

Callier Child Development Program



NAEYC



Accredited since
1986

2025-2026

Parent Handbook

Revised October 2025

1966 Inwood Rd. Dallas, TX 75235

(972) 883-3099 Infant/Toddler

(972) 883-3094 Preschool

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CONTACT INFORMATION

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Philosophy and Goals of the Program

1. The Callier Child Development Program provides a warm, accepting environment, rich in learning activities and experiences. Teachers value each child as unique and facilitate growth toward independence, self-esteem, and concern for others.
2. A developmental approach allows teachers to plan for needs, abilities, interests, and personal learning pace and style. Ongoing assessment of each child's growth and development is an essential tool in planning the curriculum. The program is designed to encourage curiosity, exploration, and discovery. Children develop positive attitudes about themselves as they learn daily routines, master new skills, expand their interests, and participate in planning, decision-making, and problem-solving. Opportunities are constructed to foster creativity, stimulate exploration of a wide variety of media and materials, and encourage communication of ideas and feelings as the children work and play together. Physical development is supported by the promotion of good health habits and regular routines in eating, rest, exercise, and elimination.
3. Callier believes that family is the child's primary environment and is committed to supporting and strengthening the parent/child relationship. The school is dedicated to creating an atmosphere in which children may become competent, productive, caring, and happy individuals. Children are supported in acquiring a love of learning and integrating knowledge and skills that will be the foundation for positive future educational experiences. A partnership with parents, based on mutual respect and shared focus on optimum outcomes for children, helps program staff implement these goals.
4. Ensuring continuity of care is central to the Callier philosophy. Callier teaching teams' function in two distinct "loops" to achieve this goal.

The infant-toddler-tuos program loop serves children 6 weeks - 35 months of age by September 1; (children must be 6 weeks of age before attending.) Students take part in this loop for a maximum of three years, depending on age at enrollment.

The loop system builds a sense of community, as children and teachers stay together, moving as a group each year to the next classroom. Looping facilitates the development of long-term, trusting relationships that benefit everyone involved – children, families, and teachers.

The preschool program will serve children 36 – 48 months by September 1.

The preschool program includes cooperative programming with the Dallas Regional Day School for the Deaf. Students with hearing loss are integrated into some preschool classes starting at the age of 3: Dallas ISD Deaf education staff are part of those teaching teams. Shared resources allow enriched experiences for all children and adults involved. This programming strengthens the communication skills of all participants. In some classes, students will have the opportunity to learn sign language. Working and playing together encourages children to appreciate individual differences and value the worth of all members of the community.

Callier Child Development Program is located on the campus of the UTD Callier Center for Communication Disorders. The Infant Toddler classrooms are specifically designed for children six weeks to twenty-four months of age and provide windows for observation. The Infant and Toddler program is housed in a self-contained building located on the east side of the campus. The two's classrooms are located in E building on the preschool campus. The twos and preschool learning environments are accessed through the main entrance to the Callier Center. Access is restricted to authorized staff and families.

Policies and Procedures

If changes in policies and procedures are made, parents will be informed in writing. Questions about policies and procedures should be brought to the attention of the Director of Education; Preschool Program Manager or Infant/Toddler Program Manager.

Admission Procedures

Priority consideration is also given to siblings of enrolled students.

Students enrolled through the Dallas Independent School District Regional Day School Program for the Deaf follow procedures for enrollment through the Admission Review and Dismissal (ARD).

The Callier Child Development Program does not discriminate in enrollment based on race, color, national origin, or religious beliefs.

Applications

Applications for tuition slots are available online at <https://calliercenter.utdallas.edu/child-development/child-development-application> and may be submitted at any time. On-going waiting lists are maintained. Openings due to withdrawal from existing slots are filled as they occur. Each year in April enrollment offers are made for new slots to begin attending on August 1.

Classes

The children are divided based on age as of September 1. For easy reference, classes are given color names maintained throughout the enrollment cycle. During most of the day, we maintain our recommended NAEYC ratios. (See NAEYC Chart below)

Staff-to-Child Ratio and Class Size

The following staff-to-child ratios are suggested best practice. Assessors will rate staff-to-child ratios according to the highest observed ratio and class size for each age category (Infant, Toddler/Two, Preschool, Kindergarten, and School-Age).

Age Category	Ratio	Maximum Class Size*
Infant (Birth–15 months)	1:4	8
Toddler/Two (12–36 months)	1:6	12
Preschool (30 months–5 years)	1:10	20
Kindergarten (Enrolled in any public or private kindergarten)	1:12	24
**School-Age (Kindergarten- third grade)	1:15	30

*If your program is above the maximum class size then you will receive a no rating for that item.

**For programs with school-age accreditation only

Rationales

- For mixed-age classes, the assessor will rate according to the youngest age category present within the class.
- Class sizes above are the highest recommended size based on best practices.
- Ratios are assessed:
 - During all hours of operation.
 - In classrooms and other indoor settings.
 - In outdoor settings. Maximum group sizes are not rated during outdoor times.

Examples of written procedures that address how to maintain staff-to-child ratios and class size: Child supervision records, transition logs, head counts, attendance records, sign-in and sign-out sheets.

Definitions

Staff-to-child ratio: The number of children compared to the number of teaching staff.

Definition of class: For the purposes of NAEYC Accreditation, a class is defined as the children assigned for most of the day to a specific teacher or a team of teaching staff members who occupy an individual classroom or well-defined space that prevents children from different classes interacting within a larger room or area. Each class must have at least one designated teacher.



[NAEYC.org/academy](https://naeyc.org/academy)

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Enrollment Requirements

At the time enrollment is offered, a non-refundable enrollment fee and signed Enrollment Acceptance form must be received. A security deposit of one month's tuition is required. Before a child can attend, all fees and tuition must be paid, enrollment forms completed, and a signed enrollment agreement on file. Parents must provide all information that might aid the program in preparing appropriately for the child's entrance into school.

All enrollment forms, including updated and current immunizations, must be completed and signed by parents and/or physicians as required before the

child's first day of school. **A child may not start school until all forms are received and signed appropriately.**

Withdrawal

Written notice must be received 30 days before the withdrawal of your child from the program. This policy applies from the time the Enrollment Acceptance is signed and is not dependent upon attendance. Failure to give appropriate notice will result in tuition charges for a non-attended month whether before or after the attendance start date. The security deposit will be applied to the last 30 days of tuition. When withdrawing your child from our program, we will have you complete a reimbursement form along with your withdrawal form. Upon assessing your withdrawal form and if it is determined that you are owed a refund, the refund will be processed as follows. If you have set-up ACH as your payment method, you will need to have a Zelle account for us to deposit your refund in to. If you have set-up a credit card as your payment method, we will issue a credit to your credit card in the mount of your refund. Currently, these are the only two options based on these payment methods that we will be able to issue you a refund. Please NOTICE You will continue to receive emails even if your child's(ren's) last day is before your last day based on the withdrawal form. This will continue until we receive the go-ahead from the accountant to hide your profile. Your email cannot be removed because it will interfere with the accountant's job (billing statements and/or tax forms).

FINANCIAL INFORMATION

Tuition: Rates are posted online at www.utdallas.edu/calliercenter/child-development.

We use Tuition Express which requires the use of a credit card or bank account. If you choose to use a credit card to make your payments, you will be responsible for credit card fees in the amount of 2.7% of your total monthly charges plus \$.30 per transaction. There is no charge if you choose to use the ACH payment method unless a payment is declined for any reason. In either case, if a payment is declined an NSF will be charged to your account.

Tuition is payable on the first of each month beginning with the first month of enrollment. Tuition is pro-rated for enrollment or withdrawal mid-month. Tuition is not affected by student absence, including long-term absence for

any reason, or by the number of school days in a month. Tuition covers the full day (7:30 a.m. - 6:30 p.m.). No part-time or “drop-in” arrangement is available. When two or more siblings attend a 10% discount is applied to the oldest child’s tuition.

Monthly tuition is due in advance on the first of each month, payable to Callier Child Development Program. **Accounts not paid by the 10th calendar day of the month are considered delinquent and a late payment fee of \$50.00 will be charged. Failure to pay tuition will result in dismissal.** Automatic payment by credit card may be arranged through the Callier Business Office; a form is available for this purpose. Checks may be deposited in the collection boxes located at the Infant/Toddler building reception desk and in the main preschool building at the security desk in the front lobby area.

Other fees

- A non-refundable enrollment fee is required upon acceptance.
- Security deposit (one month’s tuition) required upon acceptance. Applied to the last 30 days of attendance when written notice is received at least 30 days before withdrawal. (Non-refundable for withdrawal before start date.)
- Personal Care Supply fee due with first month’s tuition; charged annually with August tuition.
Recommending the name be changed or put a generic description.
- Late Pick Up Policy
The Callier Child Development Program closes at 6:30 p.m.
Designated staff remains to care for children who have not been picked up by that time. When children are still at the center at 6:30 p.m., an attempt is made to contact a parent or someone authorized by the parent as an emergency contact.

