & Procedures Contract Handbook
20. Addendum B: Parent Handbook Acknowledgement
21. Addendum C: Pick up & Drop Off Policy Procedure (not to be signed)
22. Addendum D: Introducing your Child
23. Addendum E: Keep Me Home if... (for Information purposes)
24. Addendum F: Child Care Registration Form
25. Addendum G: Child Care Agreement Form
26. Addendum H: Liability Insurance Notice for Family Child Care

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27. Addendum I: Certificate of Immunization Status (or an updated completed Doctor/ clinic record of immunizations)
28. Addendum J: Sunscreen Authorization Form
29. Addendum K: Diaper Cream/Ointment Authorization Form
30. Addendum L: Emergency 3 Day Supply List (not to be signed)
31. Addendum M: Health & Safety Policy Changes letter (to be reviewed)
32. Addendum N: Child Care Parent/ Guardian Permission Form
33. Addendum O: Child Care Resources Media Release Form
34. Addendum P: Medication Authorization Form
35. Addendum Q: Covid-19- Keep me home if.. (for information)
36. Addendum R: Individual Care Plan for Child if child requires special needs

Certificate of Immunization Status (WAC 170-296A-3250)

A CIS form must be used and be current and updated yearly (more frequently for infants). **All children must be current on their immunizations.** If there is a signed exemption to immunizations, the child may need to be excluded from childcare if there is an outbreak of a vaccine preventable disease that the child has not been immunized for. Parents need to provide a copy of the updated Immunization records before enrollment if there is an outbreak of a vaccine preventable disease that the child has not been immunized for.

“For the safety of your children, and myself, I do not take children who are not immunized. If your child has a medical condition that prevents him/her from having a particular immunization, please bring a doctor’s letter and discuss this with me.”

Transition Period

A child newly starting care can start part time or hourly and can work up to full time. The transition time to full time preferably should not be for more than two weeks

Trial Period and Termination of Child Care

The trial period will be two to four weeks. This period is used to observe the child's adjustment to care and to talk about concerns. I will talk to you daily about your child's day. Please tell me if you have any concerns. After a two to four week trial period, we will determine if the childcare services are satisfactory to everyone. If any problems cannot be resolved, the care is terminated. These up to first four weeks will be regarded as a trial period, in which case either party may terminate the contract without notice. After the first four weeks of enrollment, one calendar month written notice from parent or provider is required to terminate the contract, except for gross misconduct on part of the provider, parent, or child. This is grounds for immediate discontinuation of service. In cases of non-payment, legal action may be taken, and the parents will pay all legal fees incurred.

Notice to terminate childcare services: Either party, parents or myself, provider, can give each other a one calendar months’ notice to terminate the childcare services for any reason. If I, the provider, issues a termination notice, then I will not forfeit the deposit if within the initial nine months of care.

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Receipts and Taxes

If requested, I will give you a payment receipt or paid Invoice when you pay for childcare.

Rates and Payment Plan

Rates are evaluated and may be raised every year.

If other adjustments are needed, a two-week notice will be given.

Current Rates as of September 01, 2022, are as follows:

Age	Full time Monthly Fees	Part-time/day
Infants Newborn - 24 months	\$1,550 (5 days/week, up to 10hrs/day); \$1,450 for 4 days/wk; \$1,350 for 3 days/wk.	\$90 day (up to 10 hrs/day)
2 years - 3yrs	\$1,450 (5 days/week, up to 10hrs/day); \$1,350 for 4 days/wk; \$1,250 for 3 days/wk.	\$85 per day (up to 10 hrs/day)
3 years- 5 years	\$1,400 (5 days/week, up to 10hrs/day); \$1,300 for 4 days/wk; \$1,200 for 3 days/wk.	\$80 per day (up to 10 hrs/day)
City of Seattle Pre-School Program 3yrs – 5yrs	\$1,000 for 5 days a week for 6 hours per day (9am-3pm) and follows the Seattle School District School year from Sept to June	
Before and After Pre-school for City of Seattle Preschool Program 3yrs-5yrs	\$600 for 5 days for up to 4 hours per day (7.30am-9am, 3pm-5.30pm) and follows the Seattle School District School Year from Sept to June	

Your contract will specify your child's days and hours of care and are subject to change.

Definitions - Full Time, Part Time And Drop In

Full time: -Monthly Fixed: Monday through Friday 7.30am to 5.30pm (during COVID-19 pandemic for a maximum of 10 hours per day; 50 hours per week; Average 216.67 hours per month).

Part Time: -Daily Rate Fixed: 7.30am-5.30pm (Max10 Hours p.day)

Note: These rates include Two Snacks (first at 10am and second at 2.30pm) and a Lunch at 11.30am.

City of Seattle Pre-School Program: [Seattle Preschool Program - Education | seattle.gov](http://seattle.gov/education/preschool) This follows the Seattle Schools calendar of Sept to June and can apply to children 3years to 5years (must be 3 yrs or older at end of August). Enrollment is through the City of Seattle Program and the fees are based on a Tuition sliding scale. Parents would pay the City of Seattle program the fees dues for the 6 hours of tuition, 9am-3pm, based on their income and family size on a sliding scale and parents would pay the daycare the Before and after Pre-school care for up to 4.0 hours per day. During the

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months between the preschool program, parents would pay the regular daycare rates for that age group. You can access the Seattle Preschool Program tuition calculator from this URL: [Parent Portal Tuition Calculator · Customer Self-Service \(powerappsportals.us\)](#)

Payment Plan, Penalties, and Extra Charges

Payment Plan

Parents are required to pay for the time their children are scheduled to be in care. In other words, parents are paying for a space whether their child is there or not. **Payment for care is due in advance by the 3rd of every month.** Special payment terms are negotiable on occasion and will be defined in the contract.

Holiday Pay:

Fees are not reduced during months/weeks that have holidays.

Vacations and Absences

1. You are required to give 4 weeks advance notice for vacation.
2. I will give you at least 4 week(s) advance notice of my vacation schedule. I will take 1-3 weeks of unpaid vacation per year. **Note:** Parents are responsible for finding back-up care for their children during provider vacations, holidays, and sick/personal days resulting in the daycare closing.
3. As per the general market expectations for home child care's in Seattle, the childcare owner will be issued with 1 hour of paid vacation time for every 40 hours worked, and for that reason, I will be eligible for 6 days of paid vacation time in a year and expect to take this anytime during the school year-by giving advance notice. I will inform you in advance of the days/ dates that I plan to take the week of paid vacation days.
4. As per the City of Seattle Labor laws, an employee is entitled to one hour of sick day for every 40 hours worked. Though I am not an employee and am self-employed, if I fall sick and cannot keep the daycare open, I would be entitled to and will take paid sick day/s off up to 6 paid sick days in a year.
5. Please call and inform me when your child will not attend due to illness or some other event.
6. Please advise me upon enrollment if you plan to remove your child from childcare for any length of time (i.e., the summers for schoolteachers, or when you are on maternity leave with another child, etc.).
7. We do not close for snow days unless there is a power outage. If that occurs, we will try to call you as early as possible. If your child comes to the daycare on a snow day, please try to pick up the child by 5pm to make a safe trip back home.
8. There will be no payment reduction for sick absences, closure days or holidays.
9. Unless a major emergency occurs, for example, like a death in the family, we will not close the day care. We will do our best to find a suitable substitute for myself when sick or otherwise when needing unexpected time off.
10. As strong as our immune system has become over the years, we unfortunately still get sick from time to time. Because of this we allot ourselves up to six sick/personal days per year. We also use these days for our continuing education classes (CPR, Pediatric First Aid, etc) in order to keep our childcare license in good standing. Of course, we will give you as much of an advance notice as possible.

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Vacation/Absence Pay:

If you are on a Full-time plan and have issued the required 2 weeks of notice to take a vacation, you will continue to be charged 100% of the regular full time rate for the amount of time that you are on vacation.

For my 2 to 4 weeks of unpaid vacation usually during the summer months (June-August), I will close the daycare temporarily and will not charge you for my vacation time during this time. We can make alternative arrangements with our assistants, only if possible, to help provide nanny services at your home while we are away at the parents own cost and responsibility.

Payment Penalties:

The fee for late payment is \$25 will be applied for any payment not made by the 3rd of the month and an additional \$5 will be charged each day thereafter until payment is received. If fees remain unpaid after a period of five days, you child will not be admitted until *ALL* fees are paid in full.

The **penalty for NSF checks is \$35 plus any bank costs incurred** by me. Cash payment is required for returned checks. You may be put on a cash basis after the second NSF check.

Late pick-up fees are as follows: Our limit of day care hours per day for a child is ten hours. If a child has not been picked up at the agreed time for full or part time children or by the closing time for full time children, or if you exceed the ten-hour limit, **a late pick up fee of \$5.00 plus \$1.00 per every minute is chargeable and payable on the spot to the person providing the care of your child at the time. If pre-arranged, with provider, an extra fee of \$15 per hour per child.**

We reserve the right to change these policies at any time.

We request to let us know at the earliest if you have placed your child in another daycare's waiting list for us to plan accordingly.

Extra Charges:

A one-time supplies fee of \$500.00 will be charged to cover for supplies and will be paid at the time of enrollment.

Business Practices

Sign-in and Sign-out Procedures

Arrival and pick-up instructions:

1 When arriving; the parent, guardian or authorized person must sign the child in, and sign-out at pick up time. The sign-in/sign out notebook is located on top of the storage cube as you enter through the front door. You are required to sign in/out using full name, date and time. Please place hang the child's coat on one of the hangers by the front door, and place the child's backpack, shoes, toys, lunch bag or any other stuff in the child's allocated cube. If there is insufficient space, please bring this to my attention and we will make space for the child's stuff elsewhere.

State law mandates that children must be accompanied into the house by the parent when arriving and be picked up from inside the house when leaving. If there's no adult visible when you bring your child, make sure that you find one of us and let us know that your child has arrived before

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leaving. You will need to sign-in and out your child every day. No child will be released to anyone other than parents unless there is written information telling us to do so.

2. Please identify on the Child Care Home Register who is authorized to pick up your child. I will not release your child to any person without your written permission. The person picking up your child must have identification, as we may ask for verification of identity before releasing a child.

3. Anyone who appears to be under the influence of drugs or alcohol arriving at child care to pick up a child will be asked to call someone else to pick up that child. If a person leaves with a child while they appear to be under the influence, I will call 911.

Staffing When Provider is Absent

We will try to the best of our ability and provide a substitute to keep the day care open for any cases of myself being away on an emergency or vacation. In case if this is not possible, then you will not be charged for the days that the day care program remains closed.

Back-up Child Care

I recommend that you have access to an alternate childcare arrangement. You may need care if I am ill or when I am on vacation. If I am ill, you will be notified as soon as possible so that you can make other arrangements. It is always your responsibility to find backup childcare.

Termination of Services

You are required to give me 1 calendar month's notice of your intent to terminate care. I will ask you to fill out an exit questionnaire. Your deposit will cover 2 weeks of childcare. If you should terminate your child's care without notice, the deposit will not be refunded.

