

**Old Mill Center
for
Children & Families**

**COMMUNITY
PRESCHOOL HANDBOOK**



Old Mill Center
for Children & Families

**2021-2022
School Year**

OLD MILL CENTER FOR CHILDREN AND FAMILIES

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**OLD MILL CENTER FOR CHILDREN AND FAMILIES
WHAT IS IT?**

Old Mill Center for Children and Families is a community-based, family- oriented center helping children and families of diverse background maximize their potential through specially designed education and therapy programs.

Being in the community preschool doesn't automatically allow you access to other programs. If you would like to know more information about or need support in other programs, let me know or the front desk staff so we can direct you to the contact person of that program.

- Preschool providing a half-day program for a mixture of children 3-5 years of age with all abilities.
- Counseling services: Therapy for families with children 3-18 years of age with individual and family work.
- Support groups: variety with counselors and
- Intensive Treatment Services: A psychiatric day treatment program providing treatment for children (3-7) with emotional and behavioral struggles and their families;
- Healthy Families of Benton County: Home visiting services for parents starting with prenatal visits;
- Relief Nursery: Prevention and intervention services for families with children birth-6 including parent support groups, therapeutic classrooms, home visiting, early childhood mental health.
- Physical and Occupational Therapy: Designed to build basic motor skills and sensory skills enabling children to be successful and independent in their occupations; play, self-help skills, success in learning and social interactions.

We have a Board of Directors; these people from the community, volunteer to oversee the operations of the agency.

The Board Members for 2021-2022 are:

George Cuniff, Chair
Nick Hurley, Vice Chair
Jim Starker, Treasurer
Yazmin Brambila
Bruce Ashenbrenner
Shirley Blake, Secretary
Katie Chambers Elliott
Kelly Locey

Bronwyn Evans
Cyrel Gable
Tari Morse
Madeleine Rudolph
Judy Starnes
Amy Yardley
David Zajicek

Bettina Schempf,
Executive Director

Community Preschool Mission: Our mission is to provide high quality, individualized experiences involving parents and community in education all children in life and kindergarten readiness skills within a safe, nurturing environment.

Preschool Promise Mission: We will serve the educational, physical, social/affective needs of all children ages 3-5 in a preschool environment while supporting children to become kindergarten ready, successful, resilient children. We will work to strengthen the caregiver/child relationship to holistically meet the needs of children through home and classroom connections.

PRESCHOOL STAFF LIST

Bettina Schempf, BS, MBA Executive Director is Old Mill Center for Children and Families Executive Director. This is her 8th year in the role.

Jill Irwin, M.S. is the Operations Manager. She provides direct supervision and support to the Lead Teacher and education team. Jill has a University of Oregon master's degree in Special Education. She has been at Old Mill for 15 years.

Donna Brown, B.S. is the Lead Teacher in the Community Preschool Program. She graduated from Oregon State University with a Bachelor's Degree in Early Education with an option in Early Childhood education. Donna has been a part of the program for 15 years.

Larissa Lleras, B.S. is the Assistant Teacher in the Community Preschool Program. She graduated from the University of Oregon with a bachelor's degree in Education Foundations. She has been here for 3 years.

Tirzah Romero-Reddick is one of our Assistant Teachers in our classroom. Tirzah started nanny in 2013 and has multiple areas of engaging children since then. Her most recent experience was in our Relief Nursery Program supporting children and families. She has been with our program start March 2020.

FEES AND SERVICES

Old Mill Center for Children and Families provides programs and services for a unique blend of children's needs. Staff members have professional training, expertise and experience aimed at meeting diverse needs of young children and families. The services of these specialized staff members are available to families on fees that may be covered through personal payment or special agency payment. Additional scholarship assistance may also be available to families.

COMMUNITY PRESCHOOL CLASSROOM

Tuition for this program is determined by number of days attended and therefore individually determined with each family. Tuition includes:

- A spot for your child even when your child is sick or on vacation.
- Meals
- Screening of child's skill development.
- Family Meetings once a year to discuss child from family perspective (ASQ)—a chance to get to know each other better.
- Child's participation in 2nd Step Violence prevention curriculum during the year.
- Child's participation in Handwriting without Tears curriculum during the year.

- Handouts, resources and home visits as requested.
- Conferences regarding child progress two times annually or as requested by families.
- Special family events as scheduled throughout the year.
- Community field trips: more outside ventures

TUITION PAYMENTS

Tuition is due on the 5th of each month. Tuition will be considered late on or after the 6th of the month. A \$5.00 late fee will be applied to any payment made on or after the 6^h. In addition, if tuition is not paid in full by the 15th of the month without arrangements made, your child will be unable to continue in preschool until tuition is paid in full. It is the family's responsibility to notify the operation manager or lead teacher of any changes in financial status.