Parents who arrive after 6:30 p.m., are given a late slip to sign, verifying the time of pick-up. Late slips are reviewed and submitted to the Callier Business Office for billing.

Following are the late fees for any part of every 15 minutes past closing per school year:

First incident	\$25 for any part of every 15 minutes
Second incident	\$50 for any part of every 15 minutes
Third incident	\$100 for any part of every 15 minutes, a meeting with the Director of Education, and possible termination of your child's care

SCHEDULE OF OPERATION

Arrival

School opens at 7:30 a.m. Monday – Friday. Classrooms are not open to children until this time. **Parent badges do not work prior to 7:30.** Parents who arrive before 7:30 a.m. are invited to wait in the Callier Clinic lobby (in the main building) where a play area is available. In the infant toddler building, if a staff member opens the door parents are invited to wait in the lobby until 7:30.

Parents must accompany their children into the classroom and let teachers know the children have arrived.

Parking

Drop-off and pick-up parking for parents is available in the East Campus parking lot in spaces reserved for Family Parking. Please always keep your children with you, especially when exiting your vehicle in the parking lots. Parents may also park up to 10 minutes along the curb in front of the main Callier Clinic entrance. **Parents may NOT park in UTD or UT Southwestern permit-only spaces; violators will be ticketed.**

Sign In

Parents are required to sign their children in and out each day. Time clocks are in the foyer of the Infant/Toddler building and by the preschool office in the main building. Parents are also able to use the QR code located at the entrance of the buildings. Each parent and person authorized to pick up children is given a personalized fingerprint access or code to electronically sign children in and out of care. This procedure is a childcare licensing regulation and serves to provide us with quick and accurate classroom attendance lists for emergencies. PLEASE remember to sign your child in and out every day.

Badges

To provide optimum security, all parents and other persons authorized to deliver and pick up children from the program are asked to wear badge identification while on campus. Activated badges are required to access buildings and classrooms. Parents with UT Southwestern badges are given access through activation of those badges. Parents not affiliated with UT Southwestern are issued Callier photo I.D. badges. Families may receive up to two Callier ID badges at no charge; there is a cost of \$20 for each additional badge. Lost or missing badges are a security risk and must be reported promptly to the school office to be deactivated.

Badges are assigned to individuals and may not be loaned to other people. To maintain a secure environment, please do not use your badge to open the door for someone or allow someone without a badge to follow you through an entrance. Persons needing assistance should be directed to the office or security guard.

Pick Up

Only authorized persons with **written authorization** may pick up your child so be sure to keep your authorizations current and up to date. It is also helpful if you verbally let the classroom teachers and front office staff know if someone different will pick up your child. We always want to be safe! Any authorized person must be able to show a picture ID before picking up a child.

Preschool buildings and play areas are closed at 6:30 p.m. Preschool parents arriving after 4:45 p.m. may pick up children in their designated closing building. **Parent badges do not operate doors after 6:30 p.m.** Parents are asked not to remain in the Infant/Toddler building after closing at 6:30 p.m.

When picking up your child in the afternoon please remember that without staff supervision, **classrooms and playground areas may not be used.** Waiting areas are available in the main building in the Callier clinic lobby and in the downstairs dining area. When using those areas, please supervise children for their safety and as a courtesy to others.

Doors and Child Safety

All outer building doors empty out into a parking lot or an open playground area, so you must keep your child with you as you exit any door. **PLEASE do not allow your child to open any of the building doors.** The hallways are an open invitation to run but we ask that everyone use their “walking feet” to keep everyone safe! Please model and require this of your child.

Class Schedules

The class schedule is posted on the Parent Information Board by each classroom. Schedules may be modified, when necessary, to accommodate special circumstances related to weather, special visitors/events, etc.

The Callier Child Development Program is open twelve months of the year with closings occurring for the holidays. A school calendar, including special events, holidays, and Callier Parent Association activities is located on the Callier Child Development website.

Inclement Weather Closing Guidelines

We will align our inclement weather days with Dallas ISD school closures and delayed opening. Please check with your local news station for Dallas ISD school closures or delayed opening announcements.

CLOTHING AND SUPPLIES

Children should be dressed in comfortable clothing, suitable to both the weather and active play. Jumpsuits and overalls are difficult to get up and down when the children need to use the bathroom. Elasticized waistbands are easier for them to manipulate. Each child should have a bag with a complete seasonally appropriate change of clothing including shoes; please mark each item with the child's name. Children being toilet trained will need more than one change of clothing. Check daily for soiled clothes. If a change of clothes has been used, be sure to replace it the next day. **Parents are asked to provide disposable diapers and wipes for children wearing diapers.** These will be for individual use and the teacher will notify you when replacements are needed.

The work of young children is often messy, and you can expect it will be hard on their clothing. You are encouraged to choose clothing for school with that in mind.

As soon as children can walk, they should wear shoes that support running and playing. Flip-flops, Crocs, plastic, and shoes with heels are never appropriate for school. **Rubber-soled shoes with closed-toe and back (e.g., tennis shoes) are necessary for safe active play.** Parents of children who arrive at school without appropriate footwear will be contacted to bring alternative shoes.

Daily outdoor play is an important part of your child's development; we provide daily opportunities for your child to participate.

- Infants will be given opportunities for physical activity, including supervised tummy time.
- Toddler-age children will participate in a minimum of 60 minutes of moderate to vigorous active play each day.
- Preschool and Pre-Kindergarten children will participate in a minimum of 90 minutes of moderate to vigorous active play each day.
- Physical activity may take place in the classroom, in our inclement weather play areas, on the playground, or when the weather permits.
- Please do not allow your child to play on the preschool playground during drop-off and pick-up times.

We follow the following guidelines based on heat index or wind chill.

Guidelines for Indoor and Outdoor Play

Infant/Toddler:

96+	Indoor Play Only
90-95	Outdoor Half Time
40-89	Outdoor Play
35-39	Outdoor Half Time
34-	Indoor Play Only

Preschool:

100+	Indoor Play Only
96-99	Outdoor Half Time
36-95	Outdoor Play
33-35	Outdoor Half Time
32-	Indoor Play Only

Indoor play will be scheduled when the following conditions exist:

- The Current Air Quality Index for the Callier zip code is Orange or higher.
- Rain, extreme wind, hail, etc.

Please be sure to send appropriate outdoor clothing for the season, marking each item clearly with your child's name.

Hats

Children are required to wear hats when playing outside. Infant/Toddler parents are asked to provide an appropriate hat for their child.

Parents are required to provide a hat for school use that ensures full coverage from sun exposure as recommended by the American Academy of Dermatology. (A good protective hat should shield as much of the face and neck as possible, with a wide all-around brim or front brim with legionnaire-style flap over the neck. Hats made of material with a UPF of 30+ are most effective.) **Baseball caps do not meet this requirement.**

Sunscreen/Lotion and Insect Repellent

You may sign a permission form authorizing sunscreen to be used on your child at school. For your convenience, the school will provide non-aerosol sunscreen for the students in the preschool loop; parents of infants and toddlers send non-aerosol sunscreen to be used. The container must be clearly labeled with the child's name. It is recommended that for children older than 6 months, sunscreens be SPF 15 or higher; water resistant; protect against UVA and UVB rays; PABA-free options such as titanium dioxide are best for sensitive skin. Program staff will administer sunscreen before afternoon outside time. Parents are responsible for applying sunscreen before dropping off their children.

Non-scented hand lotion is also available to be applied as children need it with signed permission.

Permission may also be given for the application of non-aerosol insect repellent at school. Parents must provide all insect repellent. A repellent that contains 10-30% DEET is considered effective and safe for child use. All containers must be clearly labeled with the child's name. The school is allowed to provide only one application of insect repellent daily; this is done before afternoon outdoor play.

Toys

Parents are asked not to send children to school with toys and personal items from home. Please help your child understand why it is not wise to bring toys or other items to school that they may not wish to share with the group. If toddlers or older children have transitional items ("security blankets", "lovies", etc.) that may help them adjust to change or separation, these may be used at school. Because these special items are particularly important to children, they should be identified with the child's name.

HEALTH AND SAFETY

Gang Free Zone

Texas Department of Family and Protective Services regulations for licensed child-care centers require all parents to be informed that, under the Texas Penal Code, any area within 1000 feet of a child-care center is gang-free violator subject to harsher penalty.

No tobacco or vaping products are permitted on campus.

Consumer Product Safety

This program has practices in place to exclude the use of unsafe children's products, including regular review of the United States Consumer Product Safety Commission recall list. See the back page for the resource website.