The following are conditions that can cause childcare to be terminated from the childcare:

- Failure to pay or continual late payments
- Child behavioral problems that cannot be controlled.
- Consistent discipline problems that do not improve.
- Not respecting childcare setting and policies (children and/or parents)- Physical or verbal abuse of any person or property by parent or child
- Continual late pick-up.
- Lack of parental cooperation.
- Child's inability to adjust after a reasonable period of time. Lack of compliance with this guidelines.
- Lack of space/ spot if a child is part-time or after school.

Receipts and Taxes

If requested, I will give you a payment receipt or Invoice when you pay for child care.

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Items Brought From Home

We do not encourage children to bring personal toys or candies or other non-necessary items from home due to ownership and sharing issues which might arise with the rest of the children in the day care.

Insurance Coverage

1. Professional liability insurance: We do carry liability insurance as per the DCYF and the City of Seattle DEEL guidelines.
2. Accidental/medical insurance: We do not carry this.
3. Supplemental auto insurance: We do not carry this as we just have the third party liability coverage on our vehicles and do not transport students unless if there is an emergency.

Note: Please sign on a release form informing you that we do not carry the above mentioned extra insurance policies and you will be responsible for any costs for your child arising from the above.

Smoking

Since no one in my family smokes or consumes alcohol, Smoking and alcohol consumption will not be permitted in my home, home premises or car during or after child care hours. We follow a strict **NO SMOKING/ NO ALCOHOL** policy within our home premises.

Smoking, and the use and visual possession of tobacco and unapproved nicotine delivery products are prohibited on our property during business hours, including, but not limited to:

- Indoor and outdoor grounds
- Adjacent sidewalks
- Parking lots
- Buildings
- Private vehicles

This policy applies to all persons on the premises, regardless of their purpose for being there. Federal law prohibits smoking within 25 feet of the premises.

Scientific evidence links respiratory health risks to secondhand smoke.

Drugs and Alcohol (see WAC 170-296A-4025)

No illegal drugs are allowed on the premises. Alcohol may not be consumed during business hours. No one under the influence of drugs or alcohol may be in the presence of the children at any time. Any alcohol, if in the home, will be stored inaccessible to the children.

Guns or Weapons (see WAC 170-296A-4725)

I do not have any guns, weapons or ammunition

Hours of Operation, Closures and Vacations and Daily Activity Schedule (WAC 170-296A-2375)

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Hours and Days of Operation

My Home Child care program is open from 7:30 a.m.-6:00p.m. Monday through Friday except for holidays, a notice is posted on the wall for the year's holiday's. We are not open on the weekends, Saturday and Sunday's, or on public holidays.

Attendance may be on a Full or Part Time basis.

If possible please let us know in advance if there will be any changes in the child's daily schedule. If you are going to be delayed picking up your child please let me know before 5.30pm.

Holidays

Child care is closed for the following holidays: The observed holidays are as follows:

January: New Year's day, Martin Luther King Jr Day

February: Presidents Day

May: Memorial Day

June: Emancipation Day

July: Independence Day

September: Labor Day

November: Veteran's day, Thanksgiving day and the day after Thanksgiving

December: Christmas Eve, Christmas Day, New Year's Eve

Note: In the event that any one of the above holidays falls on a Saturday we will close the day before (Friday) and if it falls on a Sunday, we will close the day after (Monday).

Vacation/Emergency Closure Policy

If I am sick and have to close or if I have to close or open late due to emergencies, such as power outages, snow, etc., I will try and depend on my spouse and my staff to operate the day care when I am unavailable but always keeping in constant communication of how the children are doing and if ant issues crop up. If this is not at all possible, I will have to close the childcare and be issued with a sick paid off-day.

Sample Daily Schedule/ Program

Sample Summer/ Spring Schedule

Time	Activities
7.30am-9.00am	Drop-Offs, Welcome, Breakfast time- Clean up and Free Play
9.00am-9.50am	Art & Crafts Time, Play-dough,
9.50am-10.20am	Hand-washing. Snack, Potty (Teacher directed)
10.20am-	Outside Play with Gross motor skills emphasis
11.00am-	Hand-washing, Potty, diapering, Music- song & dance, Blocks, Circle Time; Manipulative
11.30am-	Hand-washing/ Lunch/ Potty & diapering Jobs. Clean Up & Nap Mat and crib Set up
12.15pm-	Exercise Time, tumbling, etc with Music- Gym mat, Story Time

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12.45pm-1.00pm	Potty, Diapering jobs
1.00pm-3.00pm	Nap/ Rest Time (Teacher Planning Time)
3.00pm-4.30pm	Wake up/ Snack/ Potty & Diaper jobs/ Free Choice (Quiet Activity); Music, Art, Story Time, Board Games
4.30pm-5.00pm	Outside Time-Gross motor skills and Pick up Time
5.00pm-5.30pm	Block and / or dramatic play, puppet and free play choice activities, Pick-up Time, Music

Sample Winter / Fall Schedule

Time	Activities	Time
7.30am-9.00am	Drop-Offs, Welcome, Breakfast time- Clean up and Free Play	
9.00am-9.50am	Art & Crafts Time, Play-dough,	
9.50am-10.20am	Hand-washing. Snack, Potty	
10.20am-11.00am	Outside Play with Gross motor skills emphasis	
11.00am-11.30am	Hand-washing, Potty, diapering, Music- song & dance, Blocks, Circle Time; Manipulative	
11.30am-12.15pm	Hand-washing/ Lunch/ Potty & diapering Jobs. Clean Up & Nap Mat and crib Set up	
12.15pm-12.45pm	Exercise Time, tumbling, etc with Music- Gym mat, Story Time	
12.45pm-1.00pm	Potty, Diapering jobs	
1.00pm-3.00pm	Nap/ Rest Time (Teacher Planning Time)	
3.00pm-4.00pm	Wake up/ Snack/ Potty & Diaper jobs/ Free Choice (Quiet Activity)	
4.00pm-4.30pm	Music, Art, Story Time, Board Games	
4.30pm-5.30pm	Block and / or dramatic play, puppet and free play choice activities, Pick-up Time, Music	

Television, Video and Computer Use

We do not provide TV and video viewing for children in our care.

Special Activities

We will celebrate the birthdays of each child in our care with a small cake/ cookies and treats and a birthday card with all the names of the other children and the providers for the birthday child to take home. Parents are welcome to participate or bring cake or treats to celebrate the birthday of their child. If Parents are unable to bring a cake, the provider will provide a cake or treats

We will also celebrate any religious days, like Christmas, Hanukah, Diwali, Idd, Kwanza and any other religious occasion that the child celebrates with a short follow up of what is the significance of the religious holiday and why is it celebrated. Parents are welcome to participate and give ideas and suggestions.

Pets (WAC 170-296A-4800)

We do not have any pets in our home premises.

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Transportation (WAC170-296A-2450)

1. Parents are responsible for transportation to and from my home / childcare.
2. We do not provide transportation to or from schools for school going children.

Meals and Snacks (WAC 170-296A-7125-7200, 7500-7650)

All meals and snacks are prepared and served keeping in mind the nutritious value of the food and the health and wellbeing of the child.

It is your responsibility to notify me of any allergies or adverse reactions your child may have with certain foods or beverages. If you choose to provide alternative food for your child, I will need a written and signed plan.

Home canned foods will not be served.

Safe drinking water is served.

Whole milk be served to children 12-24 months.

Typical menu items are listed below. I will work closely with you on your child's transition to solid foods when appropriate.

Meals Served/Sample Menu and description of how Foods are Served.

MEALS: We are regulated by USDA Food Program assuring for well-balanced meals. Be sure to let me know of any food allergies your child may have. If your child needs special food/diet you may bring it from home. We try to limit giving the child fruit juice and encourage water instead. A sample menu would be as follows:

Breakfast: Pancakes, oranges, bananas, milk

AM Snack: Graham crackers, apples

Lunch: Tuna casserole, carrots, broccoli, chicken curry, milk

PM Snack: Cereals, bananas, apples, pears.

Please let us know of any food allergies your child may have. If your child is in on a special diet, I would request that you supply these meals.

Food Handling Practices

I, with my assistants have a valid Food Handlers Permit and I follow the following to prevent food poisoning and food –borne illnesses:

- Maintain temperature control for potentially hazardous foods. For bacteria not to grow, I keep food safe with cold foods kept 41 degrees or colder and hot foods kept 135 degrees or hotter.
- I maintain good personal hygiene by regular and correct way of hand washing, avoiding bare hand contact with ready to eat foods and maintaining personal hygiene.
 - Prevent cross contamination
 - Only work when healthy.
 - Wash hands often and well.

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- Don't touch ready-to-eat food with bare hands.
- Keep food hot or cold.
- Cook food to proper temperatures.
- Cool hot food as quickly as possible.
- Keep raw meat away from other food.
- Wash, rinse, sanitize, air dry – always follow the 4 steps in order.
- Keep food preparation areas and utensils clean and sanitized.

Dishwashing Practices

When using a dishwasher, we scrape leftover food from the dishes before putting the dishes on the rack. Dishwashers use chemicals or heat to sanitize. We use the dishwasher to wash and clean the children's dishes, any utensils used to prepare the children's food to better clean the dishes and sanitize to avoid bacteria and viruses.

Safety of Food Containers and Preparation Area

Some containers are not approved for food storage. Unapproved containers include garbage bags, galvanized cans, and containers once used for chemicals. Food may not be stored in these containers because chemicals can get into the food. Only use approved containers to store food. Food-contact surfaces are washed, rinsed and sanitized after each use to remove germs that cause illness. Cleaning uses soap and water to remove dirt and food from the surfaces. Sanitizing uses chemicals or heat to kill germs. Sanitizing reduces germs to safer levels.

Policies for Food Brought From Home

Parents are welcome to bring food from home for their child if they so wish if they are marked in special containers or food bags with the child's name noted on it and to advise me in the morning on how it needs to be stored and served.

Permission for Free Access

You have the right to access any areas of my home used for childcare, or to your child's records. You are welcome to visit or drop-in with advance notification to observe your child. Please schedule time in advance if you would like to have a meeting with me or my staff, so we can arrange to speak away from the children.

Child Abuse Reporting (WAC 170-26A-6275)

As a child care provider, I will protect children from all forms of child abuse or neglect. I am required by mandatory reporting laws to report any suspected child abuse, neglect, or exploitation to Child Protective Services (CPS) or my local law enforcement agency immediately (without prior notification to the parents involved). I will also inform my licenser. All staff or volunteers in this program, as well as my family members, are trained on prevention and reporting of child abuse and neglect.

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Behavior Management and Discipline (WAC170-296A-6050)

We will use consistent, fair, positive methods of managing children's behavior. Methods used will be appropriate to the child's abilities, developmental level and culture.

Spanking or any form of corporal punishment, physical or mechanical restraint, the withholding of food, or any form of emotional abuse is prohibited by anyone on the premises including parents. No corporal punishment will be used in our program. This includes biting, jerking, shaking, slapping, spanking, hitting, kicking or any other means of inflicting physical pain.

