



## FAMILY HANDBOOK

2601 East Thunderhill Place Phoenix, AZ 85048

(480) 759-1515 (office)

(480) 759-1436 (fax)

[childrenofhope@myesperanza.org](mailto:childrenofhope@myesperanza.org)

Lynn Hockenberger, Director

CHILDREN *OF* HOPE CHILD DEVELOPMENT CENTER  
PARENT RELEASE FORM

I/We \_\_\_\_\_ have read and understand the school policies and procedures outlined in the following documents:

\_\_\_\_\_ CHILDREN *OF* HOPE'S FAMILY HANDBOOK  
\_\_\_\_\_ THE PARENT ORIENTATION POWERPOINT

We agree to comply with all stated policies and procedures. Policies are subject to change during the course of the school year.

Please refer to the Children of Hope Preschool website at [www.childrenofhopecdc.com](http://www.childrenofhopecdc.com) for revisions or to request a hardcopy of either document from the preschool director.

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Signature

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Class

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Date

**PLEASE RETURN THIS FORM TO THE PRESCHOOL OFFICE  
BY August 31st.**

For more information, please contact the preschool director at (480) 759-1515.

## I. Mission and Philosophy

### *Our Mission*

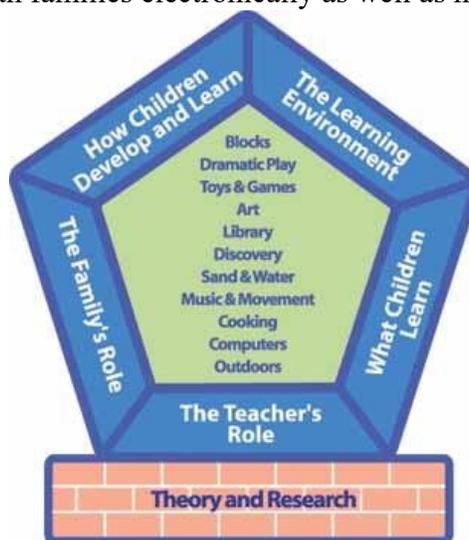
*As an outreach of Esperanza Lutheran Church, Children of Hope Preschool/Child Development Center is dedicated to providing a positive and hands-on Christian learning environment. We will nurture the students' spiritual, social-emotional, cognitive and physical growth through a child-centered, developmental curriculum. We form a true partnership with the family to build a strong foundation that will foster a life-long love of learning.*

### *Non- Profit Corporation*

Children of Hope Preschool/Child Development Center is a non- profit corporation in the state of Arizona registered with the Internal Revenue Service under 501(c)3. Children of Hope follows all of the Arizona Department of Health Services Child Care Facilities Regulations. We are dedicated to being an excellent resource for parents as early childhood educators of their young children.

### *Our Philosophy/Curriculum*

The philosophy behind our curriculum is that children learn best by doing. This requires active thinking and learning by experimenting to find out how things work and to learn first hand about the world in which we live. Below is our organizational philosophy which includes all of the components used to nurture learning and development that leads to kindergarten readiness. Our methodology is based on the standards and practices endorsed by the First Things First Quality First Program, *The Creative Curriculum*, the Arizona Department of Education's Infant Toddler Developmental Guidelines and Early Learning Standards and the National Association of the Education of Young Children's (NAEYC) Early Learning Standards. All lessons are designed with this information based on early childhood development research and theory and developmentally best practices. An overview of curriculum is shared with families upon enrollment and/or during Home Visits. Monthly lesson plans and newsletters are shared with families electronically as well as hardcopy.



# We Participate in Quality First

Quality First – a signature program of First Things First – partners with child care and preschool providers to improve the quality of early learning for kids birth to 5. Quality First funds quality improvements that research proves help children thrive, such as training for teachers to expand their expertise in working with young children and coaching to help providers create learning environments that nurture the emotional, social and academic development of every child.

Currently more than 900 child care centers, homes and preschool programs in communities across Arizona participate in Quality First. All of these programs are licensed and regulated but participating in Quality First is voluntary. These programs are committed to quality improvement, going beyond regulatory requirements to help the infants, toddlers and preschoolers in their care be ready for success in school and beyond.

First Things First supports child care and preschool programs enrolled in Quality First with:

- Coaching to build on what's great about a program and identify opportunities to improve
- Funding for the purchase of educational materials, equipment and other resources
- Financial support for teachers and caregivers to gain expertise in early childhood and how to nurture the development of young children
- Specialized assistance from a team of experts in child health, mental health and supporting children with special needs
  - **Quality First Coach:** Nicole Galbo: Provides periodic visits or as needed to provide professional development and guidance of staff to implement developmentally appropriate best practice in settings and relationships
  - **Child Care Health Consultant:** Idolinda Khalsa RN, BSN Conducts periodic visits or as needed to provide health and safety technical assistance, education and resources. The CCHC can observe, advise, provide professional development, refer to community services and provide technical assistance to our staff.
  - **Smart Support Early Childhood Mental Health Consultant:** Elizabeth Trader LCSW: Provides periodic visits or as needed to provide professional development and guidance of staff to insure the social-emotional needs of students, parents and staff are being addressed and met.



## Quality Child Care Helps Kids Thrive

### Why quality matters

- 90% of a child's brain develops before age 5. The positive, nurturing relationships young kids have with adults — from parents to child care and early learning professionals — shape their learning now and throughout their lives.
- Parents are their child's first and best teachers, and a large number of children in Arizona spend their day learning from other adults, whether in regulated early childhood settings — such as child care centers, homebased programs or preschools — or informal child care with family, friends or neighbors.
- No matter the setting, quality matters for infants, toddlers and preschoolers. Quality early learning settings help children develop skills — like motivation, self-control, focus and self-esteem — that are crucial to their success now and once they enter school.



## ***How Children Develop and Learn***

Knowing how children develop and learn is the basis for planning our program, selecting materials and guiding children's learning. By *knowing*, we mean appreciating general patterns of growth in all children as well as the differences you will certainly encounter among individual children. Our curriculum enhances social/emotional, physical, cognitive and language development.

## ***The Learning Environment***

The learning environment is the structure of the classroom that sets the context for teaching and learning. The space and materials at Children *of* Hope Preschool are carefully selected and organized to promote active learning. Each classroom includes a daily routine and schedule, choice times and small and large group times. We are focused on creating a classroom community that promotes positive relationships and where children make friends and learn social problem-solving skills in a Christian environment.

## **Interest Areas**

The physical space of each classroom is organized into 10 interest areas:

- **Blocks**
- **Dramatic Play**
- **Manipulatives/Math**
- **Art**
- **Library**
- **Discovery/Science**
- **Sand and Water**
- **Music and Movement**
- **Technology**
- **And Outdoor Play Areas**

The 10 interest areas offer multiple opportunities for children to explore, discover, and learn. Interest areas provide a setting for children to learn academic content and apply skills.

## Environmental Health Policy

Children are easily susceptible to many hazards in the environment. Examples of hazards are lead, smoke, pesticides, air pollution, and water. They need to be protected as their brains and bodies are still developing. Anyone who works in the child care setting will protect children from environmental hazards.