Child Immunizations

All children are required to have age-appropriate immunizations before their first day of school unless accompanied by a letter from the child's primary care physician. Any under-immunized child will be excluded from care if a vaccine-preventable disease occurs in the program.

Vaccine-Preventable Disease Policy for Staff

Immunizations are one of the most important ways we can protect staff, your family, and the children in our care against vaccine-preventable diseases.

All Callier Child Development Program staff are encouraged to consult their health care professional regarding the adult immunization recommendations of the Centers for Disease Control and Prevention. All Callier Child Development Program staff whose duties bring them into direct contact with children are required to document the following immunizations **or** to provide a signed exemption statement to be maintained in the employee's departmental personnel file:

- TB is required upon hiring.

Voluntary Vaccination

We highly encourage our staff to vaccinate and register their immunization with the university for the following vaccines.

- Influenza (Flu) Vaccine – Annual

Emergency Response Plans

Keeping your children safe is one of our highest priorities. The program has procedures for responding to a range of emergencies (including lockdowns.) Regular drills are conducted to prepare children and staff to react quickly and appropriately. Lockdown and Relocation Drills are announced, and Fire Drills and Severe Weather Drills are unannounced. Drills take place randomly around 10:30 or 3:30 to ensure all staff have opportunities to participate in the drills.

In the event of a weather emergency, groups gather for shelter in designated locations in each building; older children learn the “duck-and-cover” position. In response to a fire, the buildings are evacuated; staff and children go to their designated areas to wait for instructions. A map of shelter-on-site locations and building evacuation routes is posted in each room.

If evacuation of the center should be required, parents will be contacted as soon as possible. You must update the school office if there are changes in your contact information. A general announcement with all available information will be placed on the office phones in English and Spanish. A group email will be generated for all families for whom we have current email accounts on file.

In the event of relocation, the emergency response agency will determine the relocation site.

An overview of emergency response plans will be shared with families the first month of school, communicating classroom specific protocols. Here is a list of the types of drills and when conducted:

January Fire
 Severe Weather

February Fire
 Lockdown

March Fire

April Fire
 Severe Weather

May Fire

Lockdown

June Fire

July Fire
Severe Weather

August Fire

Sept. Fire
Lock Down

October Fire
Severe Weather

November Fire
Relocation

December Fire
Lock Down

Injuries

When a child is injured staff members with training in First Aid assess appropriate action. Minor injuries requiring basic first aid are cleaned, bandaged, and ice applied if needed. An injury report form is completed for any injury observed or treated and the parent signs the form at pick up. Parents take the white copy, and a yellow copy is given to the school office to be kept on file.

Parents are immediately contacted and informed of any injury that involves the head and face or a bite.

If it is determined that an injury may require the attention of a physician, parents are contacted and asked to come immediately and take the child to receive medical care. When the injury requires emergency attention, a 911 call requesting paramedics is placed. While waiting for medical services, first aid treatment is administered, and the child's parents and personal physician are contacted. If a parent cannot be reached, the school will attempt to contact another authorized person on the child's enrollment form.

A staff member will accompany the paramedics to the Children's Medical Center and stay with the child until the parents arrive.

If medical procedures are administered for any injury that has taken place at the school, it will need to be reported to the administration within 24 hours of the incident. As a standard practice to ensure the health, and safety, and that proper protocols were followed, the program must report the injury to Childcare licensing; Childcare Regulation may reach out to parents for follow-up.

If a child is injured at home, a parent is expected to inform teachers of the injury at drop-off.

Daily Health Checks

Upon arrival, the classroom staff will make a visual observation of the child to determine if there are any signs of illness. If it is determined that the child is running a fever or not able to fully participate in the daily activities, they will be sent home for the day.

Hand Washing

Hand washing is the number one practice to help reduce the spread of disease. All persons entering the classroom are required to wash their hands before entering the play spaces. Parents when volunteering in the room must wash their own hands and their children's hands upon arrival following the posted hand-washing procedures in the bathroom area.

If soap and water are not available (such as walking field trips), an alcohol-based sanitizer with 60% to 95% alcohol or a wet wipe is an alternative. Hand sanitizers may not be used on children under 24 months. Hand sanitizers must be always kept out of reach of children.

Illness and Emergency

(See Appendix A: Sick Child Report for specific exclusion and return to school policies.)

If your child will not be attending school due to not feeling well, please send an email to callierchild@utdallas.edu The school must be notified if a child contracts a communicable disease that is contagious and diagnosed by the child's doctor.

Communicable diseases that are contagious and diagnosed by a child's doctor will be posted without any identifiers of the child and following the Dallas County Health Department guidelines.

Returning to school after such an illness will be according to the standards of the Childcare Licensing or with the signed permission of a physician.

- A Sick Child form must be signed at the time a child is picked up.
- It is necessary that at least two CURRENT phone numbers be on file where parents may be reached during the day. A current phone number for the child's physician is also required. No treatment can be sought unless the parent has signed the appropriate treatment form.

Medication

The administration of PRESCRIPTION medication by school personnel is a service offered by the school. It is intended to facilitate the return to school of children recuperating from minor illnesses, such as upper respiratory infections, etc. If a child is seriously ill or if the failure to receive medication could result in critical health problems, the school may refuse responsibility for administering medication to any individual child. The school is essentially a well-child education program. Teachers and staff have the primary responsibility of group care and education.

1. Any medication administered for the first time will have to be given at home.
2. A completed school medicine form with the parent's signature must accompany the medicine. If medicine must be given for longer than two weeks, the child's physician must sign a form. (If an equivalent document has been signed, it must be attached to a school form and the information properly recorded.) All information, including dates, must be included. If such information is not provided, the medication cannot be administered.
3. **Only prescription medication will be given.** Prescriptions must be for the child and must be current. The medicine must be in the prescription container, clearly labeled with the child's name. Over-the-counter medications will not be given unless accompanied by a signed physician's note with specific instructions.
4. Only specifically trained staff will administer medication following the guidelines below:
 - a. Verifying the child and name on the medication match
 - b. Is the right medication on the permission form

- c. Is the correct dose listed on the medication container
 - d. Is the correct time to administer
 - e. Is administered in the correct method
 - f. Documents all required information
5. All medication is in a locked container unless it is a life-saving medication such as an Epi-Pen when it is kept in an accessible area but out of reach of children.

Please check all medicine at the office. Medication is typically given before lunch and after a nap (11:30 a.m. and 3:30 p.m.). Asking the pharmacist to divide medication into two containers allows you the convenience of leaving one at school.

Any medication found in a child's cubby will be removed, properly stored, and can be picked up from administration.

Nut-free campus.

Allergies

It is important to inform the school of any known allergies your child may have and to provide the office with written instructions for identifying symptoms and responding as **recommended by your child's physician.** Callier will provide you with the necessary forms for your physician to complete.

Parents are asked to sign permission for allergy information to be posted as needed to alert staff. If needed, a supply of medication and the appropriate signed medication form must be kept at school for emergency use.

Food allergy/sensitivity information is shared with the Nutrition staff and all classroom teachers to ensure everyone is aware of the allergy and emergency procedures.

For severe and life-threatening allergies, all families in the classroom receive a letter indicating what the allergy is and how they can help keep the environment safe for everyone. Classroom staff receive specific training on the individual allergy with additional training on Epi-Pen administration as needed.

If your child has outgrown an allergy and is no longer needing a food substitution, please inform the front office staff so we can notify the Nutrition staff.

Pets

Your child's classroom/building may include animals. A veterinarian inspects all pets annually. Children are NOT allowed to handle reptiles or birds with licensing regulations, but they may pet rabbits, gerbils, or guinea pigs; appropriate hand-washing practices are used. If your child is allergic to any of these, please be sure the classroom teacher is informed.

Water Play

Water tables and other related activities are indispensable elements in the early childhood classroom. Precautions are taken to ensure healthy practices: water tables/toys are cleaned and sanitized after each use; children are not allowed to drink the water; children with sores on their hands are not permitted to participate in communal water play; and fresh potable water is used for all water activities. Wading pools are not used.

A signed Outdoor Activity Permission Form must be on file for your child to participate in outdoor water play. On days when water play is scheduled, parents are asked to send children in swimsuits and water shoes, with a towel and change of clothes and shoes.

Environmental Health

The program takes all measures to ensure a safe and healthy environment for both children and adults. The air quality is monitored in all learning environments with preschool buildings having additional air filters; non-lead based and non or low VOC paint is used; renovation/maintenance work is completed when staff and children are out of the facility; pesticides and other chemicals are only applied when children and staff are not present. All cleaning products are considered "green" and non-toxic. Product information is available from the front office.