All staff and volunteers will be trained on the following policy and practices:

My behavior management and disciplinary practices are:

- "Time-Outs" will be used sparingly.
- Redirection of energies to more positive play will be encouraged.
- Use of feelings will also be encouraged along with helping children think their own ways to solving problems.
- We teach the children to use "inside feet, inside voices, no climbing on tables, chairs or small furniture, putting away toys or working and helping". Parents are encouraged to help us enforce these guidelines when they are around and upon arrival and dismissal.
- If a child's behavior becomes an ongoing issue, I will confer with the parents using the following steps:
 - Individual behavior concerns will be discussed with the parents to promote a consistent response from both the child's home and the day care providers.
 - Have a follow up "write-up" and work with the child and parents to assist in finding ways to improve the behavior. If the behavior does not improve and is to the detriment of the daycare, the child will be issued a notice to vacate the care.

Non-discrimination Statement

We do not discriminate in my enrollment, hiring practices, client services or in the care of children based on race, color, creed, ethnicity, national origin, gender, marital status, veterans status, sexual orientation, age, socio-economic status, religion, differing physical or mental abilities, use of a trained dog or service animal by a child or family member, communication and learning styles. I will assist children and parents who have limited English language ability by working with them to communicate in English and sign language to the best of my ability

Religious Activities

Religious activities include:

We practice the Hindu religion, so we observe the following:

- Beef, pork or beef/pork products are not consumed in our home
- Prayers in the evening on Fridays after 6.30pm
- Celebration of the Diwali festival sometime during the month of November

Religious holidays observed by decorations in my home include:

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- Lighted decorations and lamps

If a parent or child does not wish to participate in a religious activity, the following alternatives will be provided:

- Have a volunteer take the child for outside play during the religious activity
- Let the child play in the house supervised by an adult with a different activity.

We will incorporate children's beliefs into my program by incorporating the child's religious holiday and celebrating this as a group with the other children using the why and how the religious occasion is celebrated.

Care of Young Children

Separation

Sometimes there may be apprehension the first several days of daycare. It is normal for some children (and parents) to shed few tears. However, these will probably stop before you get to the car as your child busies him/herself. It takes about ten days at a day care to feel comfortable with all the children and providers. Rest assured, if your child is unhappy or sits in a corner all day, we will advise you accordingly. We do not want any child to be unhappy.

From time to time he/she may not feel like coming to "school", but your quiet confidence will reassure her. Children are very sensitive to their parent's feelings. If the parent tells the child over and over how much the child is missed, the child may feel that liking daycare would mean hurting the parent's feelings. You can help by bringing your child on time in the morning so he/she can start the day along with everybody else. Say goodbye and quickly leave. Routines work best for children. In the event that your child is not able to settle in comfortably in our program, I will issue you with one month's notice to find a new child care provider. If I feel that the behavior is too disruptive to others, I reserve the right to allow for a two weeks' notice. There will be no refund.

Diapering Procedure

Parents may bring the diapers and wipes of their choice (disposable is recommended). Parents should bring a fresh supply each week along with a change of spare clothing as needed. We maintain strict hygiene when changing diapers and follow the state regulations, of washing hands before and after diapering by the child and the provider as well as wiping and sanitizing the diaper changing pad after every diaper change. The provider will use gloves when changing diapers and will dispose of the gloves and the disposable diaper in a second plastic bag and into a diaper container to be emptied and sanitized at the end of every day. In case of cloth diapers, the soiled diaper will be double bagged to be picked up by the parent when the child is picked up for the day. Please provide the necessary diaper rash ointment if you would want us to use this on your child with instructions as to how to store and how often to use this.

Toilet Learning

Toilet training will be introduced and encouraged in coordination with the parent's efforts at home.

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Both parents and child should be ready for this journey. When we start toilet training, we encourage the use of thick cloth underwear or pull-ups to be provided by the parents. We will again maintain strict hygiene during toilet use and training by sanitizing the toilet seat after every use and washing hands after use by both the provider and the child.

Infant Feeding

Infants are held when feeding, and bottles are not propped.

Infant food, formulas, spare bottles and nipples and breast milk are to be provided by the parents with instructions on storing and dispensing. Nursing mothers are welcome to come and nurse their babies whenever necessary. Bottles and nipples will be washed in warm water, sanitized and air dried after every use. Provider will wash or sanitize hands before handling bottle and nipples and before and after feeding the child. New foods to test allergies and finger food will be introduced gently and with the permission of the parents.

Naps and Rest Periods:

A rest period will be offered for all children under five years of age. Alternative quiet activities will be available for those children who no longer need a nap. No child will be forced to sleep. I will work with you to discuss your child's sleep patterns and needs. Infants and toddlers will follow individual sleep schedules.

"I will always put your baby to sleep on his/her back in a safe crib with a firm mattress. I will not keep your baby in his car seat, swing or other "container" for long periods of time and I will change your baby's position often. I will not allow anyone to smoke around your baby. I will make sure your baby does not get too warm by keeping the room temperature comfortable and not dressing the child in too many layers of clothing."

Except for infants that have individual napping schedule, all children nap or rest at the same time. Our regular nap time is from 12:45pm -2:30pm. This is a good time to call me with questions or concerns. Nap mats and clean sheets and blankets will be provided for rest times. The sheets and blankets will be kept separate for each child in a separate bag or pillow case- appropriately marked with each child's name. Each child has a cubby to keep diapers and/or clothes. Please check every day for soiled clothes that may need replacing.

I will take care of the laundry of the bed sheet and blankets that I provide and will be done over the weekend. Children who do not nap and stay awake will be given some other "quiet" activity like painting or art or other play activity so that the other children are not disturbed during their nap time.

Health Care Practices

Medical Emergencies

1. My staff, family members over 18 and myself have First Aid, Child CPR, and HIV/Aids/Blood Borne Pathogens trainings and renewed whenever expired. Prevention training, TB tested and Food Handler's Permit.
2. Minor cuts, bruises, and scrapes will be treated. Parents will be notified upon arrival.

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With some minor injuries' parents will be called to help decide whether the child should go home.

3. In the event of a serious injury or emergency, I will call 911 and administer first aid or CPR if needed. I will then notify you as soon as possible and tell you where your child is being treated.
4. If injury results in medical treatment or hospitalization, I am required to immediately call and submit an "Injury/Incident Report" to my Department of Social and Health Services Licensor and child's social worker, if any. You will be given a copy.

Medicine Management (WAC 170-296A-3325)

1. All medications (prescription and non-prescription) shall be administered only on the written approval of a parent or guardian. A Medication Treatment Authorization form (authorization to administer medication) indicating dosage, duration and storage instructions, must be completed. This form must be initialed and dated every 30 days for ongoing permission for over the counter medications.
2. Prescription medications shall be administered only as directed on the label or as otherwise authorized by a physician.
3. Medications must be stored in the original container. The container must have the patient's name, instructions and date of expiration.
4. Doctor's permission is not required for non-prescriptions drugs such as:
 - a. Anti-histamines
 - b. Non-aspirin pain relievers and fever reducers'
 - c. Cough medicine
 - d. Decongestants
 - e. Anti-itching creams
 - f. Diaper ointments & powder
 - g. Sunscreen lotions

Non prescription medication not included in the categories listed above; taken differently than indicated on the manufacturer's label; or lacking labeled instructions shall only be given if authorized in writing by a physician.

5. Any medicine taken by mouth for children under two will need written permission from your doctor.
6. A detailed record will be kept of all medicines given at child care.
7. We recommend that you request your health physician to prescribe a "twice a day" medication for your child.

KUSUM'S CHILD CARE & PRE-SCHOOL POLICIES & PROCEDURES CONTRACT HANDBOOK

ILL/Sick Children (WAC 170-296A-3210)

1. Each child will be observed daily for signs of illness.
2. Children who are contagious must stay at home. All parents of children in my care, as well as the Health Department, will be notified by phone of communicable diseases or food poisoning.
3. Please call me if your child will not attend due to illness. If you are unsure your child should come or not, please call.
4. If a child should become ill during the day, you will be notified immediately and will be expected to pick up the child as soon as possible. In such event, your child will be isolated from the other children until you arrive.
5. The parent is responsible for finding substitute care in case of the child's illness.
6. A licensed day care must follow the state regulations on keeping the children at home due to illness. Due to the fact that the children are in very close proximity with each other, allergies, colds, and flus are passed around easily. We would like to keep illness to a minimum. If one of the following symptoms applies and the child's appearance/ behavior is unusually tired, pale, lack of appetite, difficult to wake or confused and if the child is not well enough to follow our daily routine, then the child would be more comfortable at home with a family member or you would need to find alternative care for your child. The following illnesses are not accepted in my home per instruction of the Department of Public Health:

Diarrhea: Three or more watery stools in a 24-hour period, especially if child acts or looks ill.

Vomiting: Vomiting on two or more occasions within the past 24 hours.

Rash: Body rash not associated with diapering, heat or allergic reactions, especially with fever or itching.

Eyes: Thick mucus or pus draining from the eye, or pink eye.

Appearance/Behavior: unusually tired, pale, lack of appetite, difficult to wake, confused or irritable.

Sore Throat: Especially if associated with fever or swollen glands in the neck.

Fever: Temperature of 101 degrees F. or higher and sore throat, rash, vomiting, diarrhea, ear ache, irritability or confusion.

Lice: Children who have lice may not return to day care until they are louse and nit (egg) free.

Whooping Cough: Prolonged cough that may cause a child to vomit, turn red or blue or inhale with a whooping sound

Chicken Pox: Children may return when the blisters have dried and formed scabs.

KUSUM'S CHILD CARE & PRE-SCHOOL POLICIES & PROCEDURES CONTRACT HANDBOOK

Please read "Keeping Your ill Child at Home" from the Seattle-King County Department of Public Health. Or the 'Too sick for School' as an attachment on our website

Cleaning and Disinfecting (WAC 170-296A-3850-3925 and 0010)

We try to the best of our ability to keep allergies from spreading by sanitizing toys and other utensils, and play things, furniture used during the day every day in the evening with a mild solution of bleach and water.

Cleaning, sanitizing and disinfecting practices include daily sanitizing all toys and eating utensils that are mouthed by children. Tables and all food prep surfaces are sanitized before and after each meal, snack or other messy play activity. Carpets within the child care space are vacuumed daily and undergo a deep clean at least once a year. Bedding, blankets and other items used during rest time are cleaned weekly or more often if soiled.

When using a bleach solution to disinfect, I follow the proper ratio of: $\frac{3}{4}$ teaspoon of chlorine bleach to one quart of cool water.

Reporting and notifying conditions to public health

I am required to notify the Department of Health, my licenser, and all families of children in my care within 24 hours if there is an outbreak of a communicable disease in the child care, or in my family.

Blood Borne Pathogen Plan

All staff caring for children in my program has completed the Blood Borne Pathogen training. When Staff come in direct contact with bodily fluids we will wear disposable gloves, follow proper cleaning procedures and disinfect all items and surfaces that are contaminated and then properly dispose of all waste. All persons exposed will wash hands before returning to care.