### Policy:

- All rooms are ventilated with fresh air as much as possible.
- Facilities built before 1978 are to be tested for lead. • Toys are screened for lead using [www.cpsc.gov](http://www.cpsc.gov)
- The child care facility is kept clean.
- Children wash hands before eating, after playing outdoors, after playing with play dough, paint, or water, after using the bathroom.
- Leaded crystal glassware and imported pottery are not used.
- Only non-toxic art supplies, approved by the Art and Creative Materials Institute (ACMI) are used.
- A tobacco and smoke free environment is maintained.
- Pesticides are only used when children are off site and will not be back for at least 24 hours.
- Fruits and vegetables are washed before eating.
- Sanitation is not done while children are close. • Smoking is prohibited within sight of children.
- Only safe drinking water is given to children.
  - On September 1, 2017, the Arizona Department of Health Services (ADHS) launched a program to screen drinking water for lead in child care facilities across Arizona. The purpose of the program is to increase awareness of lead poisoning prevention among parents and caregivers of young children, who are most vulnerable to lead poisoning, and to identify drinking water sources that contain lead above the ADHS screening level.
  - Our drinking water was tested for lead during a recent inspection by ADHS' Bureau of Child Care Licensing. We are pleased to report that the lead screening results were **below the screening level**. No additional actions are needed at this time.
  - To learn more about the program, visit the program website: [Azhealth.gov/waterscreening](http://Azhealth.gov/waterscreening).

## ***What Children Learn***

Based on scientific research and state and professional standards, our curriculum identifies the knowledge, skills and concepts important for preschool children to acquire in each content area: literacy, math, science, social studies, the arts, and technology.

As defined by the AZ Infant Toddler Developmental Guidelines and the AZ Early Learning Standards we describe the key components of these content areas as:

**Social Emotional:** Social and emotional development is the foundation of children's cognitive development and life-long learning. This domain becomes the foundation for helping children understand themselves, form positive constructive social relationships and relate to the larger world.

**Approaches to Learning:** Children's ability to stay focused, interested, and engaged in activities supports a range of positive outcomes, including cognitive, language, and social and emotional development.

**Language and Literacy:** Vocabulary and language, phonological awareness, letters, words, print, comprehension, books and other texts, and sources of enjoyment

**Mathematics:** Numbers, patterns and relationships, geometry and spatial awareness, measurement, data collection, organization and representation

**Science:** Physical science, life science, earth and the environment

**Social Studies:** Family, community, spaces and geography, people and how they live, people and the environment, and people and the past

**Physical Development, Health and Safety:** Gross and fine motor development, health, hygiene and safety

**Fine Arts:** Dance, music, drama, and the visual arts

**Technology:** awareness of technology, basic operations and concepts, technological tools, and people and technology

## ***The Teacher's Role***

The teacher's role is an ongoing cycle of observing children, guiding their learning, and assessing their progress. Our teachers motivate and nurture the children, build on their prior knowledge and strengths, and support their learning in an intentional way by using a variety of strategies to increase their knowledge, skills and understandings in a Christian environment.

### ***The Family's Role***

Home and school are a young child's two most important worlds. Children must bridge these two worlds every day. If home and school are connected in positive and respectful ways, children feel secure. We build a true partnership with the family because we truly value the family's role in a child's education and recognize how important it is that we work together. You are welcome to visit your child's classroom at any time during our regular hours of operation. Advanced planning and coordination with your child's teacher of a visit is appreciated when possible.

### ***Children of Hope Board of Directors***

The Board of Directors is the primary governing body of Children of Hope and is composed of the preschool Director, the church pastor, a CofH teacher, CofH parents, several members of Esperanza Lutheran Church and anyone from the community who has an interest in helping guide the preschool. The Board is responsible for establishment of policy, the appointment of Directors, the preservation of the school's mission, strategic planning, finances, fundraisers and marketing. Meetings are open to the general membership, and we encourage attendance by any interested parents. Meeting minutes and financial reports are available to members in the Office or by request to the Board of Directors.

### ***Chapel***

Each month the children meet with the Pastor and the Family Ministry Coordinator of Esperanza Lutheran Church at Chapel Time. Chapel Time includes a lesson and music. The purposes of these services include:

- To let each child know they are unique and loved
- To give the children a personal worship experience
- To provide a spiritual unity for our school by singing praises to God
- To know that Jesus is their friend and that we are to treat others with love and kindness as He taught

Classes, individual students, teachers, pastors and other outside speakers may be a part of the chapel services. Parents are invited and encouraged to attend chapel services at any time.

## **II. Policies and Procedures**

### ***Hours of Operation***

During the regular school year the preschool office is open on Monday through Friday from 8:00 a.m. to 3:00 p.m. We are licensed to have children on campus until 2:00pm.

## *School Calendar*

Children of Hope half-day preschool classes follow the Kyrene School District Calendar for all school holidays and breaks as closely as possible. Regular classroom hours are 8:30 a.m. to 11:30 a.m. T-TH, M-W-F or M-TH, with Enrichment Classes and/or Lunch Bunch are offered from 11:30am - 2:00pm.

## *Age Requirement*

Children must be age two, three or four by September 1<sup>st</sup> to be eligible for the class of that age group. Children do not 'move-up' a class when they have a birthday mid-year.

## *Transition Plan*

Families and children are transitioned in and out of the school program in the following manner:

- **Site Visits:** Before enrollment for the upcoming school year which begins in March of each year, families are invited to tour the campus and visit the classrooms. Time to speak to the teachers and preschool director is provided. If a student enrolls mid-year, site tours and classroom visits are scheduled as needed.
- **Home Visits:** During the two weeks prior to the first day of school (late July into early August of each year) Lead Teachers conduct Home Visits with each student, new or returning. During this visit, intake forms and general information paperwork is shared with the family. Teachers visit with each child and conduct various learning activities. Teachers also answer any questions parents may have. These Home Visits prove to be a valued, special time between Lead Teacher and families as it initiates or reinforces relationship, allowing for a smooth transition into the school year.
- **Back to School Park Day:** During the week prior to the first day of school families are invited to Thunderhill Park to visit and meet new and old friends who are enrolled for the school year. Veteran parents are on hand as welcoming faces.
- **Show & Tell Night:** During September of each year families are invited to visit the classrooms during evening hours. They are guided through each learning center with their student(s). Teachers and preschool director are on hand to answer questions, showcase work and strengthen relationships. If possible, support team (Quality First Coach, Smart Support Consultant and Health Care Consultant) are available to acquaint themselves with families and answer any questions related to the services they provide.
- **Moving Up:** Children remain with their peer group/class for the entire school year. Children do, however, have the opportunity to be taught by every teacher at the school in various classrooms during optional after school enrichment classes and Lunch Bunch. Parents are always welcome to visit potential classrooms at any time. Children are enrolled for upcoming school year beginning in March and are moved up each August based on readiness and feedback from teachers shared throughout the year and at Parent/Teacher conferences, held twice annually. (see more in Parent/Teacher Conferences)

- **Moving on to Kindergarten:** Beginning in January families are informed of local school districts' Kindergarten Round Ups and are encouraged to tour potential programs. Preschool director shares a list of local schools, public and private, when requested. Teachers and preschool director share readiness with families prior to kindergarten enrollment. Students can remain at preschool for an additional Pre-K year if necessary/requested by family.
- **Withdrawal:** When a family notifies our program that a child is withdrawing at any time throughout the year, an assessment of the child's developmental progress can be shared for the family to share with their new program. (see more in Withdrawal Policy)

### ***Toilet Training***

Independent toileting skills are required for those beginning in the 3's and older classes. The 3's and Pre-K classrooms are not licensed for diaper changing and our staffing plan does not allow for it. Frequent accidents in the 3's and Pre-K classes will require parent conference and a success plan. In the Toddler (2's) Class, children are not required to be potty trained and daily diapering records are kept. Teachers in the Toddler Classroom communicate regularly with parents on the child's toilet training progress.