We encourage recycling and the use of environmentally friendly products. We also discourage parents from leaving cars idling except for in extreme cases of weather.

In the event of a public health issue, the program will be in contact with the local health authorities to ensure we have the most current and up-to-date information to put into practice and to share with the families.

No Chapstick, lip gloss, etc. may be brought or stored at school due to cross-contamination if another child uses it.

Nutrition

The School Lunch Program provides serving portions appropriate for 6-12 months of age (with parent permission and a signature of the lunch form); and 12 – 23 months of age. No substitutions (unless medical authorization is on file) to the school menu are provided.

- Breakfast, lunch, and afternoon snack are provided daily to all students in attendance at serving times. Parents are asked **not** to send additional breakfast or snack food to school. Breakfast is served each morning from 8:00 to 8:45 a.m. Children who have transitioned to table food and eat school meals have breakfast at 8:15 – 8:45 and lunch at 11:15 – 11:45. The School Lunch Program provides appropriate serving portions for 12 – 23 months of age. Snack is served each afternoon from 3:00 to 3:30 p.m. (Please note that school food cannot be held for late arrivals; after serving times, leftover food is returned to the kitchen.)
- We have limited refrigerator storage space. If your child will be bringing lunch, please provide an insulated food storage container as the item will be stored on our counters.
- Notify us of any medically diagnosed food restrictions and/or allergies in writing; this information is posted in our kitchen area.

You may choose to purchase school lunches or send sack lunches with your child. Food served at school is planned to meet children's daily nutritional needs, in compliance with federal school breakfast/lunch program guidelines. (Parents who choose to provide packed lunches assume responsibility for meeting their child's daily food needs. (For suggestions for nutritious packed lunches, see the nutrition website on the Family Resource page at the end of this handbook.)

The program will only accommodate food allergies that are documented by a doctor. We will not be able to accommodate food preferences.

Lunches from home are not refrigerated and teachers do not reheat food before serving. Please do not send foods that are considered choking hazards such as foods sliced into small rounds, whole grapes, pretzels, popcorn, marshmallows, and chunks of meat larger than can be swallowed

whole. Sugary food and drink, and peanut products are not allowed. Any food from home must be labeled with the child's name and the date.

Parents have the option to purchase school lunches. Lunch costs are billed with monthly tuition and are not affected by absences. If children will be out a minimum of five (5) consecutive days, parents may submit a vacation request form (available in the front offices) and lunches will not be billed for that period. Lunch payments may be deposited in the same collection boxes as tuition payments or payment by credit card may also be arranged.

Changes in lunch options must be requested in writing one week in advance. Lunch orders/charges for children who regularly eat school lunch may be suspended upon completion of a form submitted by the preceding Friday.

A monthly menu is posted on each Parent Board, on the school website, and emailed to families. Every item on the menu is offered to children. If a child has special dietary needs and/or restrictions, it must be documented on the Notification of Special Dietary Needs form (requires physician and parental signatures).

Callier participates in the USDA Child Nutrition Program; applications for free or reduced lunch, based on financial need, are included in your enrollment packet and are available from the office.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity. Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights

1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; or

(3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Children who are not yet able to eat food provided by the school will need bottles, formula, baby food, etc. provided by parents. These supplies will be name-labeled and color-coded for individual use. The school supplies bibs, feeding bowls, and spoons. Parents who want infants (6 weeks to 11 months) to use pacifiers should send these. Pacifiers may not be attached to the infant in any fashion while he/she is at school due to health and safety issues. Infant bottles are to be labeled with the child's name and date brought to school. Breast milk must also be labeled with the date it was expressed.

After heating, bottles of formula or breast milk must be discarded after one hour at room temperature; mouthed bottles may not be reused for another feeding. Food is thrown away based on expiration date or contamination by saliva; any refrigerated food is thrown away each Friday. Due to a lack in storage space and properly implementing best practices for breast milk, breast milk will only be permitted to be fed in the infant classroom. A physician's note will have to be provided to further feed breast milk in the toddler classroom. Children under 12 months of age are not served cow's milk, and children 12-24 months of age are served only whole milk. Solid foods and fruit juices are not served to children less than 6 months old.

Birthdays & Celebrations

Callier Child Development Program is a "no outside food other than lunches from home" policy. Food allergies and food restrictions make it increasingly difficult for parents to choose the right school celebration activity to keep every child safe, healthy, and included. With a little creativity and research, parents can start celebrations without stress. Here are some helpful ideas for the classroom that are beyond cupcakes and sweet treats.

Here are a few ideas, but you can also consult with your classroom teachers and discuss some other options you may come up with:

- Give the Gift of Your Time in the Classroom: Young children feel so special when their parents come to school. On a special occasion, read

a story to the class, help the teacher with her planned activity, go along for outside time, or just hang out with your child and her classmates. Your child will remember that day.

- **Plan a Special Occasion Activity for Your Child's Class:** Plan an activity for parents to lead in the classroom and bring in the supplies. Make birthday hats and decorate them. Make a craft, organize a science project, or play a game. Check out your local library for age-appropriate ideas. No matter what activity you and your child select, your child will be very proud!
- **Donate to the School or Childcare Center:** Donate something to the school or childcare center in recognition of your child's birthday. There are many things to choose from such as books, puzzles, toys, music, or computer software. Your child's teacher will have plenty of ideas. Then take your child shopping and let him choose the gift to donate with your guidance. Add a label to the item, "This book was given to ABC Learning Center in celebration of Ashley's 3rd birthday." Do not forget the date. Your child and the school will appreciate the birthday donation for years to come.
- **Create a Celebration Tribute:** Create a tribute that says something about your child and his interests or heritage, and then share it with the class. You and your child could make a collage of photographs showing your family. Write a story together and read it to the class. Your child can dictate the words and provide the illustrations. For a special touch, laminate and bind the book at your local office supply store. Make two copies and give one to the school.

Birthdays and celebrations mark the passage of time and can highlight special relationships among people. Let that be your guide when coming up with celebration ideas for the classroom.

EVALUATION AND ASSESSMENT OF CHILD PROGRESS

Developmental Screening

All infants and toddlers receive an Ages and Stages Developmental screening within the first 30 days of school attendance. We use the ASQ 3. All new students receive a developmental screening within the first 30 days of school attendance. Hearing, speech, and language screening assessments are provided annually for 3–5-year-olds at no additional charge through the UTD teaching clinics. All screening results are shared with parents. Childcare Licensing requires four- and five-year-olds to have an annual

vision screening, please provide documentation from your child's well-check visit.

Developmental Assessment

Assess Instruct Monitor (AIM) Observational Assessment

The AIM Observational Assessment is used from birth to age five assessment solution designed to support teachers in making data-driven instructional decisions to guide children toward kindergarten readiness.

Follow-up

Any follow-up testing indicated by screening or developmental assessments will be discussed with parents; resources will be recommended. Parents assume costs for additional testing.

Individual Service Plans (IFSP) and Individual Education Plans (IEP)

Children from 0-3 with special needs may have an IFSP and children 3-5 may have an IEP developed for each child by a team that includes teachers, parents, and other professionals who know the child's needs. Plans include the specialized goals, services, and accommodations that a child needs to support development and educational progress. For any child who has an IFSP/IEP, please be sure your classroom teacher has a copy of it to ensure all the special needs are being addressed in school.

Any family who feels their child needs any type of additional support is encouraged to contact program supervisors for further discussion.

Confidentiality

All information contained in children's files is considered confidential and kept in locked files. Program staff is provided access to information as needed to ensure children's health and safety, appropriate care, and educational support. Our staff is trained in the NAEYC Code of Ethical Conduct that ensures all confidential information is handled with the utmost professionalism.

Children's files and assessment documentation may be subject to review by the Texas Department of Family and Protective Services, the National Association for the Education of Young Children, and the University of Texas at Dallas for purposes of program regulation and evaluation. Written consent of a parent/guardian is required before student records may be released to other individuals or agencies. Anyone accessing these files signs and dates the Disclosure Log in the front of the file to indicate who read the file.

DISCIPLINE AND GUIDANCE

Callier views behavior in terms of development. The goal is to help children learn how to gain self-control. It is the philosophy of the program that all children need to feel loved and secure; that a developmentally appropriate environment and daily routines are basic tools in positive guidance of children's behavior and that adults are powerful models in showing children acceptable behaviors.

The Callier Child Development Program has initiated staff training in Conscious Discipline developed by world-renowned Dr. Becky Bailey. Conscious Discipline is a comprehensive social/emotional intelligence classroom management program that empowers both teachers and students. For additional information on this program, you may YouTube many Conscious Discipline videos or go to www.consciousdiscipline.com

Teaching strategies include anticipating and preventing problems whenever possible; setting clear and consistent limits; staying engaged with children to support appropriate play; recognizing and identifying children's desirable actions; hesitating when appropriate to support children to resolve conflicts independently; investigating to better understand causes and circumstances before determining solutions; allowing children to experience natural and logical consequences of their choices; and communicating with children, parents, team members, and support staff as needed. When a child displays persistent problem behaviors, parents will be included in developing a plan to address these.