Hand Washing Practices and Hand Sanitizers (WAC 170-296A-3625 and 3650)

We (children and adults) will be washing our hands before and after preparing food, when handling pets, after playing outdoors, after diapering or using the toilet, and whenever in contact with body fluids. We take extra precautions when cleaning up messes from blood, bodily fluids, waste, etc. We have a cleanup kit for this purpose with gloves, plastic bags, and paper towels and bleach solution.

Hand sanitizer will not be substituted when regular hand washing procedures can be practiced, and can only be used by children over twenty-four months and for whom I have a signed parent permission on file.

Injury Prevention

I will check daily to make certain that both the indoor and outdoor play areas are safe for children and families – free from broken glass, toys and equipment are safe and the area is free from hazards. All medications, cleaning products and chemicals will be inaccessible to the children.

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Food Handling Practices

- Food will be prepared and stored in a safe and sanitary manner and served at required intervals.
- Perishable food will be refrigerated including milk and formula.
- Safe drinking water will be available at all times and offered at intervals that are responsive to the needs of the children.
- Styrofoam cups will not be used for infants or toddlers.
- Servings will be in portions suitable for the size and age of the child in care and we will have sufficient amount of food available for second helpings.

Infant Sleep Position

The SIDS Foundation of Washington, the American Academy of Pediatrics, and the Department of Health currently recommend placing infants to sleep on their backs, and to avoid using pillows, fluffy blankets and crib bumpers. Because this has been shown to reduce the risk of SIDS, I will follow these recommendations. Parents who choose for their infants to not follow these guidelines will need to have a letter from their child's doctor stating that the infant is not to follow the guidelines. No child will sleep in a swing, bouncy chair or other sitting or reclining devices.

To reduce the risk of Sudden Infant Death Syndrome (SIDS) I will:

- (1) Place an infant to sleep on his or her back. If the infant has turned over while sleeping, the infant does not need to be returned to his or her back;
- (2) Place an infant in sleeping equipment that has a clean, firm, and snug-fitting mattress and a tight-fitting sheet;
- (3) Not allow soft fluffy bedding, stuffed toys, pillows, crib bumpers and similar items in the infant sleeping equipment, or allow a blanket to cover or drape over the sleeping equipment;
- (4) Not cover an infant's head and face during sleep;
- (5) Take steps so infants do not get too warm during sleep. If a blanket is used, it must be lightweight and be placed no higher than the infant's chest with the infant's arms free; and
- (6) Not place the infant in another sleeping position other than on their backs or use a sleep positioning device unless required by a written directive or medical order from the infant's health care provider.

Disaster Response and Emergency Preparedness and Evacuation Plan (WAC 170-296A-285)

In the case of a disaster of any kind, I have prepared my home for evacuating the children and have emergency supplies for up to seventy-two hours.

I have a fire evacuation plan posted and we will practice fire evacuation (fire drill) monthly. Please take a look at the plan so you are aware of our fire evacuation procedures.

In the case of an emergency, my first responsibility is to evacuate the children to a safe place outside of the home and account for all children in attendance. After evacuating children, 911 will be notified. I will then contact all parents/guardians to arrange pick-up of children if needed. Please refer to my posted evacuation plan for a full list of details, floor plan, and gathering place

KUSUM'S CHILD CARE & PRE-SCHOOL POLICIES & PROCEDURES CONTRACT HANDBOOK

outside of my home.

Emergency supplies include:

- Drinking water
- Non-perishable food
- First aid supplies
- Battery operated radio
- Flashlights and extra batteries
- Fire extinguisher
- Diapers and formula for infants
- Emergency documents and phone numbers
- Garbage bags

The children will practice emergency procedures and evacuation on a regular basis. I have practiced turning off water, power and gas. Shelving, furniture and heavy objects on high shelves have been secured to protect against falling. I continually check my home for potential hazards. I have practiced turning off water, power and gas. Shelving, furniture and heavy objects on high shelves have been secured to protect against falling. I continually check my home for potential hazards.

If I am notified by law enforcement of a lockdown situation we will lock all doors and windows, and notify you immediately. The lockdown will continue until I am notified by law enforcement that it is safe to leave the facility.

Should my home become inhabitable in a disaster, the children and I will be located at 12346 20th Ave NE, Seattle, WA 98125, if possible.

We have a 3-day (72 hr) emergency supply of food, fresh water, clothing and others.

We would therefore like the parents to provide the following in each child's **separate bag pack, that will remain in the daycare, so that we can store this in case of an emergency for easy access for each child. This can be swapped out as your child grows or go back when your child leaves our daycare:**

Mostly what we would need from you would be:

Infant formula and diapers

A blanket

A small flashlight and extra batteries and a whistle (if possible)

Clothing as follows (To be changed out preferably once every year):

- **A jacket, sweater or coat**
- **Long pants**
- **A long sleeve shirt**
- **Sturdy shoes**
- **a hat and gloves**
- **personal identification (for each child), parental identification, contacts and alt. contacts. Or and a form of a labeled photograph in a ziplock baggie placed inside each backpack.**

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Communication and Parent Conferences

Parent/Provider Communication

Parent Provider communication is strongly encouraged either through phone and personal verbal conversations but preferred to be via e-mail. An e-mail with an attachment will be sent out monthly describing the activities the children participated in with photos and personal correspondence for follow up at home if necessary. Any concerns from both the parents and provider should be immediately addressed within the shortest possible time. If parents want a daily update of the activities and food that the children are having, then they should download an app, WHATSAPP onto their mobile device and ask the administrator permission to join the group, 'Kusum's ChildCare Pre-School' where we update this with the Question of the day, and pictures/ photos of children and the activities they are doing during the day with a short description.

Parent/Provider Conferences

Conferences will be done for pre-school age children and for others if requested and if there are other concerns that either parent or the provider might have.

Parent Involvement

Parents can be involved in the care of their children by:

- Using a talent or skill to lead an activity.
- Donating materials, supplies or toys for use in the day care.

Confidentiality policy including when information may be shared (see WAC 170-296A-6275)

Information about children in the program will remain confidential. You have the right to access your child's records. Anything of a sensitive nature will be shared outside of the presence of the children.

Information on how children's records are kept current, including immunization records.

Children's records will need to be updated regularly, and parents will have to inform that the child's information needs to be updated, in cases of change of address, emergency contacts, parents' contact telephone numbers, pick up authorization changes, doctors, dentists, medicine, food allergy, immunization records updates, and any other relevant changes to me.

I will make it a point to ask the parent, on the child's birthday, of any changes, especially immunization updates, and any other changes that might require changing and or filling out of the forms. Parents should also bring in the most updated immunization certificates after every update of immunization received for the child.

KUSUM'S CHILD CARE & PRE-SCHOOL POLICIES & PROCEDURES CONTRACT HANDBOOK

Checklist of Child Care Supplies

	<i>I Provide</i>	<i>You Provide</i>	<i>Item</i>	<i>Comments</i>
1.		X	Bottles	
2.		X	Bottle Liners	
3.		X	Formula	
4.		X	Nipples	
5.		X	Diapers	
6.		X	Pacifiers	
7.		X	Teething devices	
8.		X	Toilet training diapers	
9.		X	Change of clothes	
10.		X	Cold weather clothes	
11.	X		Blanket and bed sheet & othersleeping necessities	
12.		X	Toothbrush	
13.		X	Sunscreen/ Diaper Rash cream (must have written permission)	

Other Requirements:

1. The Fire evacuation plan/ route is as posted above the storage cube, next to the fire extinguisher near the front entrance.
2. Parents should if possible, park outside in the front yard/ driveway when dropping or picking up their children and please make sure not to block other vehicles for a long time.
3. Parents and Children should enter through the front door and take off their shoes before entering the living room/ day care area.
4. Parents should call half an hour in advance if they are running late.

ANY QUESTIONS?

Please ask any questions if you have them.

THANK YOU for choosing Kusum's Family Child Care & Pre-School

**KUSUM'S CHILD CARE & PRE-SCHOOL POLICIES & PROCEDURES CONTRACT
HANDBOOK**

Confirmation with the Policies and Procedures Handbook and Contract Agreement for Child Care at Kusum's Family Child Care & Pre-School

I / We _____
Please print both names of parent/s

We confirm to have read and agree to fully comply with the policies stated in the Kusum's Family Child Care & Pre-School Policies and Procedures handbook.

I/we understand that the **registration fee of \$300.00 is non-refundable.**

I/we understand that **the deposit of Two weeks of care to be paid in advance and this will be applied towards the last Two weeks of care. IMPORTANT-NOTE: This DEPOSIT is NON/NOT-REFUNDABLE in cases where you decide not to bring your child to our care at the scheduled start date or withdraw your child by not issuing at least one calendar months' notice to withdraw or withdraw your child before completion of nine months of continuous care, irrespective of whatever notice period you issue.**

Any party can issue a one calendar month's written to terminate childcare services.

I/we agree to issue a one calendar month's paid notice when I/ we no longer need the services of Kusum's Family Child Care & Pre-School.

I/we understand that there is a one-time non-refundable supplies fee of \$500.00.

Check# _____, dated _____, 2 weeks, Deposit Amount _____
Check# _____, dated _____, Registration & Supplies Fee _____
Check# _____, dated _____, Monthly Advance Fee for _____, Amount _____

My Child _____
Print full name

Will start Kusum's Family Child Care & Pre-School on _____

His/ her schedule will be: _____

Parent/s 1 names, signatures

Dated _____

Parent 2 names & signatures

Dated _____

Kusum Chohan

Kusumben Chohan- Name, Date & Signature of Provider

Addendum B.

Kusum's Child-Care & Preschool Family Handbook Acknowledgement

Please sign this acknowledgement, detach it from the handbook, and return it to the center prior to enrollment.

This handbook may be updated from time-to-time, and notice will be provided as updates are implemented.

Thank you for your acknowledging the policies and procedures we have established for the safety and welfare of all children in our care. We look forward to getting to know you and your family.

I have received the **Kusum's Childcare & Preschool Family Handbook**, and I have reviewed the family handbook with a member of the **Kusum's Childcare & Preschool Program** staff. It is my responsibility to understand and familiarize myself the Family Handbook and to ask center management for clarification of any policy, procedure or information contained in the **Kusum's Childcare & Preschool Family Handbook** that I do not understand.

Recipient Signature

Date

Center Staff Signature

Date

Addendum C

Kusum's Family Child Care & Preschool

11735 26th Ave NE Seattle WA 98125
206-403-7280, kusumschildcare@hotmail.com

Effective June 06, 2020

DROP OFF AND PICK UP POLICY / PROCEDURE

Family MAY NOT Enter Program

This pandemic has changed the way we look at early childhood education and our daily practices and procedures in a group setting. Changes in Procedures and Practices have been developed to support the health and safety of your children, your families and our staff and to do all we can to remain open for families. The changes are meant to ward off Coronavirus and they are based on thorough research and guidance being recommended by experts such as the CDC. Thank you for your understanding and patience as we implement these new Policies and Procedures.