### **Diapering Procedure**

- Diaper changing table is sturdy, a convenient height (28"-32"), water proof and in good repair (no cracks)
- Diaper changing is only done in designated area and positioned to allow for supervision of all children.
- Diaper changing supplies shall be stored in an area inaccessible to children.
- Diaper changing tables will not be used to store any items and will be clear of all supplies.
- A sink is within reach of diaper changing table to allow for proper hand washing and a tightly covered, plastic lined, hands-free diaper pail is available in the diapering area.
- The child will be supervised by touch while on the changing table.

### **Toilet Learning Policy**

Learning to use the toilet is an important developmental milestone. **Parents** and **providers** must be partners and support each other during this process to make it as easy and smooth as possible. Plans about each child's toilet training needs are to be developed by the caregiver and parent together.

Toilet learning takes place in the childcare center and in the home. Learning and discussions about toileting take place in the classroom and in the home, outside and inside the bathroom. The restroom in both the home and the childcare center should be well stocked with the supplies to be used during the actual toilet use.

The right time for toilet learning will be different for every child. It is important to look for clues that the child is ready. The decision should be based on the child's developmental level not the adult's eagerness to start. It is recommended the process not begin before 24-27 months of age.

To be successful child must be able to:

- cooperate with adults
- stay dry for at least two hours at a time during the day or be dry after naps
- understand words about the toileting process
- have regular and predictable bowel movements
- express verbally, through facial expressions or posture the need to eliminate
- follow instructions
- get to and from the bathroom area help and pull diapers or pants up and down

Make toilet learning part of normal curriculum, reading stories, singing songs, discussing various steps of toileting, and taking trips to the bathroom. Training should be given to caregivers upon hire, and practices assessed on a regular schedule. If the child shows resistance to learning, he or she may not ready for the process or find it too stressful. Let the child guide the process. If a power struggle occurs stop the training and start again at another time.

### **Procedure:**

Parents and Caregivers should:

- Talk about signs that indicate the child is ready to begin toilet learning.
- Agree on how to work on the toilet learning process together.
- Use normal routines to establish regular toileting times to help make toileting a habit.
- Encourage practice runs to the toilet whenever the child gives a signal (facial expressions, grunting, holding genitals, squirming).
- Help children understand the association between relieving themselves and the bathroom by taking them there, talking about relieving themselves then flush the toilet and explain where the waste goes.
- Teach proper hygiene habits. Show children how to wipe carefully from front to back, and to always wash their hands after using the toilet.
- Try to keep the child's daily schedule, routines and rituals consistent between home and child care. Try to take them to the toilet before they relieve themselves so they can experience success.
- Use the same words to describe body parts, urine, and bowel movements at home and in child care. It is best to use proper terms that will not offend, confuse or embarrass the child or others.
- Read the same or similar books about using the toilet at home and in child care.
- Give the child opportunities to ask questions and watch for reactions that will show how the child perceives and feels about using the toilet.
- Use the same method of praise and reinforcement at home and in child care. Rewards such as food or candy aren't recommended. Verbal praise is best.
- Handle toileting accidents the same at home and in child care. Provide plenty of changes of clothing for the child in care so there is always clean clothing in the event of an accident.
- Taking children to the toilet when they indicate they have the need is important, watch for signs.
- Establish a regular schedule and try to put the child on the toilet **before** they relieve themselves. Be consistent.

The Arizona Department of Health Services Office of Child Care Licensing Surveyor recommends a suitable area for changing a **pull-up, which is considered a diaper**. Note: “Changing a child from the floor or on a chair puts the adult in an awkward position and increases the risk of contamination of the environment” (Caring for Our Children, p. 108, 2011). A changing table is recommended for all soiled and wet diaper changes. The table allows for a well-organized procedure. Steps are recommended for older children, so the adult does not have to lift a heavy child. This can promote independence of the child and help reduce the risk of back injury for the adults. If a decision is made to change a wet diaper in the restroom the procedure listed in “Appendix 8: Changing Diapers, Pull ups, and Soiled Underwear” is recommended. The procedure is the same as changing a diaper. Sanitary practice is very important because disease causing germs are found even in wet diapers/pull-ups.

**All “Pull-ups” that are soiled with stool must be changed on a changing table. Special notes:**

Safety is of special consideration when placing a child on a toilet. We will never leave a child unattended. Unsupervised access to toilet areas is unacceptable even when fostering independence during toilet learning. Plenty of encouragement and praise will be given. A child will never be forced to sit on the toilet. Accidents are just that; expect urine and soiling “accidents”. We avoid using harsh language when an accident occurs and we work to build a child’s success and self-esteem with verbal rewards and praise.

***Arrival/Dismissal Procedures***

Classes begin at 8:30 a.m. Arizona State Law requires that all children must be signed in when they arrive and signed out when they leave in the classroom books located outside each classroom. **A full signature is required.** These sign-in sheets and/or attendance sheets are used to call roll in the event of an evacuation or fire/emergency drill. It is very important that this policy is always followed. A child will only be released to the parent(s) or to a person authorized by the parent. Any authorized person other than a parent must show a picture ID before the child is released. At dismissal your child will remain in the class until he/she is called for by his/her parent or other authorized adult.

***Daycare***

Children of Hope DOES NOT provide childcare of any kind before school or after school programs have ended for the day at 2:00pm. All classes are part time.

***Lunch Bunch and Enrichment Classes***

Lunch Bunch is offered every day (with a few exceptions) from 11:30am – 2:00pm for students in the 3’s and Pre-K Classes for an additional fee (based on pick-up time). Children must be signed in, by the parent, to the Lunch Bunch book located outside of the preschool office and students must bring a sack lunch from home. Please pack an ice pack in your child’s lunch if necessary. Please do not send food that requires a heating as a microwave is not accessible in the classroom. Enrichment classes, offered in a block of classes, are also offered throughout the year during this same time for an additional fee. Children in Enrichment Classes should also bring a sack lunch from home. Parents can enroll their student(s) in Enrichment Classes through the preschool director.

## *Appropriate School Dress for Children*

We like creative activities, so children are encouraged to come to school in 'old' play clothes for participating in painting, wet sand play or pouring juice for snack.

## *Playground Safety*

Outdoor play is an important part of a child's physical development. Play in a safe outdoor environment promotes good health and reduces the risk of injury to children. Supervision is a key component to keeping children safe on the playground.

