

Trinity Preschool Health and Safety Policies

978 887-2990

Emergency Telephone Numbers

COLLEEN ZAMAGNI, Health Care Consultant	978-561-1455
FIRE	911
POLICE	911
AMBULANCE RESCUE	911
POISON CONTROL	1-800-222-1222
BEVERLY HOSPITAL	1-978-922-3000
BEVERLY HOSPITAL HUNT CENTER	1-978-774-4400

Emergency Procedures

In case of an emergency at Trinity Preschool the procedure is:

1. The nearest available teacher will stay with the child. This teacher will try to keep the child calm while administering the appropriate first aid.
2. The Director will call for emergency assistance.
3. The Director will contact the parent(s). Emergency numbers for each child are in the Emergency Information Binder located in the office on the desk as well as in the Child's file. Parents need to immediately meet the child at the hospital.
4. A teacher with whom the child is familiar will accompany the child to the hospital. The child's file will be taken to the hospital with the child. The teacher will check the file for permission to treat and any special instructions.

In case of an emergency while on a field trip away from Trinity Preschool, the procedure is:

1. A Teacher on the trip will stay with the child and administer the appropriate first aid.
2. A Teacher will contact the police for emergency assistance.
3. A Teacher will contact the Director, and then continue to care for the other children.
4. The Director will contact the parent(s).

Teachers are responsible for bringing the Emergency Information Binder and a Travel First Aid Kit on all field trips. Field trips include but are not limited to walks on the church property.

First Aid Kit

The first aid kit is located in the marked file cabinet drawer in the office. The first aid manual is located with the kit. All staff is certified in Infant & Child First Aid and CPR. The first aid kit is maintained by the Director and checked yearly by the Health Care Consultant. The Director is responsible for notifying the Health Care Consultant periodically to order specific items. The supplies include: thermometer, gauze bandages, band-aids, latex-free gloves, instant cold pack, scissors, and tape.

Emergency Plan for Evacuation

The emergency plan for evacuation is posted on the wall in each classroom. One Teacher leads the children out of the building. The other Teacher checks the area for stragglers. The Lead Teacher takes responsibility for assuring that the correct number of children is safely evacuated according to her daily attendance record that she brings out with her.

Evacuation Drills

Evacuation drills are conducted monthly. Drills will alternate between M, W, & F and Tue. & Th. schedules, so that children in all programs have the opportunity to participate in a fire drill every other month. The Director will document the date, time and effectiveness of each evacuation drill.

Contingency Plans for Emergency Situations

At the start of the school year each classroom will designate two parents to assume the role of activating a phone chain.

In case of a fire, natural disaster, or situation necessitating evacuation of the building (ex. Chemical spill, bomb threat), the evacuation plans in each classroom will be used. The children will then be walked over to the Rector's home adjacent to the church property by their teachers. The Director shall begin calling designated parents to begin the established phone chain so that families may make arrangements to pick up their children. **However**, in instances where it may be too dangerous to leave the building, such as chemical spills outdoors, children will be kept indoors with windows closed. The director will call 911 and wait for emergency response to arrive and give directions for safety. If the Emergency Management Director deems it necessary, the students will be taken by bus to Beverly Hospital. When possible, the church hall will be used as temporary space until conditions change or parents are notified.

In case of a power outage, loss of heat, or loss of water Trinity Preschool will be closed. Parents will be notified via a phone chain

Injury Reports

All parents will be informed immediately of any emergency care given beyond minor first aid procedures. All parents will be informed in writing of any first aid administered within 24 hours of the incident on an injury report form; parents need to sign and return this form. The original form will be kept in the child's file; a copy will be given to the parent(s) and the incident will be logged in the injury logbook located in the Director's office.

Injury Prevention Plan

All staff members are responsible for the daily monitoring of the environment and/or repair of potential hazards.

Children are monitored at all times inside and outside. Teachers maintain daily observation of safety rules and remind children of these rules when necessary.