Please note that we have modified hours of operation during the pandemic period to allow us to sanitize and clean toys and surfaces for the children's, parents and staff's health and well being

Drop Off and Pick Up Procedure and Child(ren)/Family Daily Health Screenings:

In order to reduce direct contact and limit the risk for coronavirus transmission, Kusum's Family Child Care & Preschool is restricting access to its facility to its essential staff and children enrolled in the program. Accordingly, families WILL NOT be permitted to enter the building during drop off and pick up. Instead, parents will follow a staggered pick up and drop off procedure and the subsequent procedures will be followed:

- Families after parking their vehicles in the driveway, should observe if there is another parents care in the driveway or a stroller to signify that a parent/s are dropping off/picking up their child. After the first parents/s are done, the second parent/s waiting in queue should proceed to drop off/pickup. If unsure to come in, please text or call Kusum at 206-403-7280.
- Families will be greeted by the back yard, by the sliding door by a Kusum or a staff member.
- Families will not enter the interior of the daycare and be required to wear masks when interacting with Staff during drop off and pick up.
- Each child's folder will be separated and a pen clipped inside for use to sign in/sign out procedure.
- Daily Health Check Questionnaire:
 - All parents/ grandparents and siblings >5years, and/or pickup/drop-off friends/relatives will need to be fully Covid-19 vaccinated and if requested to show proof of Covid-19 vaccination to staff members.
 - Each morning before Drop Off, each family will be greeted at by a staff member assigned to complete Daily Health Check Questionnaire with family before child(ren) will be admitted to the program.
 - Staff will ask family each question on the Health Check Questionnaire in order to avoid having the parent/family member touch the document and pen/pencil.
 - Staff Member will take the family member's and child's/children's temperature.
 - If a family members answers 'yes' to any of the questions in the Questionnaire or if either child/children or family member fails the temperature check, their child/children may not enter the program.
 - If there are no issues with the Family Health Check, the Staff Member will:
 - Escort child along with his/her lunch and belongings into the program.
 - take the child to the nearest handwashing location.
 - direct/assist child in washing their hands.
 - store lunch and belongings in child's cubby or other appropriate location.
- Upon your arrival to pick up your child, if unsure to proceed to enter, please call Kusum at 206-403-7280 to announce your arrival and a staff member will bring your child out to you.

PLEASE USE THE HAND SANITIZER PROVIDED AT THE ENTRYWAY DOOR.

DAILY FAMILY HEALTH CHECK - QUESTIONNAIRE

Prior to child/children drop off, staff will ask family to answer the following:

	Yes or No?
If not asked, parents should let us know if any conditons below apply to the child and themselves or any household members	
In the past 14 days have you or your child...	
Been in close contact with someone confirmed or suspected to have COVID-19? *For Health Care workers -- see next question	Y / N
If you are a healthcare worker, are you symptomatic?	Y / N
Traveled domestically (anywhere in the country – including NH)?	Y / N
Traveled internationally (out of the county)?	Y / N
Have you given your child any symptom relieving medication (Tylenol, Ibuprofen, Cough Medicine, Lozenges) in the last 24 hours?	Y / N
Do you or your child have any of the following symptoms?	
Temperature above 100.4°F (check temperature w/ forehead thermometer)	Y / N
Cough	Y / N
Sore throat	Y / N
Runny nose	Y / N
Shortness of breath	Y / N
Mild flu-like illness (fatigue, chills, muscle aches)	Y / N
Gastrointestinal intestinal issues (nausea, vomiting, or diarrhea)	
Rash	Y / N
STAFF will take Family member and Child’s Temperature daily upon Drop Off :	Temperature Must be below 100.4°F
Adult Family member Name:	
Child’s Name:	
Child’s Name:	
Child’s Name:	
Child’s Name:	

If family member answered “NO” to all these questions, he/she may drop-off their child.

If family member answered “YES” to any of the above, the child and parent or family member may not enter the facility. Staff will direct families to the following CDC resource to determine their next steps.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

Here are some ideas to help support my child when she is frustrated, angry, or sad.
Estas son algunas ideas para apoyar a mi niño cuando esté frustrado, enfadado o triste.

Here are some ideas how to keep my child healthy and safe at school. (For example, are there certain foods and/or activities that your child should avoid because of allergies or other physical concerns?)

Estas son algunas ideas sobre cómo mantener a mi niño saludable y seguro en la escuela. (Por ejemplo, ¿hay ciertos alimentos y/o actividades que su niño debe evitar debido a alergias u otros problemas físicos?)

Teacher's Corner:

Comentarios/Notas del maestro(a):

Adapted from:

1. Washington State Early Learning and Development Guidelines: Birth through Third Grade, Department of Early Learning, 2012.
2. Getting to Know My Child: A Guide for My Child's Kindergarten Teacher, National Center for Learning Disabilities.
3. Introducing Me! adapted by University of Washington, Center for Quality Early Learning (CQEL) and Office of Superintendent of Public Instruction (OSPI). Last revised May 2013.

Adaptación de:

1. Washington State Early Learning and Development Guidelines: Birth through Third Grade, Departamento de Aprendizaje Temprano, 2012 (Department of Early Learning, 2012).
2. Getting to Know My Child: A Guide for My Child's Kindergarten Teacher, Centro Nacional de Discapacidades del Aprendizaje (National Center for Learning Disabilities.)
3. Introducing Me! adaptada por el Centro de Aprendizaje Temprano (University of Washington, Center for Quality Early Learning - CQEL) de la Universidad de Washington y la Oficina del Superintendente de Instrucción Pública (Office of Superintendent of Public Instruction - OSPI). Última revisión, mayo de 2013.

For more information about Introducing Me, contact: kusumschildcare@hotmail.com | (206) 403-7281
Para más información acerca de WaKIDS, póngase en contacto con: kusumschildcare@hotmail.com | (206) 403-7281



Kusum's Family Home ChildCare & PreSchool

Introducing Me! ¡Presentándome!

Write Child's Name
Anote el nombre del niño

Please attach a photo or ask your child to draw a picture of him or herself with the family.
Por favor, adjunte una fotografía o pida que su niño haga un dibujo de sí mismo con la familia.

The best way to reach my family is / La mejor manera de contactar a mi familia es

The best time to reach my family is / La mejor hora para contactar a mi familia es

___ morning / de la mañana ___ afternoon / de la tarde
___ evening / de la noche ___ weekend / fin de semana

This is the best phone/email to reach us

Este es el número telefónico/correo electrónico más adecuado para encontrarnos

The name my child likes to be called is

El nombre con el que a mi niño le gusta que se le llame es



What activities does your child really enjoy?

¿Qué actividades disfruta realmente su niño?

Who are the family members or friends your child most enjoys spending time with? What are some of the things they do with your child?

¿Quiénes son los miembros de la familia o amigos con los que a su niño le gusta más pasar tiempo? ¿Cuáles son algunas de las cosas que hacen con su niño?

What helps your child feel more comfortable in new social situations?

¿Qué es lo que ayuda a que su niño se sienta más cómodo en situaciones sociales nuevas?

How does your child respond to new situations or challenges?

¿Cómo responde su niño a situaciones o desafíos nuevos?

Give a recent example of a time when your child learned something new and how they learned it.

Dé un ejemplo reciente de un momento en el que su niño aprendió algo nuevo y cómo lo aprendió.

My child lives with these adults

Mi niño vive con estos adultos

My child lives with _____ other children. Their names and ages are

Mi niño vive con _____ otros niños. Sus nombres y edades son

My child is close to

Mi niño es muy unido a

___ **Mom** / *Mamá*

___ **Aunt** / *Tía*

___ **Step mom** / *Madrastra*

___ **Dad** / *Papá*

___ **Uncle** / *Tío*

___ **Step dad** / *Padrastra*

___ **Grandfather** / *Abuelo*

___ **Grandmother** / *Abuela*

___ **Others** / *Otros*

We speak the following languages in our family

Hablamos los siguientes idiomas en nuestra familia



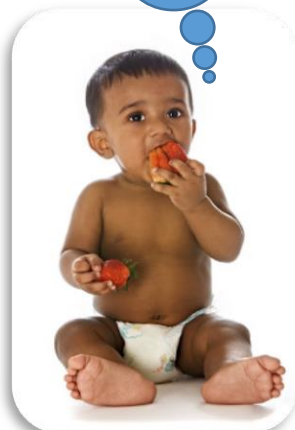
Keep Me Home If...

I'm
vomiting



2 or more times in
24 hours

I have
diarrhea



- 2 loose/watery stools more than normal for child in 24 hours; OR
- Any blood or mucus in stool

I have a rash, sores,
lice, ringworm, or
scabies



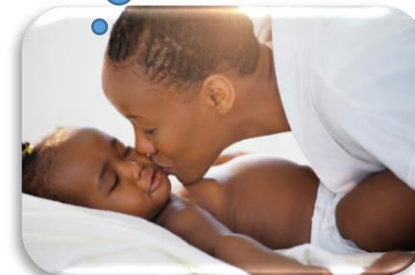
- Body rash (not related to allergic reaction, diapering, or heat)
- Oozing open sores or wounds
- Mouth sores with drooling
- Untreated head lice, ringworm or scabies

I have
a fever



- A child with a temperature of **100.4°F or more** AND have a **cough**, sore throat, earache, headache, rash, vomit, diarrhea, or just not feeling well

I'm just not
feeling very
good



Unusually tired, low activity level, pale, lack of appetite, cranky, or crying more than normal

Refer to the Washington Administrative Code (WAC) 110-300-0205 for the complete illness exclusion requirements.

***Cough with fever has been added and fever threshold has been lowered to 100.4°F for all ages during novel coronavirus (COVID-19) event to be in alignment with CDC recommendations.**

Addendum F
Kusum's Family Home Child Care & PreSchool

Child Care Registration Form			Date child entered care	Date child left care
Child's name Last	First	Middle	Name used	
Street address		City	Zip code	
Child's parent/guardian name & Email	10 digit home phone #	10 digit work phone#	10 digit cell #	
Street address		City	Zip code	
Address where you can be reached while child is in care		City	Zip code	
Child's parent/guardian name & Email	10 digit home phone #	10 digit work phone#	10 digit cell #	
Street address		City	Zip code	
Address where you can be reached while child is in care		City	Zip code	
Other people to notify in case of emergency				
Name		Address		10 digit phone number
Relationship: Permission to pick up in emergency?				Work: Home: Cell:
Relationship: Permission to pick up in emergency?				Work: Home: Cell:
Relationship: Permission to pick up in emergency?				Work: Home: Cell:
Relationship: Permission to pick up in emergency?				Work: Home: Cell:
Other than you, who else has permission to pick up your child?				
Name		Address		10 digit telephone number
				Work: Home: Cell:
				Work: Home: Cell:
				Work: Home: Cell:

Who does not have permission to pick up your child?	
Name	Reason

Child's health information		
Date of child's last physical exam:	Child's health care provider	10 digit telephone number
Street address	City	Zip code

Special health problems? Yes or no? If yes, specify.	Allergies, including drug reactions Yes or no? If yes, specify.
---	--

Regular medications? Yes or no? If yes, specify.	Other important information Yes or no? If yes, specify.
---	--

Child's dentist's name	10 digit telephone number
Street address	City Zip code

Child's medical insurance coverage	
Insurance company name Parent 1	Member/policy number
Policy holder name	Employer name
Insurance company name Parent 2	Member/policy number
Policy holder name	Employer name

Consent to medical care and treatment of minor children

I give permission that my child, _____, may be given first aid/emergency treatment by a qualified child care provider and/or staff at Kusum's Family Home ChildCare & PreSchool, 11735 26th Ave NE Seattle, WA 98125
 Name and address of provider

When I cannot be contacted, I authorize and consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician, health care provider, hospital or aid car attendant when deemed necessary or advisable by the physician or aid car attendant to safeguard my child's health. I waive my right of informed consent to such treatment.