Each morning assigned staff members will be responsible to check the playground before children can play. Administrative staff will be notified of any hazards that are found on the playground after the daily inspection.

**Procedures:** Playground area will be assessed daily.

Staff members will ensure that the hazards are removed or made inaccessible or repaired immediately and will notify administration for follow-up.

Administrative staff will be notified of any hazards that are found on the playground after the daily inspection and will act to correct the deficiencies.

Administrative staff will be responsible to determine if any limitations in outdoor play needs to be considered. Limitations in outdoor play would be enforced when there is a weather advisory issued for the area.

Staff members have a first aid kit in each classroom and in the preschool director's office for use on the playground. The kit will be kept out of children's reach.

Basic rules that all children and staff are informed of will be enforced to ensure safety on the playground.

Staff will actively supervise children while playing outdoors. Staff will be positioned for best view of children and not congregating together.

Children will be dressed appropriately for outdoor play. **Closed toed shoes are strongly encouraged.**

All injuries occurring during outdoor play will be documented on a center form. Parents will be notified by telephone or in writing.

The outdoor play area is enclosed by a fence to aid in supervision and protect children from intruders.

Children will have access to drinking water while playing outdoors to prevent dehydration.

Riding toys will be capable of being steered, sized appropriately for the child, have a low center of gravity, and be in good condition and free of sharp edges and protrusions.

## ***Sun Safety***

Research shows a multitude of negative health conditions from overexposure to the sun. It is important to protect young children from over exposure to sun to prevent these negative effects.

Children of Hope Child Development Center agrees to follow the precautions below for all outdoor activities:

- Ask the child's family to apply sunscreen (choose one with SPF 15 or higher) prior to arriving at child care facility.
- Ask the child's family to provide a hat, sunglasses, and/or long sleeved, light colored clothing for their child that staff will put on the child when outdoors. Closed shoes, worn with socks, will protect the ankles and tops of feet.
- Provide shade during outdoor activities.
- Limit outdoor activities between the hours of 10 a.m. and 4 p.m., when the UV rays are at the highest level.
- Regularly check the UV Index for the intensity of the sun's rays and plan for outdoor activities accordingly:  
( <http://www.epa.gov/sunwise/uvindex.html>).
- Be a role model for sun-safe practices.
- Follow guidelines in the Empower guide book on protecting infants, toddlers and older children from harmful sun rays. (see guide book)  
<http://azdhs.gov/prevention/nutrition-physicalactivity/empower/index.php#resources-policies-home>

Information on sun safety (in English and Spanish) will be available to the families at least once per year.

## ***What to Bring to School Each Day***

Please bring a backpack for your child to keep a change of clothing in and to carry art projects and handouts home. Be sure to label the outside of the child's backpack.

Bring a complete change of clothing, including shoes, in the event of an accident or spill. Please be sure all items are clearly marked with your child's name. Be sure clothing and shoes are appropriate for each season. Please bring diapers and wipes for toddlers daily. Except for designated show and tell days, we request that children NOT bring toys to school.

## ***Snack Policy***

Snacks are served as an integral part of the learning environment to promote nutrition, development of motor skills, language, table manners, independence, relationship building, and social skills in children by eating together at child sized tables, with plates, napkins, and utensils.

Snacks will be served ‘family’ style. Staff will sit at the table and eat with the children, encouraging children to try all foods available. Staff will direct and encourage a

pleasant atmosphere and conversation, discussing the color, shape, and texture of foods served. Staff will be prepared for spills and accidents. Staff will encourage children to try a new food but will never force children to eat. Children will not be forced to eat food they do not want and will not be punished or ridiculed if they spill or drop food. Children who eat slowly will be given extra assistance and time, while children who complete the meal can clean their area, wash their hands, and play quietly elsewhere.

Families are asked to voluntarily sign up periodically for snack items and juice. All snacks must be pre-packaged and peanut free. Snacks will emphasize nutrient-rich foods including: fruits, vegetables, whole grains, low-fat or non-fat dairy, lean meats. Home baked snacks are not permitted. The school will provide purified water, cups, napkins and utensils. Water is visible and available at all times, indoors and out. Written menus are posted and shared with families and staff.

Parents of children with food allergies can provide snacks for their own children that closely match the snack the rest of the children are receiving on a given day. An EpiPen and/or a note from the child’s doctor will be required and kept on file in the preschool office for those children needing special snacks. Food will never be withheld as a form of discipline.

### ***Birthday Celebrations***

We want to celebrate your child’s birthday! School friends enjoy sharing the event. You may provide a special treat for the class with healthy choices encouraged. State law requires that all baked goods be store-bought and packaged. Feel free to make arrangements with your child’s Lead Teacher so we can plan accordingly to celebrate your child.

### ***Class Size***

The teacher to student ratio is: 1 to 4 in the Toddler classes and 1 to 7 in the 3’s and Pre-K classes. There will be a lead teacher and an assistant in every classroom in accordance with the ratio.

### ***School Communication***

Frequent and clear communication between school and home is vital. We send home monthly lesson plans, in addition to a variety of flyers and announcements as needed. These items will inform you of the learning activities your child is experiencing. **It is essential that you check and read through all communications provided in your mailbox, email and on your classroom Bloomz page.** We always want to maintain close communications with the parents and if you would like to meet with a teacher or the director, a meeting can be arranged.

### ***Parent Conferences***

Parent conferences are offered twice per year. The fall conference will focus on the social-emotional progress and development of the children as observed in the classroom setting. Teachers will also reference the screening tool, Ages & Stages SE Questionnaire, filled out by the parents to discuss any concerns and development. In late February a second conference will be held to also include cognitive progress. The ASQ-3, again filled out by parents and reviewed by teachers, will be referenced along with classroom observations, records and notes to discuss each child's adjustment, readiness and progress.

### ***Special Needs Children***

Child care programs must comply with the Americans with Disabilities Act. Inclusion of children with special needs has been shown to enrich the child care experience for all staff, children and families of enrolled children. All families will be treated with dignity and with respect for their individual needs and /or differences. All staff will be responsible for ensuring that confidentiality about special needs is maintained for all families and staff in the program. If your child has a condition, which may have the potential for a medical emergency or any behavioral, physical or mental challenge that may lessen the child's potential to fully participate in classroom activities, please let the Director know. Teachers, aides and parents may be made aware of any conditions so that they may know how to react if an emergency should arise and be able to interact with your child at an optimal level.

Children with special needs will be given the opportunity to participate in the program to the fullest extent possible. To accomplish this, the child care program may consult with agencies/organizations as needed, provided parental permission is granted (Authorization for Release of Information form). Parents may provide a full-time aide for their child if requested by Children of Hope staff and/or recommended by a child's physician. Inclusion of program staff on Individual family service plan (IFSP) and Individualized education program (IEP) case conferences is desired to ensure the child care program provides the most supportive environment possible. All staff will receive general training on the benefits of inclusion of children with special needs and training on specific accommodations that any child in their classrooms may need. The knowledge of parents and health care professionals involved in the care of the child with special needs will be consulted to determine accommodations and or therapy requirements. The individual written plan of care for children with special care needs will be followed in all emergency situations. The preschool director is responsible for making sure the plan shall be updated annually, at a minimum.