Injury reports will be completed by the teacher witnessing the incident and signed by the parent in the event of an accident. One copy will be left in the child's file and the other will be given to the parent. The incident will also be recorded in the Injury Log Book located in the Director's office.

All staff are trained in Infant & Child First Aid every three years and CPR every year.

Management of Communicable Diseases

Your child's health is important to us. The following guidelines are necessary to insure the health of all the children and staff at Trinity Preschool.

Please keep your child home if he or she:

- has a fever (higher than 100.0-oral) or has had one within 24-hour period before school.
- has vomited within a 24-hour period before school.
- has had diarrhea within a 24-hour period before school.
- has a contagious illness or condition.
- has a chronic cough and/or runny nose.
- has thick mucous or pus draining from the eye or nose.
- has a sore throat and/or swollen glands.
- has an undiagnosed or contagious skin rash.
- is unusually tired, pale, irritable - does not seem to feel well.

Your child may return to school when:

- symptoms have disappeared for 24 hours.

-OR-

- a physician has certified in writing that the symptoms are not associated with an infectious agent or they are no longer a health threat to other children, staff, and parents at Trinity Preschool.
- in the case of strep - has been on antibiotics for 36 hours.
- In the case of chicken pox - it has been 1 week after the last spots have appeared or when all the lesions are crusted over and very dry.
- In the case of conjunctivitis - has been on antibiotics (ointment) for 24 hours.

If your child develops any signs or symptoms of illness during the school day, we will call you. We isolate and keep the child comfortable in either the classroom or the office; we expect that you will make arrangements for your child to be taken home. The Director or designated person will remain with the child, document symptoms, administer medication if necessary and permitted, ask for medical advice (if necessary), check temperature, administer first aid, and follow hygiene and hand washing procedures in caring for the child. Procedures for completing an injury report are followed. The designated person cleans and disinfects toilets and sinks after use by the infected child. After the child has returned home, the designated person will clean and disinfect affected areas. The staff uses latex gloves when handling bodily fluids and applies proper hand washing techniques.

Parents are asked to notify the Director within 24 hours if their child has contracted a communicable disease or condition,

In the case of certain highly contagious ailments or serious illness, a doctor's note may be requested saying that the child is free of symptoms and the date that the child can return to school.

No child or staff member will be allowed to come to school if they have a communicable disease. Parents and staff are notified of any communicable disease present at school. When a communicable disease or condition is reported, a written notice will be posted at the entrance to the classroom of the child that has been exposed. When warranted, notes will be sent home notifying parents of contagious conditions.

Plan for Infection Control

Staff and children are required to wash their hands after toileting, before handling food, after sneezing, blowing nose, changing diapers, or any other situation which may put a staff person or child at risk for the spreading of infection. All staff is to follow through with infection control.

Daily cleaning procedures performed by the classroom teacher and/or Director:

- * Bleach solution: 1 T to 1-quart water is used for general cleaning.

- * Tables are washed with a bleach solution daily and before and after eating.
- * Water tables and equipment are cleaned with solution after each use.
- * Diapering surfaces are cleaned with solution after each use.
- * Materials, toys and equipment are checked for hazards and removed for repairs.
- * Open windows to circulate fresh air at the end of the day after children leave.
- * At the end of the day, materials are where they belong.
- * No smoking in Center.

Other procedures

- * Children wash hands with warm running water and liquid soap before and after water play.
- * Children & staff wash hands with warm running water and liquid soap before eating.
- * Staff & children wash hands with warm running water and liquid soap after toileting or diapering, after touching bodily fluids or discharges & after cleaning.

Daily cleaning procedures performed by Church Maintenance personnel:

- * Clean and disinfect sinks, faucets, and drinking fountain.
- * Clean and disinfect toilets and toilet seats, diaper pails (including lid).
- * Clean mops, wash cloths and towels.
- * Floors vacuumed daily.
- * Floors washed daily.
- * Trash is emptied and container kept clean.