I also give my permission for my child to be transported by ambulance or aid car to an emergency center for treatment. I certify under penalty of perjury under the laws of the State of Washington that this information is true and correct.

Parent/guardian signature	Date	Parent/guardian signature	Date
---------------------------	------	---------------------------	------

Liability Insurance Notice for Family Child Care.

I am informing you of my insurance status.

I do ~~not~~ carry liability insurance for professional Liability, ~~Accidental/Medical Insurance/~~ but not supplemental Auto Insurance.

~~I do not carry liability insurance and I will notify you of changes to my insurance coverage.~~

Kusumben Chohan

Provider signature

Date

Revised Code of Washington 43.215.535

Parent Name/s, Signature and Date

Parent Name, Signature and date

Parent Name, Signature and date

_This form is to be kept on file.



Certificate of Immunization Status (CIS)

DOH 348-013 January 2010

Office Use Only:	
Reviewed by: _____	Date: _____
Signed Cert. of Exemption on file? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Please print. See back for instructions on how to fill out this form or get it printed from the Immunization Registry.

Child's Last Name: _____	First Name: _____	Middle Initial: _____	Birthdate (mm/dd/yyyy): _____	Sex: _____	I certify that the information provided on this form is correct and verifiable.
Symbols below: ◆ Required for School and Child Care/Preschool ● Required for Child Care/Preschool Only				Parent/Guardian Name (please print): _____	
					Parent/Guardian Signature Required _____
					Date _____

Vaccine	Dose	Date		
		Month	Day	Year
◆ Hepatitis B (Hep B)				
	1			
	2			
	3			
or Hep B - 2 dose alternate schedule for teens				
	1			
	2			
Rotavirus (RV1, RV5)				
	1			
	2			
	3			
◆ Diphtheria, Tetanus, Pertussis (DTaP, DTP, DT)				
	1			
	2			
	3			
	4			
	5			
◆ Tetanus, Diphtheria, Pertussis (Tdap, Td)				
	1			
	2			
● Haemophilus influenzae type b (Hib)				
	1			
	2			
	3			
	4			
● Pneumococcal (PCV, PPSV)				
	1			
	2			
	3			
	4			

Vaccine	Dose	Date		
		Month	Day	Year
◆ Polio (IPV, OPV)				
	1			
	2			
	3			
	4			
Influenza (flu, most recent)				
◆ Measles, Mumps, Rubella (MMR)				
	1			
	2			
◆ Varicella (chickenpox) or verify disease 1-4 ▶				
	1			
	2			
Hepatitis A (Hep A)				
	1			
	2			
Meningococcal (MCV, MPSV)				
	1			
Human Papillomavirus (HPV)				
	1			
	2			
	3			
Office Use Only: Immunization information updated and verified with parent/guardian permission:				
Printed Staff Name _____		Date _____		
Printed Staff Name _____		Date _____		
Printed Staff Name _____		Date _____		
Printed Staff Name _____		Date _____		

If the child named on this CIS had chickenpox disease (and not the vaccine), disease history must be verified. **Mark option 1, 2, 3, OR 4 below – see, back #5.**

1) Chickenpox disease verified by printout from CHILD Profile Immunization Registry
Must be marked by printout (not by hand) to be valid.

2) Chickenpox disease verified by Health Care Provider (HCP)
If you choose this box, mark 2A OR 2B below.
 2A) Signed note from HCP attached OR
 2B) HCP signed here and print name below:

 Licensed health care provider (HCP) Signature _____ Date _____
 (MD, DO, ND, PA, ARNP)
 HCP Printed Name: _____

3) Chickenpox disease verified by school staff from CHILD Profile Immunization Registry
If you choose this box, staff must initial that parent or guardian approves: _____ (initial) _____ (date)

4) Chickenpox disease verified by parent*
If you choose this box, fill in the date or child's age when he or she had the disease:
 Age/Date of disease: _____
 *Can ONLY verify for some grades, see back #5 (4).

If the child can show immunity by blood test (titer) and hasn't had the vaccine, ask your HCP to fill in this box.
Documentation of Disease Immunity

I certify that the child named on this CIS has laboratory evidence of immunity (titer) to the diseases marked. **Signed lab report(s) MUST also be attached.**

<input type="checkbox"/> Diphtheria	<input type="checkbox"/> Mumps	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Hepatitis A	<input type="checkbox"/> Polio	
<input type="checkbox"/> Hepatitis B	<input type="checkbox"/> Rubella	
<input type="checkbox"/> Hib	<input type="checkbox"/> Tetanus	
<input type="checkbox"/> Measles	<input type="checkbox"/> Varicella	

Licensed health care provider (HCP) Signature _____ Date _____
 (MD, DO, ND, PA, ARNP)
 HCP Printed Name: _____

Instructions for completing the Certificate of Immunization Status (CIS): printing it from the Immunization Registry or filling it in by hand.

#1 To print with info filled in: First, ask if your health care provider's office puts vaccination history into the CHILD Profile Immunization Registry (Washington's statewide database). If they do, ask them to print the CIS from CHILD Profile and your child's information will fill in automatically. **Be sure** to review all the information, **sign and date the CIS** in the upper right hand box, and return it to school or child care. If your provider's office does not use CHILD Profile, ask for a copy of your child's vaccine record so you can fill it in by hand using steps #2-7 (below):

EXAMPLE

#2 To fill in by hand: Print your child's name, birthdate, sex, and your own name in the top box.

#3 Write each vaccine your child received under the correct disease. Write the vaccine type under the "Vaccine" column and the date each dose was received in the "Month," "Day," and "Year" columns (as mm/dd/yyyy). For example, if DTaP was received Jan 12, March 20, June 1, '11, fill in as shown here ▶

Vaccine	Dose	Date		
		Month	Day	Year
◆ Diphtheria, Tetanus, Pertussis (DTaP, DTP, DT)				
DTaP	1	01	12	2011
DTaP	2	03	20	2011
DTaP	3	06	01	2011

#4 If your child receives a combination vaccine (one shot that protects against several diseases), use the Reference Guide below to record each vaccine correctly. For example, record Pediarix under Diphtheria, Tetanus, Pertussis as **DTaP**, Hepatitis B as **Hep B**, and Polio as **IPV**.

#5 If your child has had chickenpox (varicella) disease and not the vaccine, **use only one** of these four options to record this on the CIS:

- 1) If your child's CIS is printed directly from the CHILD Profile Immunization Registry (by your health care provider or school system), and disease verification is found, box 1 is automatically marked. To be valid, this box must be marked by the Immunization Registry printout (not by hand).
- 2) If your health care provider (HCP) can verify that your child has had chickenpox, mark box 2. Then mark either 2A to attach a signed note from your HCP, or 2B if your HCP signs and dates in the space provided. Be sure your HCP's full name is also printed.
- 3) If school staff access the CHILD Profile Immunization Registry and see verification that your child has had chickenpox, they will mark box 3. Then, they must initial and date that they got parent or guardian approval to mark this box (i.e. make this change) to the CIS.
- 4) If your child started kindergarten in the 2008-2009 school year or later, you **CANNOT** use this box. If your child started kindergarten before the 08-09 school year, mark this box if you know he or she has had chickenpox. If you mark box 4, you must also write the approximate age or date your child had chickenpox. To find out which grades require chickenpox vaccine (or history), visit: <http://www.doh.wa.gov/cfh/immunize/schools/vaccine.htm>

#6 Documentation of Disease Immunity: If your child can show immunity by blood test (titer) and has not had the vaccine, have your health care provider (HCP) fill in this box. Ask your HCP to mark the disease(s), sign, date, print his or her name in the space provided, and **attach signed lab reports**.

#7 Be sure to **sign and date the CIS** in the upper right hand box, and return to school or child care.

#8 If a school or child care makes a change to your CIS, staff will print their name in the middle bottom box and date to show that you gave approval.

2014-01-05 05:15:00

Vaccine Trade Names in alphabetical order (For updated lists, visit http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/us-vaccines-508.pdf)									
Trade Name	Vaccine	Trade Name	Vaccine	Trade Name	Vaccine	Trade Name	Vaccine	Trade Name	Vaccine
ActHIB	Hib	Engerix-B	Hep B	Ipol	IPV	Pentavalente	DTaP + Hep B + Hib	TriHIBit	DTaP + Hib
Adacel	Tdap	Fluarix	Flu (TIV)	Infanrix	DTaP	Pneumovax	PPSV or PPV23	Tripedia	DTaP
Afluria	Flu (TIV)	FluLaval	Flu (TIV)	Kinrix (Knrx)	DTaP + IPV	Prevnar	PCV or PCV7 or PCV13	Twinrix (Twnrx)	Hep A + Hep B
Boostrix	Tdap	FluMist	Flu (LAIV)	Menaetra	MCV or MCV4	ProQuad (PrQd)	MMR + Varicella	Vaqa	Hep A
Cervarix	HPV2	Fluvirin	Flu (TIV)	Menomune	MPSV or MPSV4	Quadracel (Qdrel)	DTaP + IPV	Varivax	Varicella
Comvax (Cmvx)	Hep B + Hib	Fluzone	Flu (TIV)	Pediarix (Pdrx)	DTaP + Hep B + IPV	Recombivax HB	Hep B		
Daptacel	DTaP	Gardasil	HPV4	PedvaxHIB	Hib	Rotarix	Rotavirus (RV1)		
Decavac	Td	Havrix	Hep A	Pentacel (Pntcl)	DTaP + Hib + IPV	RotaTeq	Rotavirus (RV5)		

Vaccine Abbreviations in alphabetical order (For updated lists, visit http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/us-vaccines-508.pdf)							
Abbreviations	Full Vaccine Name	Abbreviations	Full Vaccine Name	Abbreviations	Full Vaccine Name	Abbreviations	Full Vaccine Name
DT	Diphtheria, Tetanus	Hep A (HAV) Hep B (HBV)	Hepatitis A Hepatitis B	MPSV or MPSV4	Meningococcal Polysaccharide Vaccine	Rota (RV1 or RV5)	Rotavirus
DTaP	Diphtheria, Tetanus, acellular Pertussis	Hib	<i>Haemophilus influenzae</i> type b	MMR / MMRV	Measles, Mumps, Rubella / with Varicella	Td	Tetanus, Diphtheria
DTP	Diphtheria, Tetanus, Pertussis	HPV	Human Papillomavirus	OPV	Oral Poliovirus Vaccine	Tdap	Tetanus, Diphtheria, acellular Pertussis
Flu (TIV or LAIV)	Influenza	IPV	Inactivated Poliovirus Vaccine	PCV or PCV7 or PCV13	Pneumococcal Conjugate Vaccine	TIG	Tetanus immune globulin
HBIG	Hepatitis B Immune Globulin	MCV or MCV4	Meningococcal Conjugate Vaccine	PPSV or PPV23	Pneumococcal Polysaccharide Vaccine	VAR or VZV	Varicella