## ***Screening and Referral***

Preparing all children to start kindergarten healthy and ready to learn is our priority. We work daily to identify age appropriate milestones in children and recognize children who would benefit from support. To successfully accomplish this goal, we use a variety of research-based teaching methods and developmentally appropriate best practices. Staff work in collaboration to monitor a child's development with parents/guardians and in conjunction with the child's primary care provider, health education, mental health and early intervention consultants. Some of the tools used include but are not limited to:

- Developmental Checklists
- Ages & Stages Questionnaires
- Free Speech & Language Screenings
- Smart Support Consultant
- Child Care Nurse Consultant
- Parent Meetings
- Referrals to
  - Pediatrician
  - Developmental Pediatricians
  - AZ Early Intervention Program
  - Kyrene School District
  - Speech & Language Therapists
  - SAARC

## ***Late Pick-up Policy***

A child picked up 5 minutes or more after the end of class session is considered a late pick-up. Occurrence of a late pick-up will result in a verbal reminder. If the child is picked up late frequently, a written reminder letter will be given to the parents or authorized adult. After a written reminder has been presented, a \$15.00 fee will be assessed each time a child is picked up late for the remainder of the school year.

## ***Withdrawal Policy***

A 30-day paid written notice is required to withdraw your child. However, if you choose to withdraw your child within the first two weeks of enrollment, the 30-day paid notification policy is waived. All withdrawals must be done through the director.

## ***Discipline Policy***

All actions of the teachers, assistants and director are founded in the basic assumptions that every individual is unique and, therefore, deserves respect and love, for anything the child owns, and for anything the child produces or does. Positive methods of simple discipline which encourage the child's own self-control, self-direction, self-esteem and cooperation are emphasized (ex: Conscious Discipline, Love & Logic). Children will be positively redirected toward what the child should do or how they should behave as an alternative to the current behavior. Redirections are a guidance method, which entails stopping the undesirable behavior and directing the child to an alternative

activity or desirable activity. At times a child may be removed from the others for a quiet talk and for an opportunity to calm themselves. Discipline practices that are negative or involve humiliating or striking a child or showing anger in any way, will *never* be used.

Aggressive behavior (including biting incidents) resulting in bodily harm is taken very seriously. Children exhibiting behaviors dangerous to themselves or others will be removed from the group. An incident report will be filled out and the following guidelines will be followed:

First incident: The teacher will confer with the parents to discuss the policy and intervention techniques to be taken at school and home.

Second incident: Teacher, parent and director will convene which will include the discussion of options and further intervention techniques

Third incident: Child will be on a required leave of absence until the behavior has subsided.

If an injury results from the incident, the parent of the injured child will be advised of the situation as soon as possible.

### ***Grievance Policy***

If a parent has a concern or complaint, please communicate first with the classroom Lead Teacher. Any further questions or concerns should be brought to the director's attention. If any person is not satisfied with the resolution, they may submit their grievance in writing to the preschool's Board of Directors.

### ***Technology Policy***

We follow and agree with the recommendations from NAEYC and the Fred Rogers Center that "released a position statement, *Technology and Interactive Media as Tools in Early Childhood Program Serving Children From Birth through Age 8*, which provided research-based guidance to early childhood programs and educators on effective uses of media and technology.

It is our position that: technology and interactive media are tools that can promote effective learning and development when used intentionally by early childhood educators, within the framework of developmentally appropriate practice, to support learning goals established for individual children." Furthermore, classrooms may participate in closed Bloomz, Shutterfly and/or Facebook groups to privately post photos with photo release.

### ***Dismissal Procedure***

We reserve the right to terminate a child's enrollment for violations of policies, procedures, and rules of the school or those of the Arizona Department of Health Services. A leave of absence and/or expulsion from the program will also be considered if a child or parent is physically or verbally abusive to a student, teacher or another parent in the program.

## ***Transportation***

Children of Hope Child Development Center does not provide transportation of any kind to students.

## ***Field Trips***

Field trips may be taken in all classes. All field trips will be taken in family cars, which have or use individual seat belts and car seats for each child. All Arizona Department of Health Services, Office of Childcare Licensing regulations must be followed. Parents will be notified of field trips in advance and must sign a permission slip for each trip.

## **III. Registration and Tuition**

### ***Registration***

A non-refundable, non-transferable annual registration fee of \$150.00 is required. Current families are given first choice of available classes, church members are given second choice and new families are given third choice on a first come, first serve basis. In the event that over enrollment of a class occurs, the following criteria will be used for registering children in the class:

1. Children currently enrolled in the program ranked according to total number of years of enrollment
2. Siblings of children currently enrolled
3. Church members
4. Public

### ***Tuition***

Tuition is based on a yearly amount and broken into 10 equal installments paid monthly, August to May for preschool. Tuition is due on the first of each month and considered late if received after the 10<sup>th</sup>. There is a \$15.00 late fee for tuition received after the tenth of the month and/or returned checks, in addition to any charges from the bank. After 2 returned checks are received, future payment must be made by cashier's check or with a money order. Tuition is not pro-rated for vacations, holidays or absences. Monies paid for days missed or vacations will not be refunded. Registration fees and paid tuition are not refundable under any circumstances. There is a 15% reduction in the tuition for additional children in the same family. The reduction is applied to the lowest tuition. If the tuition payment becomes more than 30 days delinquent, the student enrollment may be cancelled at the discretion of the director. Children of Hope reserves the right to require payments up front if there has been a history of financial problems.

## ***Payment Procedures***

Payments may be made by check, cash or credit card. **Checks must be made payable to Esperanza Lutheran Church.** Payments can be mailed or dropped off in the preschool office in the designated lock box. Many banks will set up a monthly deduction from your checking account that can automatically be mailed to the preschool each month for your convenience. Credit card payments can be accepted but will be assessed a 5% processing fee.

## **IV. Health and Safety Guidelines**

### ***Authorization to Pick Up Children***

We must have written authorization for anyone not listed on the blue emergency form to pick up your child. Under no circumstances will a child be released to anyone not known to the preschool staff without your prior authorization. Phone authorization will be accepted if a last-minute change comes up. If you choose car-pooling, please be sure that each driver is listed on the blue emergency form.

### ***Emergencies***

An Emergency Information and Immunization Form is required for each child in the school. This is the blue form provided by the state. This form must be on file with the school immediately upon enrollment. This form must be completed in its entirety, including at least **two** emergency contacts.

Emergencies can happen at any time. Serious medical emergencies include those in which a person is at risk of permanent injury or death, is unconscious or becoming increasingly less responsive, can't breathe, has complications after a blow to the head, and those in which a person's condition seems to be getting rapidly worse, or any other condition which cannot be managed with first aid procedures. Serious Medical emergencies need immediate attention.

In case of an emergency, 9-1-1 will be called and pertinent information given over the phone. All our preschool staff have completed first aid and CPR classes, and we will follow 9-1-1 instructions. A member of our staff will contact the parents following the 9-1-1 call. If the child needs to be transported to a hospital, a member of the preschool staff will also accompany the child.