(See discipline resources in back the of Parent Handbook.)

Biting/Aggressive Behavior

Biting is a common and expected occurrence among young children. Although upsetting to all, biting is not unusual behavior, especially in the 0-5 group settings.

It is tempting for adults to look at biting as a deliberate act of aggression especially when it is your child that has been bitten. However, biting occurs for a variety of reasons: a misdirected attempt at communication or interaction; defense of property or territory; sensory exploration, or a response to teething. Biting is more disturbing than most other types of

aggressive behaviors to parents, caregivers, and children and is always taken very seriously.

First, the child who is injured is cared for and given first aid and tender comfort. The injured child is told, “Someone bit/hit, etc. you. That hurts.” The child is encouraged to say “no” or “stop” and is taught a visual sign for “stop” when she is worried someone will hurt her. This helps the injured child to feel more powerful and in more control.

Secondly, the child who hurts other children is sent a clear message that biting/hitting, etc. hurts and is not safe. We will show the child how to ask for what she/he wants. We help the child learn how to communicate feelings of power by expressing herself with gusto through body language, facial expression, and words, rather than through biting. We look at the environment to analyze the contributing factors (if any) and change them if possible. We will always inform the parents of any children involved in an aggressive event. The child that was hurt will have an injury report for parents to sign at pick-up. Parents will immediately be contacted in the event of a biting incident.

In responding to aggressive behavior, the paramount goal is to prevent recurrence; keeping children safe is the most basic priority. The incident is reviewed to help determine causes/contributing factors; when identified, these are immediately addressed. Once a child has hurt another child, teachers are alert to catch and redirect further attempts.

Children whose biting seems to be related to oral stimulation may be given alternatives that are allowable to bite. Children for whom biting may be an attempt to engage in a peer attention are given opportunities to learn and practice appropriate communication and interaction strategies.

Although usually not as disturbing, pinching, pushing, and scratching are expected behaviors in young children as well and are handled in the same fashion. Parents are encouraged to use the same non-punitive interventions and responsive methods. Your child’s teacher or Program Manager is a good source of guidance and support when dealing with these behaviors at home.

Children sometimes get “stuck” in a pattern of biting or other aggressive behaviors. When those situations do not respond to the best efforts of the teachers, the program will form a Response to Intervention (RTI) team. This team is made up of classroom staff and other selected child development and

administrative staff. This team will collect information from the classroom, observations, and information from the family. The team initially meets to discuss what strategies have been attempted and to look at additional support resources. The team meets as often as necessary to monitor progress and to evaluate the outcome of the behavior.

The program is committed to supporting children's optimal development by addressing children's individual needs and creating a caring community. Every effort is used to eliminate aggressive behavior without vilifying or rejecting the child. Dismissal from the program is the very last resort. If all the program resources have been brought to bear and a child's hurting other children continues despite those interventions, then parents may be asked to keep the child at home for some time until the behavior is under control or to withdraw the child from the program.

(See biting and Conscious Discipline resources at the back of the Parent Handbook.)

Challenging Behavior Policy Outline:

Team

- Parent: Child's support system and advocate.
- Program Manager: A person responsible for ensuring the team works efficiently and follows the protocols.
- Specialist: This could include teachers, counselors, caregivers, or others who regularly interact with individuals displaying challenging behaviors.
- Associate: This could include teachers, counselors, caregivers, or others who regularly interact with individuals displaying challenging behaviors.
- Assistant: This could include teachers, counselors, caregivers, or others who regularly interact with individuals displaying challenging behaviors.
- Communication Expert: Someone who can train the team to communicate effectively with individuals exhibiting challenging behaviors.
- The Director: This person helps ensure the team addresses behavior with cultural awareness, avoiding assumptions or stigmatization.
- HR/Policy Advisor: To ensure policies align with existing legal and organizational frameworks.

1. Introduction

- The purpose of addressing challenging behaviors is to improve the well-being, safety, and functioning of the individual exhibiting behavior and the people around them.
- The importance of a positive and safe environment promotes positive social interactions, improves quality of life, enhances learning and development, prevents harm, encourages independence, and supports communication.

2. Scope of the Policy

- The scope of this policy is to make sure that Callier has a policy in place that supports the safety of the children in mind. The policy outlines what the teachers can do and the steps we will take to work with the child and family.

3. Definition of Challenging Behavior

- Challenging behaviors are repeated incidents that can be disruptive, harmful, or difficult to manage. These behaviors may interfere with an individual's ability to function in social and educational settings. These behaviors can manifest in various forms, including aggression, self-injury, tantrums, refusal to follow instructions, or withdrawal. It is often viewed as a form of communication, indicating unmet needs, frustration, or discomfort. Addressing challenging behavior typically involves understanding its causes and implementing strategies to manage or reduce it.

4. Behavior Management Approach

- Preventive strategies (e.g., behavior expectations, environment setup).
 - Children are expected to play and engage with their friends and caregivers. Children are expected to communicate to the best of their ability. Sometimes, the children may have a rough day, crying and not wanting to participate. There could even be biting or hitting.
 - Challenging behaviors can be reduced by:
 - Connecting and building a strong bond with the children. Treating every day like it is a new day.
 - Providing every child/family with a warm greeting.
 - Keeping children actively engaged. If children are bored, that is when we will see challenging behaviors.
 - Helping to develop a child's communication skills.
 - Have clear age-appropriate expectations of the children.

- Infants will be met where they are, with appropriate skills teaching.
 - Toddlers should have a structured routine. Children thrive on a routine.
 - Access to a safe place.
- Intervention strategies (e.g., de-escalation techniques, communication).
 - Staff should first try to de-escalate the situation by:
 - Redirection
 - Using verbiage like gentle touches, teeth are not for biting, etc...
 - Offering choices. Do you want this or this?
 - Offer a safe place for them to calm down.
 - Teethers
 - Age-appropriate fidgets
 - Books that talk about appropriate behaviors
 - For example, teeth are not for biting, hands are not for hitting, and feet are not for kicking.
 - If a child must be physically moved, a caregiver must move them by placing their hands under their armpits. A child cannot be moved in any other way.
- Individualized support (e.g., BIPs, specific accommodation).
 - A binder will be put together where every instance needs to be documented.
 - For example, what happened? Was there a trigger? Who was the child who was bitten? Is it the same child who is being hurt?
 - The binder will be kept on the teacher's desk cabinet, away from the eyes of other parents.

5. Consequences and Rewards

- Appropriate consequences for challenging behavior.
- Positive reinforcement strategies for appropriate behavior.

6. Staff Training and Development

- Social-emotional component- Conscious Discipline videos
- Intentional Teaching (Developmental milestones)
- Training in challenging behaviors
- Training in biting

7. Monitoring and Evaluation

- Tracking how many incident reports on a type of behavior a child has
- Looking in the binder at each situation
- Filing all incident reports in the child's folder

8. Legal Compliance and Ethics

- How the policy complies with legal standards and ensures ethical behavior.

PARENT PARTICIPATION

Parent-Teacher Communication

Ongoing communication between home and school is essential to the child's well-being. Parents of infants and toddlers will receive electronic information daily sheet. Parents of children in the first year of the preschool loop will also receive electronic information, including meals, diaper/potting, and napping through the first five months of the school year. E-mail is another effective way for teachers and parents to exchange information. Parents are encouraged to talk regularly with teachers. Although parents and teachers may talk briefly at arrival and pick-up times each day, teachers are unable to engage in extended conversations when they are responsible for children. To discuss an issue at length, a meeting outside the classroom must be scheduled; a mutually convenient time for a meeting or phone call. Teachers may make or return phone calls during their administration time or when someone is available to cover the classroom.

Although all our families have at least one person in the family who speaks English, translation services and other accommodations are available with prior notice.

Messages

Phone messages for staff may be left through the school office. **Please do not leave messages on the staff's personal phone.** Both the Infant/Toddler and Preschool offices are staffed, and the phones are answered from 7:30 a.m. until 6:30 p.m. daily. After-hours calls may be left on the school's voicemail.

Parent-Teacher Conferences

Formal individual conferences to discuss student progress are offered in the Fall and Spring. Additional conferences may be held at the request of the

parent or teacher. Parents receive written summaries of children's performance at mid-year as well as the year-end conference.

Information Boards

The information boards at the front door of each classroom/building are used to relay information about activities for the day. Cubbies are used both for messages to parents and for holding items children may take home daily. Please remember to check cubbies every day. Preschool parents receive information about the curriculum for each week via the "Weekly Curriculum Overview", a summary of the next week's lesson plan including target vocabulary, themes, and some of the planned activities.