OTHER GROUPS/CLASSES OFFERED BY OTHER OLD MILL CENTER PROGRAMS

Please check the website or Old Mill Center for Children and Families Facebook page for current services.

Old Mill Center for Children and Families is committed to providing diverse, comprehensive services to children and families in order to best address unique needs. We will always attempt to ensure that lack of financial resources does not prevent the provision of needed services.

Staff can assist you in referral to other Old Mill Center programs, if needed. Please let us know what your needs are throughout the year and we can support you with how to get there.

PROGRAM PHILOSOPHY

What We Believe:

Our mission is to serve the educational, physical, and social/affective needs of all children, ages 3-5 in a preschool environment.

Old Mill Center for Children and Families services are based on beliefs we hold about children and the way in which they develop.

We believe that children need to be viewed as "whole" individuals. A child's development cannot be segmented. What affects one aspect of the child's development will also affect other aspects. Therefore, our program incorporates experiential instruction to assist equally the development of cognitive, language, affective/social, play skills and fine and gross motor skills.

We also believe that each child is unique. The strengths and weaknesses of one child are not the same as those of another child. Various aspects of development are integrated in different ways for each child. It is therefore necessary to develop services which are sufficiently diverse to meet each child's individual needs. Individual Family Service Plans (I.F.S.P."s), developmental objective of curriculum activities and the diverse and specialized training of Old Mill Center for Children and Families staff assists in meeting each child's unique needs.

When developing curriculum, instructional techniques and ancillary services, we incorporated our belief that **children continuously seek to become the best of what they are.** Children want to learn and to create. They want to achieve to their highest level and are excited by their own accomplishments. It is therefore essential that the learning environment provide situations, activities and interactions which challenge each child. We seek to provide a supportive, caring environment which frees children to experiment, to take risks and to create with the assurance that they will be accepted and successful.

If children are to learn to experiment, to take risks, to create, to explore and to problem solve, we believe that they must be provided materials in a noncompetitive and non-judgmental setting which encourages the child to be an

active participant. Children are provided activities and experiences which encourage the use of all of their senses. We have designed a program model which is experiential in nature so that children and adults are continuously interacting with each other and with material in their environment. **We believe children learn best when they are actively involved with their world through their experiences.** Children learn that they have the ability to change, create and modify their world.

Our experientially based model encompasses the belief that **children act upon, as well as react to the people and experiences they encounter in their lives.** Children seek to understand the feelings and thoughts of other children and adults. Our program encourages recognition, acknowledgment and verbalization of feelings of the children themselves and others.

Basic to healthy growth in children is a safe and secure environment. The adults and the other children in their lives must provide support and acceptance as children try new ways of doing and saying things. This safe, secure environment must include limits and reasonable rationale for what is allowed and not allowed. Love, security and limits are best provided in an environment devoid of physical and psychological harm.

We believe that **children must be seen as part of their home and family environment.** A child's first exposure to the world is through relationships encountered within the family. The child's relationships with family will continue long after our relationship with the child has concluded. Families must be regarded as major partners in the facilitation of the child's growth. Community Preschool involves families in numerous ways—activities for home, going on field trips, assisting in I.F.S.P. development, attending community informational seminars, etc.

Children must be viewed as a part of the larger community. Social experiences at home and school will lay the foundation for children's later participation in society. We plan community experiences, outside the classroom, which expose children to a larger social environment.

We believe that children do well if they can. We utilize the Collaborative Problem Solving intervention strategies to help children learn emotional regulation, communication, social, executive function and flexibility skills.

CAREGIVER PHILOSOPHY

Old Mill Center for Children and Families believes that caregivers are a critical factor in any educational program for young children.

We believe that caregivers want to be good caregivers and do well if they can. Caregivers want to raise their children in a way that will lead them toward becoming happy, healthy and well-adjusted human beings, who are productive, contributing members of society. Old Mill Center support caregivers in their endeavors at becoming the best they can become.

We believe that caregivers are people first. We must recognize that caregivers assume other significant roles in their lives. These roles may include husbands, wives, mothers, fathers, employers, employees, sons, daughters, relatives and friends, etc. The values, pressures and priorities of these many roles may be in conflict with one another, creating difficulties for caregivers to functioning in a parenting role. On the other hand, they may be harmoniously integrated with each other, supporting and enhancing their role as caregivers.