An Accident/Incident Report is used whenever there is a minor injury or happening at school that warrants your attention. The first teacher on the scene completes an injury/illness report form as soon after the incident as possible. The incident report is signed by the parent. A copy of the incident report is given to the parent and a copy is kept on file at the center. Incident reports are kept in an injury accident logbook in the preschool office

## ***Immunization Policy***

Young children are at risk of contracting many serious diseases because of their immature immune systems. Immunizations help a child's immune system fight off disease when the child is exposed to germs.

Every January, the Preschool Director will check the Arizona department of health services website at <http://www.azdhs.gov/preparedness/epidemiology-diseasecontrol/immunization/index.php#schools-home> to determine which immunizations are required for children enrolled in childcare centers. Children enrolled in the program must have a verifiable record of up-to-date immunizations. Records can be looked up in the Arizona State Immunization Information System (ASIIS) at <https://asiis.azdhs.gov/>

### **Procedure:**

1. Upon enrollment a photocopy or faxed copy (480-759-1436) of the child's immunization record is obtained and kept with the Emergency Information and Immunization Record Card.
  - Accurate documentation of Immunization information includes:
    - Child's full name
    - Birth date – month, day and year
    - Vaccine given – i.e. – MMR, DTaP
    - Number of the dose given in the series
    - Month, day and year of the immunization
    - Health care provider or clinic name where immunizations were given
2. All children enrolled at the child care program must have written documentation of their current immunization status on file at the site. Immunizations are monitored by the Preschool Director.
3. All adults who work or volunteer at the child care program must have documentation of their immunization history as part of their employment record.
4. If a child has not received immunizations due to medical or religious reasons, a written exemption form will be kept on file. Medical exemptions are completed by a physician or nurse practitioner. Religious exemptions must include a statement of the religious belief and must be signed by the parent. Unimmunized children will be excluded during outbreaks of vaccine preventable illness as directed by the state health department. The "Request for Exemption to Immunization" form is filled out by the parent.
5. Immunization records of children ages two and older will be reviewed annually or until the immunization requirements are complete.
6. When it is noted that children need immunizations, the parent/guardian is notified in writing. If immunizations have not been received within 15 days, the child may not be accepted for care. The "Referral Notice of Inadequate Immunizations" form is used to notify parents.
7. The Preschool Director will complete the immunization data report and turn it in to the Arizona Department of Health Services on November 15<sup>th</sup> every year.

Notes:

The recommended Immunization schedule is updated yearly and can be found on the Center for Disease Control (CDC) website at <http://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html> or on the Arizona Department of Health Services website at <http://www.azdhs.gov/preparedness/epidemiology-diseasecontrol/immunization/index.php#vaccines-children-home>

### ***Insurance***

Children of Hope carries accident and liability insurance to cover the children during school hours and activities as required by Arizona law. A copy of the policy is available for public viewing in the director's office and/or the church office.

### ***Child Abuse and Neglect Documentation and Reporting***

Child care workers are mandated reporters of any child abuse or neglect and must follow state laws regarding reporting suspected cases. Any abuse or neglect needs to be reported to Department of Child Safety as soon as a childcare worker is aware, or suspects abuse or neglect.

#### **Procedure:**

Staff is trained to recognize the signs and symptoms of abuse and neglect and how to make reports to the Department of Child Safety and to Local law enforcement agencies. All staff will receive this training as a part of their orientation process within 10 days of beginning work.

#### **Recognizing Abuse and Neglect**

Staff will receive training on the signs and symptoms of abuse and neglect listed below.

Physical abuse

Sexual abuse

Emotional abuse

Neglect

#### **Immediate Interventions:**

If a staff member reasonably believes that a child is the victim of abuse or neglect that staff member will notify the department of child safety and then the child care licensing department. Local law enforcement should also be called if a **staff member** is suspected of abuse or if the child is believed to be in immediate danger. The suspected abuse should also be discussed with the child care administration.

It is the **responsibility of the staff member suspecting the abuse to report** to the Department of Child Safety or local law enforcement even if the administration personnel disagree with the decision to report.

Suspected abuse or neglect should be documented in a record log designated for that purpose.

Documentation of the event will:

- Include a word-for-word account of what the child said and who was present when the child revealed the abuse.
- Always include the date, time, and names of everyone who heard what was said by the child.
- Also include a careful description of the size, shape, color, location and of any obvious, physical injury. Use documents in appendix 11 to document.

Documentation of abuse and neglect events should be maintained for 12 months.

Abuse Hotline Phone Number:

**1-888-SOS-CHILD (1-888-767-2445) Abuse Hotline**

Documentation Sheet for Possible Abuse/Neglect (see appendix 11)

[http://www.azdhs.gov/documents/licensing/childcarefacilities/providers/forms/abuse\\_neglect\\_documentation.pdf](http://www.azdhs.gov/documents/licensing/childcarefacilities/providers/forms/abuse_neglect_documentation.pdf)

More detailed information can be obtained by going to the following web site:

<https://dcs.az.gov/services/suspect-abuse-report-it-now>

### ***Fire Drills***

Our school will be conducting monthly fire drills. We encourage you to discuss the experience with your child when he tells you about it. Proper EXIT procedures and fire prevention equipment and alarms are maintained throughout the year.

Our fire alarm is loud and can frighten some children. It is important that they learn to accept and respect this alarm as part of their experience. Please do not ask us to notify you of the fire drill days so you may keep your child home. We need to know how he/she will react in a real fire emergency.

### ***Emergency Evacuation and Lockdown Procedures***

Lockdown and evacuation drills will be practiced throughout the year. A copy of the procedures can be found in the director's office.

### ***Facility Inspection Reports***

Facility inspection reports, such as fire and safety inspections and pesticide applications, are available for public viewing, either in the director's office or the church office.

## ***Medication***

Medications can be crucial to the health and wellness of children. When possible, a child's parents and physician should try to minimize the need for medications while in child care. Administering medication requires skill, knowledge and careful attention to detail. Medications are administered at the Director's office. Medications are stored in a locked cabinet in the classroom cupboard. The key is located inside an unlocked adjacent cabinet. Life threatening/rescue medications are kept in the red emergency bag and go with the child (ex: outdoors, field trip). If a child has medications requiring refrigeration they will be stored in a locked box on the bottom shelf of the refrigerator in the Director's office. The key is located in the cabinet above the sink.

## **Procedure/Practice**

**This facility will adhere to the 6 Rights of Medication Administration:**

**Right Child                      3. Right Dose                      5. Right Route**  
**1. Right Medication    4. Right Time                      6. Right Documentation**

Prescription and non-prescription medication (over-the-counter) require an order by the prescribing health care professional for a specific child with written permission of the parent/guardian.

Families should check with the child's physician to see if a dose schedule can be arranged that does not involve the hours the child is in the child care facility.

The first dose of any new medication should always be given at home to observe for possible adverse effects.

Medications must be labeled and in the original container. The label must include the child's name, date filled, prescribing clinician's name, pharmacy name and phone number, dosage instructions and relevant warnings. *CFOC standard Medication 3.6.3.1* Parents are responsible for providing all medications and supplies to the school/child care program.