Observation/Participation

Parents are encouraged to observe the program at any time without prior notice to the program. Observation windows are available in all Infant/Toddler classrooms reducing the problem of disruption of routines. Parents are invited to visit classes and join their children for lunch and special school activities. Please keep in mind how your visit may affect your child when it is time for you to leave and not take them with you.

Parent Resources

Information of interest to parents is posted on the bulletin boards by the time clocks. Brochures and handouts on topics related to parenting and early development are displayed. Replacement copies of current menus, calendars, and other distributed items are also available in these areas or from the office. Books and other resource materials are available in the program resource library and the Conference/Nursing Room in the Infant/Toddler building. Other materials, related to specific issues, may be provided upon request. DISD parents may attend English and Spanish sign language classes at no charge.

(See additional resource links on the back page of the Parent Handbook.)

Callier Parents' Association (CPA)

The Callier Parents' Association provides support for the school through fund-raising activities and volunteer opportunities. Parents of all Callier Child Development Program students are considered members. There are many opportunities for participation through numerous projects and special events each year. Upon enrollment, you will receive the link to register your interest in participating in our CPA events. Information about these events is posted on designated bulletin boards near the lobby and can be found on

the program website. If you would like more information or are interested in volunteering, please email callier.cpa@gmail.com.

Program Participation and Evaluation

Each spring parents have an opportunity to evaluate the program's performance and to offer feedback and suggestions on policies, procedures, and program improvement strategies. This survey provides key information about customer satisfaction and helps identify goals for improvement.

Additional program review is conducted in various ways including:

- Child Care Regulation Inspection
- NAEYC Annual Accreditation Report
- UTD Compliance Audit
- Environmental Rating Scales
- Staff Survey
- Student Assessment Outcomes
- USDA Meal Program Audit (every 5 years)

Grievance Procedures

Parents' concerns that cannot be satisfactorily resolved by communication with the child's teacher should be addressed to the appropriate Program Manager who may contact them at any time by phone or e-mail to request an appointment. If families, Program Managers, and the Director of Education are not able to reach a satisfactory solution, parents may present their concerns in writing to the Executive Director of the UTD-Callier Center. Callier is committed to working with families to achieve a shared goal of providing the best possible care and learning environment for children.

Despite diligent effort, in some cases, resolution of differences may not be possible. In such circumstances, parents or the UT Southwestern- UTD Callier Child Development Program administration may decide to terminate enrollment.

REPORTING CHILD ABUSE/NEGLECT

All staff is required to participate in one (1) hour of annual training on this topic which includes recognizing risk factors, warning signs and symptoms, reporting policies, community resources, investigation protocol, and assisting families. As a Professional Reporter as defined by the State of Texas, each staff member is obligated by the Texas Family Code. If a staff member suspects child abuse or neglect, they are **required by law** to report it. Failure to do so would jeopardize their career and incur a possible fine.

Staff who see evidence of abuse or neglect and who report it in the good faith belief that such conditions exist and do so for the best interests of the child or children are immune from liability and their reports will be confidential.

The following information is excerpted from the pamphlet *TEACHERS AND CHILD ABUSE* distributed by the Texas Attorney General:

Responsibilities and Protections: The Texas Family Code requires any person "having cause to believe that a child's physical or mental health or welfare has been or may be adversely affected by abuse or neglect" must report the case to any local or state law enforcement agency and to the Texas Department of Human Resources Child Protective Service Office. Failure to report a case of child abuse or neglect is a Class B Misdemeanor, punishable by imprisonment of up to 180 days and a fine of up to \$1000.

If YOU know or suspect child abuse or neglect of your child or any child, call the 24-hour Child Abuse Hotline number at 1-800-252-5400.

If you see the following signs in a child AND have cause to believe that abuse has taken place, the law requires that you report it.

Common indicators of **PHYSICAL ABUSE** include:

- Frequent injuries such as bruises, cuts, black eyes, or burns, especially when the child cannot adequately explain their cause.
- Frequent complaints of pain without obvious injury.
- Burns or bruises in an unusual pattern, which may indicate the use of an instrument or a human bite. Cigarette burns may be seen on the face, arms, or palms.
- Aggressive, disruptive, and destructive behavior.
- Passive, withdrawn, and emotionless behavior.
- Lack of reaction to pain
- Fear of going home or of seeing parents.
- Injuries that appear after the child has not been seen for several days.
- Wear unseasonable clothes that may hide injuries to arms or legs.

Common indicators of **NEGLECT** include:

- Obvious malnourishment.

- Lack of personal cleanliness.
- Habitually dressed in torn and/or dirty clothes.
- Obvious fatigue and listlessness.
- Unattended for long periods.
- Needs glasses, dental care, or other medical attention.
- Beggars or steals food.
- Frequently absent or late to school.

Common indicators of **SEXUAL ABUSE** include:

- Physical signs of a sexually transmitted disease.
- Evidence of injury in the genital areas.
- Pregnancy in a young girl.
- Difficulty in walking or sitting.
- Frequent expressions of their own or other children's sexual involvement with adults.
- Extreme fear of being alone with members of the opposite sex.
- Engages in sexually suggestive or promiscuous behavior.
- Knowledgeable about sexual relations.
- Reports sexual assault.

If your child is a victim of child abuse or neglect, contact community advocacy and support agencies listed in the Resource Section at the back of the Parent Handbook. Callier staff is here to assist and help in any way we can.

STAFF ACCUSED OF CHILD ABUSE

If a member of the Callier Child Development staff is accused of child abuse or neglect, the following steps may be taken during the investigation:

1. A senior member of the Leadership Team will notify the Callier Executive Director, Leadership Team members, and any other licensing and regulatory agencies as appropriate.
2. Administrative staff may discuss the situation with the accused staff and any witnesses.
3. Administrative staff may discuss the situation with the complainant.
4. Staff may be reassigned to temporary duties outside of their regular work area.
5. Staff may be put on paid administrative leave.
6. All staff will work cooperatively with all investigating agencies.
7. Callier senior administrative staff and UTD Human Resources will make the final decision regarding the staff's continued

employment with Callier Child Development Program upon the results of the final report from Childcare Licensing or any other investigating agencies.

Employee's rights during an investigation:

1. Be informed of due process of the law and legal rights.
2. Be informed of the allegation and possible consequences.
3. Be able to tell his/her side of the story.
4. Be kept up to date on any new information.
5. Be assured of confidentiality of allegations with parents and other staff.

Materials available for parents and staff include information from the Dallas Children's Advocacy Center
(<http://www.dcac.org/parentresources.aspx>).

Additional Information for Infant Care

Classroom Placement

For an August enrollment, infants and toddlers are placed in classroom groups primarily based on the following:

- Existing relationship with caregiver within their assigned group
- Age
- Distribution of gender

Developmental Screening

All new students receive an Ages and Stages (ASQ-3) Developmental screening within the first 30 days of school attendance.

Supplies

These are the items you will want to bring on the first day of school (everything clearly labeled with your child's name):

- A bag of diapers and wipes
- Diaper cream, if used
- At least four changes of clothes to keep in your child's cubby
- Wide brim hat for outdoor time

- Non-aerosol sunscreen and insect repellent (for use with children over 6 months of age)
- 12 bottles/food containers and any containers you will be using so they may be colored-coded with our waterproof tape and labels
- Water bottle (for use with children over 12 months of age)

General Infant Program Information

Teachers attune themselves with each child they serve using the Program for Infant Toddler Care (PITC) framework through relationships and routines. While using the PITC framework, we use the Frog Street Curriculum, which is designed around early brain research; the Frog Street Infant curriculum equips caregivers to foster essential growth and build a strong learning foundation for little one's ages 0-18 months. Every activity is individualized to a child's needs. Frog Street Toddler is a year-round program for children ages 18-36 months that focuses on enhancing the simple joy of childhood while equipping caregivers to nurture curiosity through exploration.

Arrival and Departure

- Out of an abundance of caution for all children who enter the Infant/Toddler building, siblings will not be permitted to stay in the front lobby without the supervision of their caregiver. It is the expectation for the safety of siblings that they will walk with their caregiver to conduct drop-off/pick-up at the classroom entrance.
- Bring daily supplies in bags small enough to easily fit in your child's cubby; we recommend a reusable cloth grocery bag.
- Adult personal belongings should be left outside of the classroom or out of the reach of babies. Purses left on the floor or low shelf are hazardous for mobile infants; lab coats, stethoscopes, etc., may present other sanitation or safety issues; pagers and cell phones should be stored away, turned off, or left on vibrate to avoid disrupting the classroom. A hook is provided by the door to hang purses out of the reach of children.
- All medications must be checked in at the front office and **accompanied by a physician's authorization to administer**; this includes over-the-counter medicines, including Tylenol or teething gel.
- Complete the top portion of the daily report form in your child's book. Pick up the white copy at the end of each day for information on feeding, napping, diapering, and other notes (including notices for more diapers or wipes).