After each use by staff using equipment:

- * Thermometer
- * Clean and disinfect mops or cloths used for cleaning bodily fluids.
- * Disinfects mats and cots used at naptime.

Monthly cleaning procedures performed by classroom teachers and/or Director:

- * Paint smocks are washed
- * Dress-up clothes are washed
- * Clean machine washable toys
- * Wash blankets

Staff is trained in, and uses Universal Precautions.

Plan for Meeting Specific Health Care Needs

The Developmental History Form and the School Health Form should identify specific health needs of a child. All children diagnosed with chronic health issues must have an Individualized Health Care Plan on file in the Preschool Office. Lead Teachers are responsible for communicating with parents regarding the specific needs of the child. The Lead Teacher should notify the Director of any special needs that a child may have. The Director serves as the Consulting Resource Teacher for Trinity Preschool. The Health Care Consultant and the child's pediatrician may also be contacted, if necessary, to insure that the specific needs of the child are met at Trinity Preschool.

Immunizations

Prior to admission, each child must have a physical and be updated on all immunizations. A Massachusetts School Health Form must be completed and signed by the child's physician and renewed each year. **A child will not be able to attend the programs at Trinity Preschool without a current Health Form on file.**

Medication

All medications must be given to a Preschool Staff member directly by the parent and will be stored out of the reach of children in the Director's closet or the refrigerator. All unused medications will be returned to the parent.

Prescription medication will be administered by the Director (or designated staff) while witnessed by another staff member, provided the physician's name, child's name, the name of the medication, the dosage, the number of times per day and the number of days the medication should be administered are on the original prescription container. The prescription label will be accepted as the written authorization of the physician. An Authorization for Medication Form needs to be completed and signed by the parent. The teacher or director administering the medication is responsible for documenting each dosage in the Medication Log kept in the office.

Non-prescription medication will be given only with written consent of the child's physician and an Authorization for Medication Form signed by the parent. The program may accept a signed statement from the physician listing the medication(s), the dosage and criteria for its administration. The statement will be valid one year from the date it is signed. The child's physician should review this authorization during the year for any changes in the child's age or weight. All non-prescription medications must be kept in the original containers and labeled with the child's name. Teachers may not administer medication contrary to the directions on the original container unless authorized by a written order from the physician. An attempt will be made by Trinity Preschool to contact the parent before the medication is administered, unless a child needs medication urgently or when contacting the parent will delay appropriate care unreasonably.

Topical Ointments and Sprays such as sunscreen, bug spray, etc. will be administered with written parental permission. The signed statement from the parent will be valid for one year and include a list of topical non-prescription medications.

It is recommended that **sunscreens** be applied by parents at home prior to coming to school.

Allergies

A completed Developmental History Form and Cover Sheet should identify children with allergies. The parents should specify any allergies, special diets, etc. Allergies are visibly posted in each classroom. If the child has a food allergy to a planned snack, an alternative snack will be offered. If a child has an environmental allergy, parents and teachers will work together to meet the needs of the individual child.

Authorization to Pick Up Child

No child will be released to a person unauthorized by a parent to pick the child up. We must have written authorization for changes in pick up.

Prevention of Abuse and Neglect (7.05(3))

- A. The Licensee shall protect all children from abuse and neglect while in the center's care and custody.
- B. The Licensee shall develop and follow written procedures for the reporting of any suspected incidents of child abuse and neglect as required by M.G.L.C. 119 & 51A. The procedures shall include:
 - 1. All staff shall report suspected child abuse or neglect. The report shall be made to the Department of Social Services pursuant to M.G.L.C. 119 & 51A, or to the licensee's program administrator or designee.
 - 2. The licensee's program administrator or designee shall immediately report suspected abuse or neglect to the Department of Social Services, pursuant to M.G. 119 & 51A.
 - 3. The licensee's program administrator shall notify the Office for Children immediately after filing a 51A report, or learning that a 51A report has been filed, alleging abuse or neglect while in the care of the day care center during a program related activity.
- C. The licensee shall cooperate in all investigations of abuse and neglect, including identifying parents of children currently or previously enrolled in the center, providing consent for disclosure information to any person and/or agency the Office may specify as necessary to the prompt investigation of allegations and the protection of children. Failure to cooperate may be grounds for suspension, revocation, or refusal to issue or renew a license.
- D. The licensee shall develop and maintain written procedures for handling any suspected incident of abuse or neglect, which includes but is not limited to