A staff member will not administer any medication that has been transferred from one container to another.

In most situations, children should not transport medications to and from childcare; this includes medication placed in a diaper bag or backpack.

Special arrangements must be considered regarding the safe transport of medications for children attending field trips.

Program staff may not deviate from the written authorization from the Health Care Provider with prescriptive authority.

Prior to administering medications to an enrolled child, program staff will wash hands following proper hand washing steps.

Designated staff member measures liquid medications for oral administration using a measuring cup, spoon, or dropper specifically made for measuring liquid medication. ADHS Licensing - A.C.C. R9-3-316(4)(a)

**Written Authorization must include:**

First and last name of the child Name  
of the medication.

The prescription number (if any).

Instructions for administration including the dosage, route of administration, starting  
and ending dates of the medication to be administered, and the times and frequency of  
administration.

Reason for the medication.

Signature of the child's parent and

Date of signature. *ADHS Licensing - A.C.C. R9-5-516(B)(3), & R9-3-316(B)(3)*

**Non-Prescription Medication:**

A staff member will administer a non-prescription medication provided by a parent for  
an enrolled child only from a container prepackaged and labeled for use by the  
manufacturer, which has a valid expiration date and is labeled with the enrolled child's  
name.

A staff member will not administer a non-prescription medication to an enrolled child  
inconsistent with the instructions on the non-prescription medication's label, unless the  
facility receives written authorization from the enrolled child's health care provider.

*ADHS Licensing - A.C.C. R9-5-516(4)(b)(c)(d), & R9-3-316(4)(c)(d)(e)*

Topical diaper preparations only need a parental written request and parental provision  
of the products. The product must be provided in the original container and not have an  
expired expiration date. The product must be labeled with the child's first and last  
name. Program staff ensure that the product is kept inaccessible to children. Program  
staff will not apply talcum powder even with a parental request due to the high risk of  
damage to delicate lung tissue should the child breath in the talc.

**Emergency Medications:**

Except in an emergency, injections may only be provided to enrolled children in  
accordance with the Arizona State Licensing listed below. *ADHS Licensing - A.C.C.  
R9-5-516(C)(D)(E), & R9-3-316(C)(D)*

In an emergency an individual can give an injection to an enrolled child, following all  
the rules for prescription medications. *A.R.S. §§ 32-1421(A)(1) and 32-1631(2).*

All other injections need to have authorization from and be given by a licensed health  
care provider.

The child care program or group home will allow an enrolled child to receive an  
injection only after obtaining a written authorization from a licensed health care  
provider. The program will maintain the health care provider's written authorization on  
facility premises for 12 months from the date of authorization.

Emergency Medications may be kept in the activity area where the staff member and  
enrolled child are present.

Nebulized medications and emergency injections such as (Epi-Pen®), glucagon, and insulin require a written health care plan or instructions completed by the child's health care provider.

Program staff maintains documentation of all medications administered to an enrolled child on the Medication Log. Documentation must contain:

Name of the enrolled child;

Name and amount of medication administered and the prescription number (if any);

Date and time the medication was administered; and

Signature of the staff member who administered the medication to the enrolled child;  
and

Director or certificate holder maintains the documentation on facility premises for 12 months after the date the medication is administered.

Medication errors need to be documented on Medication Incident Report Form and reported to the parents/guardian immediately.

Wrong medication or overdose must be reported to Poison Control.

A medication error is any situation that involves any of the following:

Forgetting to give a dose of medication

Giving more than one dose of the medication

Giving the medication at the wrong time

Giving the wrong dose

Giving the wrong medication

Giving the wrong medication to the wrong child

Giving the medication by the wrong route

Forgetting to document the medication

**STAFF WILL NOT INDUCE VOMITING UNLESS INSTRUCTED BY POISON CONTROL. POISON CONTROL NUMBER IS: 1-800-222-1222**

Handling and Storage of Medications:

Medications administered in child care prescription and non-prescription are stored out of reach of children and in a secure, locked, clean container and under conditions as directed by the health care provider or pharmacist.

Medications that require refrigeration are stored in a locked, leak-proof container placed on the bottom shelf of a designated refrigerator separated from food OR in a separate and locked refrigerator used only for medication.

Medications for staff are stored in a separate, locked container. The medication must be clearly labeled with the staff person's name and be in the original medicine container.

Program staff must count and record the quantity of controlled substances (e.g., Ritalin®) received from the parent, in the presence of the parent

Program staff will return all unused prescription and non-prescription medications to a parent when the medication prescription date has expired, or the medication is no longer being administered to the enrolled child and have the parent sign and date that they have

## ***Illness***

Sick children should be kept home to prevent spreading germs to their classmates and teachers. Children who have not built up immunity are very susceptible to sickness and disease. **Children need to be fever free and symptom free for 24 hours before returning to school.** If antibiotics are required, your child needs to be on them for 24 hours before returning to school.

Illness sometimes requires exclusion from care to prevent the spread of infection to others and to allow the child time to recover. The arrival health check is necessary to determine if a child is well enough to remain in child care. All staff and volunteers are required to do a simple health evaluation on each child and report to the Preschool Director when they believe a child meets the criteria for exclusion. All parents are required to update staff on the health of their child. Evaluations will be done daily in the classroom as the child arrives.

### **Arrival Health Check Procedure:**

- As each child, arrives in the classroom, the teacher or another trained staff member will use a warm greeting using the child's first name (i.e.: - "Hi Emma")
- Staff will talk with the parent about any health and safety information needed to care for their child. ("When did he last eat? How did she sleep last night?")
- Staff will look at the child to determine if the child has signs or symptoms of illness, (Does the child look well? Does she feel warm to the touch? Are his eyes swollen or have drainage?)
- If there are visible signs of illness or injury, the child will need further evaluation before the parent leaves to determine if he/she is fit to stay.
- The Preschool Director will be responsible to further evaluate the child.

### **Exclusion is recommended when:**

- The illness prevents the child from participating comfortably in activities as determined by staff.
- The ill child requires more care than the staff can give, which may result in compromising care for other children.
- The ill child poses a risk of spread of harmful diseases to others.
- The child is determined to have a condition listed on Appendix 4.
- The child care provider, not the child's family, makes the final determination about whether the ill child can receive care in the child care program if the child becomes ill during the day.

The ill child will be separated from the group and cared for in the Preschool Director's office. Parent/guardian or emergency contact will be notified by the Preschool Director to pick up child within an hour. Parent/guardian must be notified in writing, either by letter or posting notice in a visible location, when their child/children have been exposed to a communicable disease.

Following an illness or injury, children will be readmitted to the program when they no longer have the noted symptoms or conditions, have begun appropriate treatment and/or no longer have significant discomfort and feel well enough to participate. In some cases, a note from the child's health care provider may be required.

All contagious childhood diseases such as chicken pox, measles, mumps, lice etc., have specific exclusion dates which have been established by the Arizona Department of Health Services. These exclusion dates must be complied with prior to re-admission to school. If you have any questions, please contact the director.