- **Do not bring toys from home.** Callier is not responsible for personal items that are lost or broken at school. In addition, personal toys can create conflict between classmates as the children get older. We have very specific requirements for toys/supplies in the classroom, so help keep all our children safe and keep toys at home.
- We must have accurate phone numbers and e-mail addresses; families are asked to routinely verify current contact information.

Food

- Bottle feedings may not contain solid foods, medication, vitamins, etc., unless authorized by the physician in writing.
- Bottles are rinsed and sent home daily; they are not sanitized at school.
- Water bottles are sent home daily; they are not sanitized at school.
- Callier is a “nut-free” campus; this includes peanut butter and by-products.
- Food that comes from home for late afternoon snacks either must be whole fruits or commercially prepared packaged foods (low in sugar) in their store or factory packaging. Be aware of all special feeding, allergies, or nutritional requirements in the group. *Check with the classroom teacher before purchasing.*

Teacher responsibilities for infant feeding

- The infant is fed based on his/her cues unless the child’s parent and medical provider written instructions otherwise due to a special nutritional/medical need
- Interacts with the infant while feeding
- Holds infant when feeding solid food until he/she can sit up without assistance or in a highchair
- Holds the infant when feeding a bottle until he/she is 12 months and can sit unassisted
- As soon as the infant can sit without assistance, he/she eats at the group table to experience the utmost social interactions at mealtime: The teacher sits on the floor or a low chair to assist the baby at the table.
- Stops offering food or bottle when the infant gives cues showing signs of not wanting anymore
- Washes her own hands and the infant’s hands before and after feedings

- Only feeds from labeled bottles and food containers with the child's name on them
- Sanitizes the food preparation and eating surfaces by:
 - Washing with soap and water.
 - Drying with a paper towel
 - Rinsing with clear water
 - Drying with a paper towel
 - Spraying with disinfectant solution
 - Drying with a paper towel

Parent responsibilities

- Completes the feeding schedule; signs and dates it on the first week of every month.
- Provides all food, prepare formula bottles that are ready to be served, and breast milk until the baby is old enough to transition to table food: Currently, the parent completes a Lunch Request Form and gives it to the front desk personnel. The child may begin school meals with one week's notice, and this will give us time to inform the cafeteria personnel.
- Bring a clean, labeled bottle (with nipple and cap) filled with premixed formula or breast milk for each expected feeding **plus one extra**, and take all bottles home at the end of the day.
- Adds a date label to each bottle and food container. **We cannot feed baby bottles that are not clearly labeled, dated, and prepared to be served.**
- Washes his/her own hands and their baby's hands upon arrival.
- Places labeled bottles/food in their child's designated container in the refrigerator and cabinet.

Breast milk and feeding

- We encourage and support breastfeeding mothers.
- Mothers are encouraged to feed their infant in a private "Mommy and Me" room with a comfortable chair available near the front office area.
- The mother notifies the staff if the scheduled breastfeeding time is going to change.
- In the classroom breastmilk is warmed in hot running water, bottle warmers, or in water in a crock-pot and gently swirled to mix separation. **(Never shake breast milk.)**
- Due to a lack in storage space and properly implementing best practices for breast milk, breast milk will only be permitted to be fed

in the infant classroom. A physician's note will have to be provided to further feed breast milk in the toddler classroom.

Glass bottles/food jars

Glass baby bottles are permitted if sent to school in a protective silicone sleeve. For food containers, please use non-breakable containers when possible.

Storing food, formula, and breast milk:

- Each infant's prepared bottles/food is stored in the refrigerator or cabinet in their separate bin labeled using our labeling system.
- Refrigerator temperature is kept between 36- and 40 degrees F. Temperature is checked and recorded each day.
- Freezer temperature is kept under 0 degrees F. Temperature is checked and recorded each day.
- ***ALL FORMULA AND FOOD ARE TO BE TAKEN HOME AT THE END OF EACH DAY.***

STEPS TO FEED AN INFANT

The teacher:

- sanitizes the food prep surfaces using the four-step posted procedures
- washes his/her hands following the posted procedures
- gets feeding supplies out and ready
- removes the bottle/food from the refrigerator/cabinet
- checks the label on the bottle/breast milk/food container immediately upon removing it from the storage area and ensures it is correctly labeled with the child's name and dated
- (When using frozen breast milk) remove the breast milk from the freezer and place it in a container of cool running water, gently swirling it periodically to evenly distribute the temperature or place it in the refrigerator to defrost if there is time.
- Warms bottles under hot running water, in a bottle warmer, or in a crock-pot. When warming in a device the water must not be warmer than 120 degrees F. Bottles should be in a warming device for less than 5 minutes
- Prepares solid food
- Washes the infant's hands by using a wet paper towel and soap, rinsing with a wet paper towel, and drying with a dry paper towel. As soon as the baby is capable, wash hands under running water with soap following the posted hand washing procedure
- Place warmed bottle/food on the child's name label on the counter

- Gets bottle/food from the counter and rechecks labels to ensure the name on the bottle/food matches the child that is going to be fed
- **Check the label again before feeding the infant and do a verbal Name to Face check!**

Transitions and Separation

We suggest you talk with your baby and share your enthusiasm for the other people who are caring for him; allow plenty of time for morning drop-off at school. Avoid slipping out unnoticed when dropping off. This affects the trust level your baby is forming with caregivers. ALWAYS tell your baby goodbye and that you will be back.

Toothbrushes/Gum Cleaners

To promote good health and hygiene, Callier provides each child with a gum cleaner (gauze) or toothbrush. Each item is labeled and stored in the classroom. We clean gums after each bottle or meal (without toothpaste). To limit confusion, only Callier-provided toothbrushes are used. Toothbrushes are changed out every three months and after a child has been ill.

Napping

According to our state licensing requirement *“Each infant (0-18 months) must have a supervised nap period that allows the infant to maintain his or her own pattern of sleeping and waking periods.”*

Nap Items

The school provides each child with a crib or cot for individual use. School-provided sheets are washed weekly or more frequently as needed. The school will provide toddlers and older children with a blanket which is washed weekly or more frequently as needed. The infant sleep sack will (go home every Friday for laundering).

Toddlers and older children are allowed to nap with one stuffed animal if that helps them to rest. Nap toys must be labeled with the child’s name and small enough to fit into the locker’s storage bin. Please do not send toys other than stuffed animals for nap use. (See Information in Infants section for infant napping information.) Soft elements (blankets, bumper pads, stuffed animals, etc.) are not allowed in the crib at any time.

Face up

Babies under the age of 12 months are placed on their backs for sleeping and must sleep in their crib. Wedges or ‘boppies’ cannot be used in cribs without a physician’s statement. If a baby falls asleep in the teacher’s arms or in a bouncer, boppy, carpet, or buggy; he/she will be placed in his/her crib immediately. Babies may be rocked, patted, or held to prepare for sleeping. Children arriving asleep will be placed on their backs in the crib.

Equipment in the infant room: As the infant transitions from cribs to cots, chair trays to tables, the infant room may look different. Equipment is removed to support space for teachers to set up the environment to maximize developmental growth. For example, a climbing structure is added to promote more gross motor activity.

Preparing for Toddler Transition

Before transitioning to the toddler room, staff will work together to help your child adjust to the different expectations in that group;

- Sleeping on a cot
- Transitioning to one nap
- Drinking from an open cup and
- Self-feeding with assistance

This will provide many opportunities for your child to successfully transition to the toddler room next year.

Pacifiers are not used here at school after 12 months of age, except for nap time. Pacifiers may not be pinned or attached in any manner to the child.

Bottles are not given in the toddler room unless a child is under 12 months old with a doctor’s note. We start transitioning children to a cup depending on their individual development.

Diapering

Each child is assigned a diaper bin, labeled with his/her name and picture. The diaper bins only hold diapers, wipes, and diaper cream. The children’s diapers will be checked and changed every two hours or when a baby has a BM. Baby’s and staff’s hands are washed after each diaper change. Parents, if a child needs a diaper change upon arrival, please change your child before leaving the classroom. Diaper-changing policies/procedures are posted by each diaper-changing station.