Sunscreen Authorization Form (Sunscreen Brought from Home)

Child's Name:	Date of Birth & Age: <small>(Do not apply on infants 6 months and younger without written permission from health care provider)</small>
Name of Sunscreen & SPF:	Active Ingredients:
Start Date:	Stop Date: (up to 6 mo. after 'start date')
Times to be Applied:	Possible Side Effects:
Special Instructions: (Include previous sunscreen reactions)	

Reason for medication: Protection from sun
Amount to be given: Cover exposed areas of skin
Route: Topical
Storage: Room temperature

Parent/Guardian Signature

Date

Daytime Phone Number



Diaper Cream/Ointment Authorization Form

Child's Name:	Date of Birth/Age:
Name of Medication:	
Start Date:	Stop Date: (up to 6 months after 'start date')
Apply topically: <input type="checkbox"/> when rash is present <input type="checkbox"/> with every diaper change <input type="checkbox"/> other:	Amount to be applied:
Possible side effects:	<input type="checkbox"/> Above information consistent with label?
Special Instructions:	

For diaper rash prevention or treatment.
Store at room temperature.

Parent/Guardian Signature

Date

Daytime Phone Number

Physician Signature*

Date

Physician Phone Number

* Necessary only for diaper creams/ointments not labeled for use in the diaper area. (Pharmacist label on prescription medication indicates consent of health care provider.)

Kusum's Childcare & Preschool

EMERGENCY 3 DAY SUPPLIES

We have had a new state requirement for child care's to have a 3day (72 hr)emergency supply of food, fresh water, clothing and others. This is in effect immediately. We would therefore like to request you to provide the following in each **child's separate bag pack**, so that we can store this in case of an emergency for easy access for each child. This can be swapped out as your child grows or go back when your child leaves our daycare:

Mostly what we would need from you would be:

1. **Infant formula and diapers**
2. **A blanket**
3. **A small flashlight and extra batteries and a whistle (if possible)**
4. **Clothing as follows (To be changed out preferably once every year):**
5. **A jacket, sweater or coat**
6. **Long pants**
7. **A long sleeve shirt**
8. **Sturdy shoes**
9. **a hat and gloves**
10. **Personal identification (for each child), parental identification, contacts and alt. contacts.
Or and a form of a labeled photograph in a ziplock baggie placed inside each backpack.**
11. **a 3"X 5" or 4"x 6" close up nice family picture with parents and child to be posted with the rest of the children's pictures (you can keep on changing these as the child grows**

Addendum M

Kusum's Childcare & Preschool

Letter Notifying Families Regarding Health & Safety Policy Changes in our Child Care Program

Dear Parents and Families,

Given the COVID-19 (Coronavirus) crisis that is spreading through our country, I want to assure you that we are monitoring the situation closely. Based on information we have at this time, we will continue to operate Kusum's Child Care & Preschool to minimize disruption to you and your family. If the situation should change, we will notify you immediately.

Effective June 15, 2020 and for the foreseeable future, we will be taking extra precautions to ward off Coronavirus. We are taking these extra steps to support the health and safety of your children, your family and our staff.

Please take note of the following changes to our policies and procedures:

Check-In and Pick-Up

- Families will be greeted at the Sliding Door- back side of the house, where a staff member will greet the child(ren). Parents and other family members will not be allowed inside the child care program. Prior to parents leaving the site, a trained staff member will take the temperature of their child(ren) and ask parents the following questions:
 - Do you live with anyone or have you had close contact with anyone who has been diagnosed with COVID-19 within the past 14 days?
 - Do you or anyone in your household have a fever, cough and/or shortness of breath?
 - Do you or your child(ren) have any other signs of communicable illness such as a cold or flu?
- Children and staff will be required to wash their hands immediately upon entering the building and hourly throughout the day. When children are received for drop-off, they will be escorted into the nearest bathroom where their hands will be washed prior to being brought to their classroom/child care area.
- Upon your arrival to pick up your child, a staff member will bring your child out to you. Doing so will limit direct contact and help us to maintain social distancing.

Healthy Environment

- We will separate children into smaller groups that fall within state or local guidelines.
- We will not share equipment and will clean equipment between uses.
- All classrooms will remain separated to reduce the number of children in one area and to reduce the possibility of viral transmission.
- Staff will disinfect high-touch surfaces, such as door handles, light switches, faucets, toys and games that children play with at least once daily.
- We will perform an enhanced deep cleaning every night in all areas, on all touched surfaces.
- Staff will have access to anti-bacterial hand sanitizers and disposable gloves and use them as needed.
- Staff will wash/scrub their hands and children's hands a minimum of hourly (noted by the CDC as the most effective preventive measure).
- No program tours will be given until further notice to reduce the number of visitors in the building.

Meal Preparation & Service

Addendum M (cont'd)

- All surfaces will be disinfected before meal preparation and feedings using CDC- or EPA-approved products.
- All staff will wash hands before and after meal preparation and feeding.
- Each child's meal will be plated and served by staff, instead of served family-style.

Child Health

- Staff will receive education on COVID-19 symptoms as well as preventive measures.
- Children who start to experience symptoms of respiratory illness, including a fever of >100.4 while at child care, will be isolated from other children until they can be picked up.
- Until further notice, all program field trips will be suspended.

Staff Health & Wellness

- Staff will receive additional training on infection control and workplace disinfection.
- Staff will not share their phone, devices or meal or utensils with one another or children.
- Staff will check their temperature at the beginning of each shift and notify their supervisor if >100.4 as well as self-monitor for signs and symptoms of COVID-19 and notify their supervisor if any develop (fever or respiratory symptoms).
- Staff will wash their hands immediately upon entering the program and immediately prior to leaving.
- Staff will not be allowed to work if they are feeling ill or experiencing respiratory symptoms.

Tuition

- No unpaid vacation weeks will be allowed to be used by families during this time period.
- As long as we are open and your child is in attendance, tuition will be due in full. This includes if we are only open for a portion of a week and need to close for the remainder of the week.
- If you are able to work from home and choose to keep your children at home, you will be required to pay ALL of your normal weekly tuition to retain your spot.
- If you are laid off or are part of a reduction in staffing and choose to keep your child at home, you will be required to pay ALL of your normal weekly tuition. We WILL NOT require proof of reduction from your employer.
- If you choose to pull your child out and not pay, there is no guaranteed spot upon a request to return.
- At this time, if the state forces a closure for an extended period of time, PART tuition will still be due to retain a spot for your child.

Communication

- If the current situation changes and it becomes necessary to update our procedures or close our program temporarily, we will notify key family contact by email.

Thank you for your understanding and patience as we implement these new procedures. Our goal is to minimize disruption while at the same time keeping you, your family and our staff healthy and well.

Sincerely,

Kusum Chohan

Child Care Parent/Guardian Permission

Addendum N

Child's Name (First Middle Last)	Licensee's Name Kusum Chohan dba Kusum's Childcare & Preschool
----------------------------------	---

Transportation and off-site activity

I give my permission for the licensee or the licensee's staff to take my child:

Yes No

To and/or from school:

By a personal vehicle.....

By riding with my child on public transportation.....

By walking with my child.....

On field trips (a written notice about the field trip will be given at least 24 hours before the field trip is taken):

By a personal vehicle.....

By riding with my child on public transportation.....

By walking with my child.....

On occasional errands:

By a personal vehicle.....

By riding with my child on public transportation.....

By walking with my child.....

Other (specify here: _____):

By a personal vehicle.....

By riding with my child on public transportation.....

By walking with my child.....

Water activities including swimming pools and other bodies of water

I give my permission for the licensee or the licensee's staff to:

Yes No

Take my child swimming or play in a swimming pool or other body of water

Bathing

I give my permission for the licensee or the licensee's staff to:

Yes No

Give my child a bath or shower if my child needs to be cleaned after having an accident such as diarrhea or vomiting

Give my child a bath or shower if my child is enrolled in overnight child care

Addendum N (Cont'd)

Photo, video, or surveillance activity

I give my permission for the licensee or the licensee's staff to:

Yes **No**

Take photographs of my child.....

Take video of my child

Capture my child's image on surveillance video used at this child care facility

Food cooked by another child's parent or guardian (on special occasions only)

I give my permission for the licensee or the licensee's staff to:

Yes **No**

Serve my child food prepared, cooked or backed at home by another child's parent or guardian (on special occasions only).....

I have reviewed the licensee's written policies and have had the opportunity to discuss with the licensee the policies pertaining to the items listed on this permission form.

Parent or guardian signature

Date

Parent or guardian signature

Date

Addendum O



Child Care Resources Media Release Form

I hereby consent to and authorize the use and reproduction by Child Care Resources (CCR), of photographs, video footage, audio, and/or quotes of me/or my child(ren) submitted to, or taken by, CCR staff or contracted vendors.

CCR reserves the right to use collected photographs, video footage, audio, and/or quotes on any portion of its public website, in printed and digital CCR publications, communications and/or presentations without compensation. Media will only be used within CCR audiences and/or for the advancement of CCR's mission.

I acknowledge that I have read and understand the terms of this release.

Participant Signature

Printed name

Child's name (if parent/caregiver signing)

Date

Participants completing this form authorize use of media/quotes/video/audio of themselves and/or the children in their care. Only parents/guardians of participating children may authorize the use of media/quotes/video/audio of their children by signing this release form.



Medication Authorization Form

Child's Name:	Date of Birth/Age:
Name of Medication:	Reason for Medication:
Start Date:	Stop Date:
Times to be given: <small>(*Can NOT be given "as needed")</small>	Amount to be given:
Possible Side Effects:	<input type="checkbox"/> Oral <input type="checkbox"/> Topical <input type="checkbox"/> Other
<input type="checkbox"/> Above information consistent with label?	Requires Refrigeration: <input type="checkbox"/> yes <input type="checkbox"/> no
Special Instructions:	

Parent/Guardian Signature

Date

Daytime Phone Number

Physician Signature

Date

Physician Phone Number



During COVID-19, keep your child

Addendum Q home if...

... they have any of these symptoms:



- fever (a temperature of 100.4°F or higher)
- cough
- shortness of breath or difficulty breathing
- chills
- muscle pain
- headache
- runny or stuffy nose
- sore throat
- diarrhea
- vomiting
- new loss of taste or smell
- or other signs of new illness unrelated to a preexisting condition (such as seasonal allergies)

Type something

Keeping children home helps prevent the spread of illness in the child care or early learning program.