ensuring that an allegedly abusive or neglectful staff member does not work directly with children until the Department or Social Services investigation is completed and for such further time as the Office requires.

Reporting/Child Abuse/Neglect

Teachers in the Commonwealth of Massachusetts are mandated reporters: While in a professional capacity, if a teacher has a reasonable cause to believe that a child is at risk for abuse or neglect, the teacher must report such information immediately to the Department of Social Services by oral communication and by making a written report (51A) within 48 hours after such oral communication.

Trinity Preschool views the reporting and investigating process as a positive intervention for the family. If possible, the parents will be made aware of the concern and will be involved in the process of reporting.

The Director will be the Designated Reporter for the Preschool. Any teacher suspecting that a child at Trinity Preschool may be suffering physical or emotional injury resulting from abuse inflicted upon him/her, including sexual abuse, or from neglect including malnutrition, should report concerns immediately to the Director. The Director will assess the situation, and if warranted, report the suspected or alleged incident to the Department of Social Services. In the event that the teacher disagrees with the Director's determination that there is not reasonable cause to file a report, the teacher needs to inform the Director of her intent to file a report on her own.

The Department of Social Services, Child Abuse Hot Line is:

(978) 927-4600 (daytime, weekdays)

1-800-792-5200 (nights and weekends)

Observation List for Recognizing Abused and Neglected Children

Physical Abuse

- Repeated unexplained injuries, e.g. burns, fractures, bruises, bites, eye or head injuries
- Frequently complains of pain
- Wears clothing to hide injuries; may be inappropriate for weather conditions
- Reports harsh treatments
- Frequently late or absent; arrives too early or stays after dismissal from school
- Unusually fearful of adults, especially parents
- Appears malnourished or dehydrated
- Avoids logical explanations for injuries
- Withdrawn, anxious or uncommunicative or may be outspoken and disruptive
- Lacks affection, both giving and seeking
- May be given inappropriate food, beverages or drugs

Emotional Abuse

- Generally unhappy; seldom laughs or smiles
- Aggressive and disruptive or unusually shy and withdrawn
- Reacts without emotion to unpleasant statements and actions
- Displays behaviors that are unusually adult or childlike
- Delayed growth and/or emotional intellectual development

Sexual Abuse

- Underclothing torn, stained or bloody
- Complains of pain or itching in genital area
- Has venereal disease
- Has difficulty getting along with other children, e.g. withdrawn, baby like, anxious
- Rapid weight gain or loss
- Sudden failure in school performance
- Fascination with body parts; talks about sexual activities

Physical Neglect

- Repeatedly arrives unclean; may have bad odor from dirty clothing or hair
- Is in need of medical or dental care; may have untreated illnesses injury
- Frequently hungry; begs or steals food while at school
- Dresses inappropriately for the weather conditions; shoes and clothing often sized too small or too large
- Is chronically tired; falls asleep at school, lacks energy to play with other children
- Has difficulty getting along with other children; spends much time alone

Emotional Neglect

- Poor academic performance
- Appears apathetic, withdrawn and inattentive
- Frequently absent or late to school
- Uses any means to get the teacher's attention or approval
- Seldom participates in extracurricular activities

Source: Adapted from *New Light on an Old Problem*, US. Department of Health and Welfare, (DHEW Publication No. 70-1108), Washington, DC, 1978