We believe that caregivers are often the products of their experiences. Caregivers bring to their own experiences in values, responses and methods they learned for life. We hope to support the strengths of caregivers in creating positive relationships with their children.

We believe that caregivers learn and grow best in a safe and supportive environment. Staff at Old Mill work to establish a warm and caring environment in which caregivers can comfortably discuss their fears, frustrations, angers and guilt, as well as joys, delights, loves and excitements in an open and trusting manner.

We believe that parents should be respected and responsible participants in their own and their child's educational process. The most successful and satisfying growth experiences encountered by caregivers are those which come from within the caregivers themselves. Caregivers are provided with an atmosphere of acceptance and respect, in which they are able to make decisions, reflect upon concerns, and problem solve a variety of personal and parenting problems.

ARE THESE AMONG YOUR GOALS FOR YOUR CHILD'S PRESCHOOL PROGRAM?

These are the primary goals which underlie the Old Mill Center for Children and Families preschool programs.

1. That all children are able to develop in a preschool setting.
2. Caregivers are actively involved in educational process because caregivers provide the most effective and long term impact on their children.
3. That all children will learn most effectively when actively involved with materials and people that are significant and self-motivating to them.
4. That staff and caregivers will work as a team to share information about children, program, family needs, etc.
5. That written information will be maintained to track children's progress, determine needed changes and to involve caregivers and others in the education and care process.
6. That services for children and families be coordinated with other agencies to insure the positive results of intervention.
7. That children be given experiences in a variety of development areas and through a variety of modalities so they can integrate new learning into old learning and generalize learning meaningfully through new settings.

These are our goals. If they are your goals. . . you are indeed in the right place!

IMPORTANT THINGS TO KNOW

YEARLY CALENDAR: A calendar will be given to you when your child enters the program. This should assist you in planning family holidays, etc. We expect children to be in attendance each enrolled day of the program. **If your child will be absent, please call Old Mill Center for Children and Families and/or the Bus Company (children receiving Early Intervention services which provides your child's transportation). Our number is 541-757-6086.**

WEATHER: Old Mill Center for Children and Families will follow Corvallis School closures due to ice or snow. During winter months listen to the local radio stations or local TV news for announcements of closures. Look up Corvallis School District 509J website for support as well. Sign up for Flash Alert through Corvallis School District at <http://flashalert.net/news.htm>

ILLNESSES: Sick children cannot be good students. **Please keep your sick child home.** They should not be at preschool until **24 hours** after experiencing a fever or vomiting. If your child becomes ill while at preschool, you will be called to take them home. If someone at Old Mill Center has a highly communicable disease, you will be informed. (More COVID related illness under COVID operations.)

GENERAL GUIDELINES FOR SICK CHILDREN

1. Some signs which can mean a child is ill:
 - A. General fussiness or crying that is unusual.
 - B. Flushed (red) face, hot, dry skin or unusual paleness (white, gray, or green look), or coldness.
 - C. Drowsiness in a usually active child, restless sleep.
 - D. Unexpected sweating, damp skin.
 - E. Watery or glassy appearance of eyes.
 - F. Runny nose, sneezing, coughing.
 - G. Hoarse or husky voice or cry.
 - H. Loss of appetite.
 - I. Nausea, vomiting, diarrhea.
 - J. Rash, bumps or breaking out of skin.
 - K. Pain in ear, head, chest, stomach, abdomen or joints. A young child may hold affected area or try to protect the area.
 - L. Seizures or convulsions during which a child stiffens or twitches.

2. If any of the following occur, the child should not come to school, and will be sent home: (Keep a phone number where a parent can be reached)
 - A. Temperature elevation over 100.5F Ear/digital:
Fever can be the first sign of an ill child.
A child's fever should be gone for 24 hours before returning to day care.

 - B. Diarrhea:
If stools are frequent and liquid (usually more than two a day) the child should be sent home for evaluation of cause, as there is a risk of spreading illness to the other children. One loose stool should not be considered diarrhea. If a child has frequent bouts of diarrhea a doctor should check for possible allergies or illness.

 - C. Vomiting:
Vomiting is the sudden, forceful, throwing-up of a feeding or water. This is different from "spitting up" which infants often do after feeding. Observe the child for other problems such as fever or diarrhea. If a child vomits, stop all food and liquid for 2-3 hours. If vomiting persists and / or other problems exist, the child should be sent home.

D. Rashes and skin conditions:

Children may get heat rashes, allergy rashes, etc., and these are no problem to other children. Most rashes that can spread disease to other children have a fever first. Anytime there is a rash with fever the child should see a doctor. If there is no fever, discuss possible source with parent. If there is a concern that the child may be ill with an infectious disease, exclude from day care until seen by a doctor.