Test your child for COVID-19

If your child has any of the above symptoms, **even if symptoms are mild**, they need to be tested for COVID-19 before they can return to child care.

King County endorses any FDA approved COVID-19 test. There are two categories of COVID-19 tests that are FDA approved for detecting COVID-19.

Your child care provider may have a policy for documentation of a negative COVID-19 result before returning to child care. Please check with them before choosing which COVID-19 test to use.

For more information about FDA approved COVID-19 tests, and a list of free testing sites, visit kingcounty.gov/covid/sites.

Scan the QR code for a list of testing sites:



Addendum Q (Cont'd)
If your child is not a close contact of someone who has COVID-19, they may return to the child care program after having COVID-19 symptoms if they:



Test negative for COVID-19 and it has been:

- at least 24 hours since fever has resolved (without use of fever-reducing medication)
- AND symptoms have significantly improved
- AND family provides documentation of the negative test result to the child care program

Do not get tested for COVID-19 and it has been:

- 10 days since symptoms began
- AND at least 24 hours since fever has resolved (without use of fever-reducing medication)
- AND symptoms have significantly improved

Test positive for COVID-19 and it has been:

- 10 days since symptoms began
- AND at least 24 hours since fever has resolved (without use of fever-reducing medication)
- AND symptoms have significantly improved
- AND per Washington Administrative Code 110-300-0205(8), a licensed health care professional provides a written note stating the individual may safely return after being diagnosed with a contagious disease

Please notify the child care or early learning program as soon as possible if your child tests positive for COVID-19.

Individual Care Plan for Child in Child Care

Plan must be updated annually or when there is a change in the child's special need

Child's Full Name	Today's Date
CONTACT INFORMATION	
Parent's/Guardian's Name	Telephone
Parent's/Guardian's Name	Telephone
Primary Health Care Provider	Telephone
Specialist (if applicable)	Telephone
Specialist (if applicable)	Telephone
CHILD'S SPECIAL NEEDS	
Diagnosis, if known:	
Known symptoms and triggers:	
Describe activity, behavioral, or environmental modifications that are needed for the child:	
Allergies (other than food allergy):	
For food allergies or special dietary needs due to a health condition - must obtain written instructions from child's health care provider (use page 3 of this form or health care provider's form)	
MEDICATIONS (Medication Authorization Form must be completed for each medication.)	
List medication to be given at scheduled times , and how medication is to be given.	
List medication to be given during an emergency , and how medication is to be given.	
Describe symptoms that would trigger emergency medication.	
EMERGENCY RESPONSE PLAN	
List the steps and procedures the early learning or school-age provider should perform during an emergency related to your child's special need.	

Addendum R (cont'd)

Individual Care Plan for Child in Child Care

Plan must be updated annually or when there is a change in the child's special need

FOOD ALLERGY and/or SPECIAL DIETARY REQUIREMENTS

This page must be completed and signed by the child's health care provider and parent or guardian.

Child's Full Name:		Today's Date:
Food the child must not consume (list each food separately)	Appropriate substitute food(s)	
Describe allergic reactions and symptoms associated with this child's particular allergies.		
Describe the treatment plan for the early learning or school-age provider to follow in response to child's allergic reaction (include names of medication, dosage amount, and directions for how to administer medication).		
Other special dietary requirements due to a health condition.		

Health Care Provider Signature

Date

Parent or Guardian Signature

Date



Request for Fluid Milk Substitution – Child Care

Child's Name: _____

Milk substitution request:

If your child cannot drink fluid cow's milk due to medical or other special dietary needs but **does not** have a diagnosed medical disability, you or the child care center may choose to provide one of the approved non-dairy milk substitutes or creditable milk substitutes below, based on your request.

Identify why your child needs a milk substitute: _____

At this time, six brands of non-dairy milk substitutes available in Washington are nutritionally equivalent to and may be served in place of cow's milk:

- 8th Continent Soymilk - Original and Vanilla*
- Silk Soymilk - Original
- Great Value Soymilk - Original from Wal-Mart (red top only)
- Kirkland Organic Soy - Original (32-oz shelf-stable)
- Pacific Foods Ultra Soy - Original (32-oz or 8-oz shelf-stable)
- Ripple Dairy-Free Shelf-Stable Milk Original (32-oz or 8-oz), Chocolate* (8-oz) or Vanilla* (8-oz)

***Flavored non-dairy beverages cannot be served to children 1 through 5 years of age.**

Other milks that are creditable and may be served in place of fluid cow's milk are acidified milk, acidophilus milk, buttermilk (commercially prepared), goats milk, Kefir milk, lactose-free or reduced milk (such as Lactaid), and organic milk. **Note: Whole milk must be served to children 12 to 24 months and nonfat or 1% milk must be served to children 2 years of age or older.**

By completing the information below, your child can be served one of the approved non-dairy milk substitutes or other creditable milks noted above provided by the center (if the center chooses), or provided by you.

_____ I request my child be served the child care center provided approved non-dairy or creditable milk substitute as described above for meals that require milk.

_____ I will provide an approved non-dairy or creditable milk substitute to be served to my child as described above for meals that require milk:

(Name of approved non-dairy or creditable milk substitute)

Signature of Parent/Guardian: _____ Date: _____

What to do if a Person is Symptomatic



This flowchart is for K-12 schools, child care, and connected extracurricular activities.

If a person has one or more of these symptoms:

- Fever ($\geq 100.4^{\circ}\text{F}$) or chills
- Shortness of breath or difficulty breathing
- Muscle or body aches
- New loss of taste or smell
- Cough (new, changed, or worsening)
- Nausea, vomiting, or diarrhea
- Fatigue
- Sore throat
- Congestion or runny nose*



Isolate at home and test for Covid-19

If the symptoms are not consistent with a diagnosed chronic illness

OR they do not receive an alternative named diagnosis from a health care provider

OR they do not get tested



They test **POSITIVE** for COVID-19



They test **NEGATIVE** for COVID-19



Isolate at home

They can return to school, child care, and activities after five days have passed since symptoms first appeared if:

1. No fever within the past 24 hours (without medication) **AND**
2. Symptoms have significantly improved

Additionally, individuals should wear a mask when around others days 6–10.**



Return to school, child care, and activities if:

1. No fever within the past 24 hours (without medication)
- AND**
2. Symptoms have significantly improved

If symptoms persist, retest every 24–48 hours through at least five days after symptoms started.

Child care providers should review their WAC and licensing requirements and follow any additional measures that are required.



* If the child is under the age of two and ONLY has congestion/runny nose with no other symptoms, testing and isolation is not required. If the child's symptoms worsen or persist longer than five days, follow the flowchart for children over two and it is highly recommended to contact a healthcare provider.

** If you cannot wear a well-fitting mask: You should complete a full 10-day isolation at home. See the [K-12/child care guidance](#) for additional information.

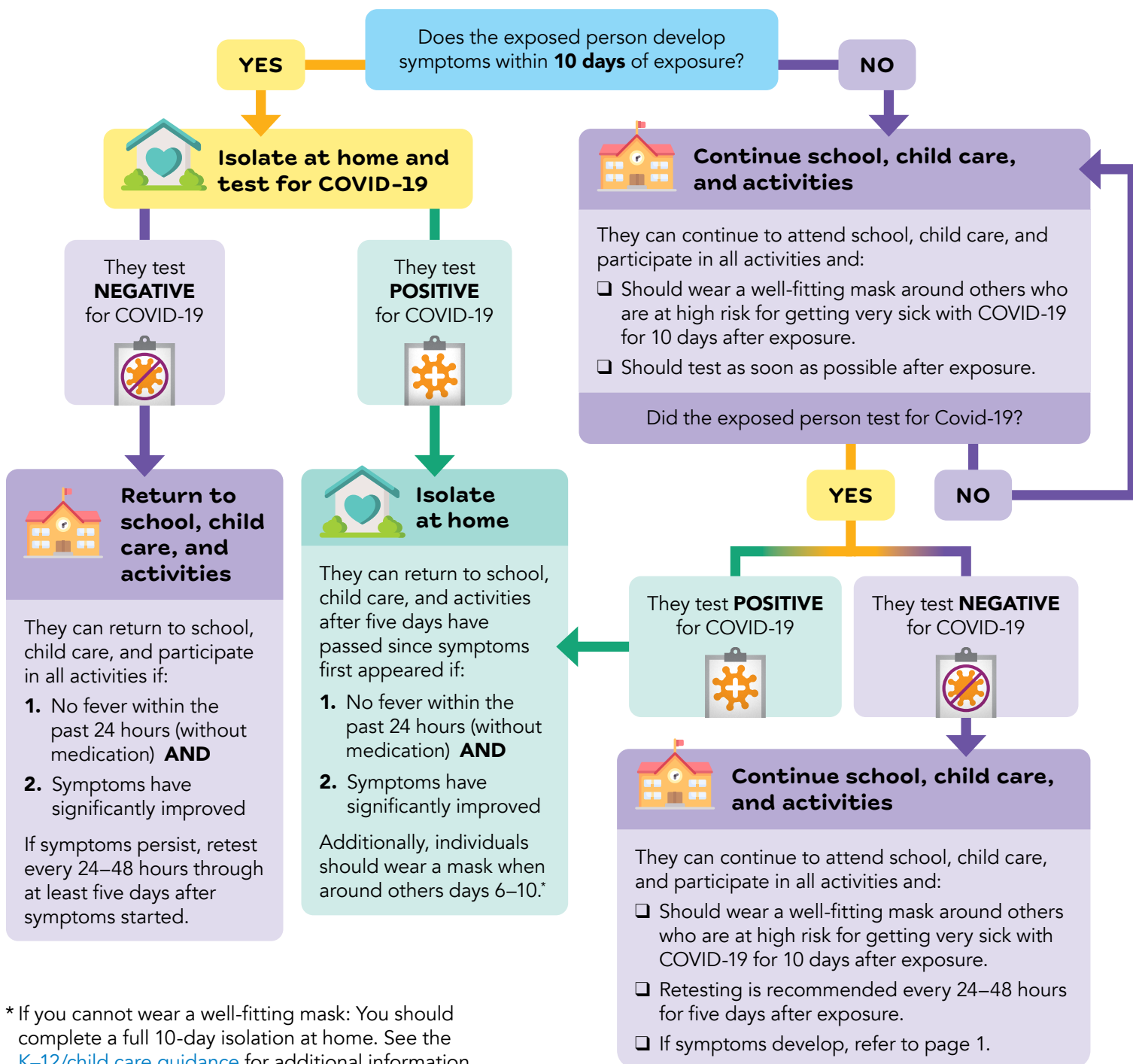
What to do if you receive an exposure notification or think you have been exposed to COVID-19



This flowchart is for K-12 schools, child care, and connected extracurricular activities.

Regardless of vaccination status, use the following guidelines:

- Continue to attend school, child care, and activities.
- Monitor for symptoms for 10 days after exposure.
- Should test as soon as possible after exposure.
- Should wear a well-fitting mask for 10 days after exposure.



* If you cannot wear a well-fitting mask: You should complete a full 10-day isolation at home. See the [K-12/child care guidance](#) for additional information.