Infant and Toddler Communication with Parents

Infant and toddler classroom teachers send electronic daily notes to parents. The daily note provides a log containing details about bottle-feedings, diaper care, mealtimes, nap time, and other relevant details for the day. Instructions on how to download the ProCare Daily Note app will be sent to families after the child is enrolled in the program, within the first week. The ProCare Daily Note app also provides secure visual messaging for teachers to keep families connected. Please note: Teachers will respond to messages when they are out of the teacher-child classroom ratio. If you need to communicate any pertinent information to the teacher, please use the main line (972) 883-3099. Parents also receive newsletters, photos, videos, and observations that track student development and milestones. In addition to the app, parents receive notes directly to the email address your child's teacher has on file.

Additional Information for Toddler Care

Arrival Transition

Transitions can be a stressful time. We suggest arriving close to the same time as possible and following the same routine until your child adjusts. It is very natural for children to cry during drop-off time. We suggest you spend a couple of minutes with them, tell them they are in a safe place and that you will be back, and leave the room. The observation booth is available to you for checking your child after separation.

Shared learning centers

Each suite has shared learning centers that two toddler classes share during work time. Teachers actively supervise the learning centers being used.

Washing Hands Upon Arrival

Please wash your and your child's hands upon arrival before joining the group.

Pacifiers, Bottles and Toys from Home

Pacifiers and bottles are not used in the classroom beyond 12 months of age. If your child is still on a pacifier or bottle, we will assist in the transition process.

Toys from home

Are not allowed in the classroom except for a small soft lovie for naptime if needed.

Jewelry, Hair Clips, Small items

Children may not wear dangling jewelry or small hair clips that could present a choking hazard.

Supplies

These are the items you will want to bring on the first day of school (everything clearly labeled with your child's name):

- A bag of diapers
- On water play days, at least 2 additional swim diapers or pull-ups
- Wipes
- Diaper cream, if used
- Water bottle
- At least two changes of clothes to keep in your child's cubby, including socks
- The school will provide sheets and a blanket to children sleeping on a cot. Children who are 12 months old will transition from cribs to cots.
- Wide-brim hat for outdoor time with straps
- Non-aerosol sunscreen and insect repellent
- We supply blankets for children on cots

Nap Time

Toddlers usually transition into one nap per day after lunch. Children nap on cots, and sheets are cleaned weekly. They may bring a small blanket and a soft animal if needed.

Potty Learning

Toilet learning often begins sometime during the toddler school year. We do not begin the toilet learning process until the child begins showing signs of interest and signs that their body is ready. We will need to communicate closely with you about what signs you are seeing at home. When we think your child may be ready to begin, it is important that both (teacher and parent) answer a questionnaire that will help us determine if the child is ready. When we agree to begin, we will need to be very consistent between home and school. Your child will need extra underwear and extra pants during this time.

Evening transition

All toddlers' classes combine and transition to the playroom at 5:45.

Additional Information for Preschool Care

Developmental Screening

All new students receive an Ages and Stages (ASQ-3) Developmental screening within the first 30 days of school attendance.

Tooth Brushing

Preschool groups brush teeth a once during the school day. Toothpaste is not used. The school provides a toothbrush for each child at the beginning of enrollment and replaced every three months. Teachers help children learn appropriate steps: While seated at the table, wet toothbrush; brush teeth with a circular scrubbing motion on all surfaces; take a mouthful of water, swish, and spit back into cup. Disposable cups are discarded after use.

Preschool section: Technology in the Classroom

- **iPad**
- **Interactive Smartboards (ISBs)**

In the C, F, and G learning environments, have an Interactive Whiteboard (IWB) as well as each team has an iPad to be used as an option to extend child-initiated learning during the day. Both the Interactive Whiteboards and iPads are not meant to replace what is currently available in the classroom but can be used alongside traditional materials. Children are naturally manipulators of their world. We want children to do things and make things happen, not just sit back and listen. Interactivity with the iPad allows children to use tools that enable them to be actively in making things happen with the device and applications. Teams incorporate the iPad or Interactive Whiteboards into their weekly planning and the intentional activity is listed on the weekly lesson plan.

- **Preschool** – Teacher-directed activities – 15 minutes.
- **Child Initiated Activity** – allow the children enough time as it takes for them to complete the task or satisfy their curiosity. Some children may need more time than others.
- Childcare Regulation limits screen time to 60 minutes per child per day, our preschool program expectations fall well below this limit for our children.

Preschool Classroom Volunteers

Our program has over 30 years' history collaborating with several agencies in the Dallas area to provide volunteer opportunities for senior citizens, high school and college age individuals. All volunteers who spend more than 2 days per month must complete a Texas Childcare Regulation background check and have an initial orientation to the program. Volunteers are never counted in the teacher/child ratio and don't assist with diapering or pottyng.

- **The Senior Source Foster Grandparent Program:** Senior Citizens are placed in educational settings to provide additional support for children. While schedules can vary, most grandparents are here three full days (8:30-3:00) weekly.
- **Ursuline Academy:** Each year, we are the placement for Ursuline Academy Seniors for their community service hours. We generally have between 4-6 people who come on Mondays from 8:30-10:30 to participate in their assigned classroom between September and April.
- **Local Colleges and Universities:** As an NAEYC Accredited Program, we have frequent requests for students studying Early Childhood, Child Development, or Deaf Education to observe in our program.

Backpacks: Parents are welcome to bring an appropriate backpack for their child's age to and from school, but we request that no toys be brought from home. Please monitor what your child is bringing to school. Callier is not responsible for personal items that are lost or broken at school. In addition, personal toys can create conflict between classmates.

When choosing a backpack for your child, please consider these recommendations from the American Academy of Pediatrics. The American Academy of Pediatrics advises that backpacks should weigh no more than 10 to 20 percent of the child's body weight. The smaller the child, the smaller the backpack should be.



General: Water Bottles: Preschool children may bring an individual non-glass water bottle labeled with their name and kept in their cubby. Only WATER may be in these containers. Water bottles are sent home daily; they are not sanitized at school.

Resource Websites:

Callier Child Development Program

www.utdallas.edu/calliercenter/child-development

Texas Health and Human Services Child Care Licensing

http://www.dfps.state.tx.us/Child_Care/

214-583-4253

(Licensing reports and inspections are posted and available for review on the Family Information Board near the sign in area or on the website listed above. Current licensing regulations are also located at this site as well as in each of the office areas.)

Reporting Child Abuse and Neglect

<https://www.txabusehotline.org/Login/Default.aspx>

1-800-252-5400.

Child Abuse Advocacy & Support Groups

www.cactx.org/child-abuse-in-texas

<https://www.childhelp.org>

www.family-compass.org

www.dcac.org

Dallas County Health Department: Communicable Disease Chart and Notes for Schools and Child-Care Centers

<https://www.dshs.texas.gov/immunize/docs/6-30.doc>

National Association for the Education of Young Children

www.naeyc.org.

Program for Infant Toddler Care

www.pitc.org

Frog Street Press

www.frogstreet.com

Conscious Discipline

www.consciousdiscipline.com

Weather

<http://dallas.weatherstem.com/utdallasbpi>

<http://www.epa.gov> (My Environment)

Consumer Product Safety Commission

www.cpsc.gov

Nutrition

http://teamnutrition.usda.gov/resources/mpk_tips.pdf.

<http://www.educationbug.org/a/lunchbox-and-sack-lunch-ideas.html>

<http://www.squaremeals.com>

[About Breastfeeding | Breastfeeding | CDC](#)

Biting

<http://www.zerotothree.org/child-development/challenging-behavior/chew-on-this-resources-on-biting.html>

<http://www.webmd.com/parenting/guide/stop-children-from-biting>

Wellness

<https://nrckids.org/CFOC>

Appendix A: Sick Child Report

Symptom Report

The symptoms below are the most common reasons for your child to be sent home but they are certainly not comprehensive.

If symptoms prevent a child from participating comfortably in school activities; or your child requires additional care that cannot be given without compromising health and safety of other children, you will be asked to keep your child at home until symptoms subside.

***Children excluded from school because of fever may return with a doctor's note OR when the child is symptom free for 24 hours without use of fever reducing medication.**

Guidelines for returning to school:

Symptom	Stay Home	When child can return:
Fever by age:		
A. <2 mo. ANY fever >98.6	Yes	*Temp is normal OR w/doctor's note
B. 3 mo.-6 years >101	Yes	*Temp is normal OR w/doctor's note
<u>with behavior changes</u>		
Diarrhea (2 episodes within 4 hours)	Yes	24 hours after last episode
Vomiting (2 episodes within 24 hours)	Yes	24 hours after last episode
Lice	Yes	After first treatment
Strep throat	Yes	24 hours after first treatment as <u>prescribed by doctor</u>
Unexplained Rash	Yes	Rash is gone or doctor's note
Mouth sores w/drooling	Yes	When mouth sores/drooling are <u>gone OR doctor's note</u>
Pink/red eye with oozing	Yes	After initial dose of medication <u>OR doctor's note</u>
Other _____	Yes/No _____	