### Reportable Communicable Diseases

- Campylobacteriosis
- Conjunctivitis: acute (outbreaks only)
- Cryptosporidiosis
- Diarrhea, nausea, or vomiting (outbreaks only)
- Enterohemorrhagic *Escherichia Coli*
- Haemophilus influenza: invasive disease
- Hepatitis A
- Measles (rubeola)
- Meningococcal invasive disease
- Mumps
- Pertussis (whooping cough)
- Rubella (German measles)
- Salmonellosis
- Scabies (outbreaks only)
- Shigellosis
- Smallpox
- Streptococcal Group A infection (outbreaks only)
- Varicella (chickenpox)

Arizona's Administrative Code that lists those communicable diseases that need to be reported to the health department.  
<http://www.azdhs.gov/preparedness/epidemiology-disease-control/index.php#reporting-schools>

Un-immunized staff and children must be excluded if directed by the health department.

## **V. Family Participation**

### ***Parental Responsibilities***

Actual arrival and departure times must be recorded every day by the parent or person designated to bring/pick up the child. Parents are requested to notify the school of all absences. Parents are responsible for accurately filling our required forms and keeping them updated.

Families share responsibility for bringing snacks, supplies and other items needed in the classroom as designated by the wish list in each classroom. As a non-profit preschool, we encourage your involvement and appreciate assistance provided in making your child's experience exceptional.

### ***Parents Participation in Class***

Children of Hope encourages parents to share special talents to help enrich the program. We encourage parent participation in story time, class parties and other activities. Please make any arrangements with your child's teacher.

### ***Volunteers***

We ask for your involvement by volunteering your time in and outside of the classroom. Assistance is needed with field trips, parties, special events and fundraisers. We will post our volunteer needs alongside the classroom calendars. We encourage parents to get to know one another to share information and continue to foster social relationships outside of the classroom.

### ***Donations***

Children of Hope is a 501©3 non-profit corporation. All donations to Children of Hope can be used for income tax purposes according to the current regulations for donations under this state. Donations of supplies are also welcomed and appreciated.

### ***License Information***

Children of Hope is regulated by the Arizona Department of Health Services  
Division of Licensing Services  
150 North 18<sup>th</sup> Avenue, 4<sup>th</sup> Floor  
Phoenix, Arizona 85007  
(602) 364-2539

A copy of our inspection report is available in the preschool office. These can be examined upon request.

## ***WHAT PARENTS CAN DO FOR THEIR CHILD***

You can help your child adjust to school in the following ways:

- \*Make going to school a pleasurable experience: foster enthusiasm for learning! Your child will respond to your level of enthusiasm or anxiety.
- \*Build up in your child a wholesome, friendly attitude toward teachers and other school personnel.
- \*Make your child feel secure and wanted at all times. \*Express interest in your child's interests and achievements in the school program. Come to school when he or she invites you for special occasions.
- \*Use the classroom lesson plan to listen to your child as he or she relates his or her daily school experiences and discuss them with him or her.
- \* You can assist in language development by reading to your child daily. Go to the library with your child and check out books. If you show an interest in reading, your child will be interested too. Lap time with a book is hard to beat!
- \*Try to be as consistent as possible in your child's routines. For example, drop off and pick up at the same time of day whenever possible. When your child is late to school he/she misses out on instructional time and routine.

### ***TOGETHER WE ARE BETTER!***

Many parents wonder what is going to happen to their child at school. What will he/she learn? Will all his/her problems be solved? How will he/she act? You might expect all, some, or none of these things to be true in your child. They are all normal behavior!

1. Your child may come home very tired and irritable or all keyed-up the first few weeks. Give him/her attention quickly, feed him/her lunch and put him/her down for a nap if required.
2. Your normally lively, outgoing child may be very quiet at school. Don't push him/her. Let him/her absorb it all at his/her own pace.
3. Your child may pick up new language or behavior at school and some of it may be distasteful to you. Do not immediately blame it on the school. These things may be learned in any play situation. Do not make an issue of it but discuss it with your child and/or the teacher.
4. Your child may suddenly not want to go to school. Don't jump to hasty conclusions; look for the reason. Talk it over with him/her and the teacher.
5. Your child may suddenly want you to stay again in the middle of the term. He/she may be looking for extra support and security. Were you away? New baby? Feel free to meet his/her needs and keep the lines of communication open with the teachers and director.
6. Your child may come home very unhappy one day. Console him/her; help him/her to measure up to an unhappy moment. A day at school is not always a completely happy situation; neither is life. Part of growing up is learning to accept frustrations. We will work on these things at school and will partner with you to make your child comfortable and happy.
7. Your child may come home covered with paint but glowing about the wonderful time he/she had. Don't scold about the spills, do enjoy his/her creativity. Please, dress him/her in clothes that can get messy. ***The paint washes off, the joy remains!***

## ***CHILDREN'S FRIENDSHIPS***

Children today are beginning earlier in social situations and they are spending more time with peers than they used to. With more mothers of preschool---age children joining the work force, more children are in childcare settings. Recent studies have found that some friendships formed in the early years of childhood are second only to family relationships in importance. From such findings comes a heightened awareness of the social and emotional importance of friendships in the early years.

Enrollment in an early childhood program offers children social experiences that might not be available to them in relationships with adults or siblings. With many friends her own age, a child encounters lots of opportunities to negotiate and compromise. Children are encouraged to express opinions and ideas, as well as to respect others.

Interaction with and acceptance by peers have long---term effects on a child's life. Preschoolers develop social competence in three main areas: initiating interactions, maintaining ongoing relationships and solving conflicts with other children. While some children easily join a group at play, others have difficulty. As adults, we can help young children learn social strategies for entering playgroups or for talking to other children about what they want. Watching for a few minutes and then saying, "I'll be the big sister, okay?" works better than "Hey, let me do that!"

We need not be too concerned when children frequently change best friends. A friendship may last only for an afternoon of play. However, if the child does not seem to have any special friendships at school, he may benefit from one-on-one time with one of the other children outside of the early childhood setting. Playing together a few times outside of school often gives two children a level of comfort with each other that carries over to their time at school.

\* Taken from Family Friendly Communications for ECE.  
NAEYC Publication by Deborah Diffily & Kathy Morrison.

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CHILDREN OF HOPE CHILD DEVELOPMENT CENTER MAKES NO  
DISCRIMINATION IN ADMISSIONS OR DETERMINATION OF ENROLLMENT  
ON THE BASIS OF RACE, SEX, COLOR, OR NATIONAL ORIGIN OR RELIGION  
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Updated 01/24/2020

# SAMPLE DAILY PROGRAM



8:30

## **Arrival**

Instructional Activities will be available on the tables and in the Sensory Table

8:45 – 9:15

## **Circle Time/Craft Time/Small Group Activity**

Jobs, Calendar, Flag Salute, Music, Story, etc.

9:20 – 9:50

## **Outside Play**

9:50 – 10:00

## **Bathroom**

10:00 – 10:20

## **Snack**

10:20 – 10:30

## **Independent Reading**

10:30 – 11:15

## **Free Choice Play**

11:15 – 11:30

## **Clean up and Closing Circle**