CAREGIVERS MUST NOT TRY TO DIAGNOSE RASHES AND SKIN CONDITIONS AS THEY CAN BE THE SYMPTOM OF VERY SERIOUS ILLNESS SUCH AS MENINGITIS AND MEASLES. THESE ARE EASILY SPREAD TO OTHER CHILDREN AND CAN LEAD TO DEATH.

DISEASES REQUIRING EXCLUSION FROM DAYCARE

1. Chickenpox
2. Conjunctivitis or "pink eye"- may attend if under treatment and on antibiotics for 24 hours.
3. Infectious hepatitis
4. Impetigo- may attend if under treatment
5. Measles and Rubella (German measles)
6. Mumps
7. Ringworm - may attend if under treatment
8. Salmonella
9. Shingella
10. "Staph" (staphylococcus)
11. Streptococcal diseases
 - a. Scarlet fever
 - b. "Strep" sore-throat
12. Scabies - may attend if child has been treated
13. Tuberculosis - active, untreated
14. Ecoli 0157h7
15. Hepatitis A
16. Noro Virus

MEDICATION POLICY: Prescription and Non-Prescription

Policy OMCCF will adhere to state regulations regarding acquisition and distribution of medications, and to notifying parents of the appropriate process.

Statement All medications (prescription and non-prescription) require a Medication Permission Sheet signed by a parent or designated adult responsible for child's care.

All medication must:

1. Be in the original prescription container with an attached label stating the name of the medication, dosage, schedule to be given, and medicating doctor's name.
2. NON-PRESCRIPTION MEDICATION (Tylenol, etc.) should also be sent in the original container in as small amounts as possible.
3. Have a Medication Permission Sheet (dated and signed) with directions for administering the medication and posted in the classroom.
4. ASPIRIN: Due to published concerns regarding the dangers of aspirin to young children, staff of OMCCF will not administer aspirin without a physician's written order.
5. If the child arrives by bus, the medication must be placed in a carrier (bag or back pack) and travel beside the driver on route to school. At no time is the driver responsible for, nor allowed to touch the medication (per bus company policy). The parent or guardian must call the Center to inform staff that medication is coming with child.

6. The classroom Head Teacher, or his/her designate, will be responsible for direct distribution of medication to the child. This person distributes the medication and records the amount of medication sent, and the date and amount given on the Medication Permission Sheet.
7. Is stored in a locked container. Medication needing refrigeration will be kept in a locked box in the refrigerator.
8. When discontinued, given to a responsible party (signature again required) for return to the child's legal guardian.
9. When returned to the parent/care giver, the permission sheet will be filed in the child's file.
10. If necessary to transport, the medication will be transported in a locked container, administered and records maintained as outlined above.

CLOTHING: A preschooler's job is to explore, to move, to grow, and develop. Please see that your child comes in clothing **appropriate for school and suited for the weather**. During the year we have recess periods daily, we do provide rain suits for all children to wear when it's raining outside. Please bring a coat during the colder winter months, they can put it over or under the suit to keep warmer. Make sure all underwear is covered to protect all children from seeing inappropriate parts. We suggest sending children in outfits in which they do not have to be concerned about "getting dirty".

DRUGS, ALCOHOL AND TOBACCO: Children, staff, caregivers, etc., are not permitted to use illegal substances or alcohol, or be under the influence of such while at Old Mill Center. Smoking is not permitted in the building or 50 feet from the building. It is illegal for children to possess drugs, alcohol, and tobacco products.

COSTUMES AND TOYS: Please keep your child's toys and costumes at home. Bringing them to school can result in social problems, distractions, and breakage. Items that find their way into the classroom should be left in cubbies and taken home at the end of the day. Please talk to the teachers about comfort items needed for your child.

DANGEROUS ITEMS: Please do not let your child bring dangerous items to Old Mill Center for Children and Families. Such items include weapons, guns, knives, tools, matches, or clubs. It is most important that each child feel safe at preschool. They cannot make good choices while frightened or intimidated. Dangerous items will be taken from children and returned to the caregivers or to the appropriate authorities.

MONEY: Children are not to bring money to Old Mill Center for Children and Families. They have no need for it, and it can easily be lost or stolen.

SAFETY: Old Mill Center for Children and Families makes every effort to keep your child safe while at school. We provide staff to supervise students and extra staff are available in more difficult settings. We provide a HIGH staff to child ratio. **Children are never left alone.** Teachers monitor children by sight and through direct interactions. Children will never be left alone with a volunteer or intern. Accidents can happen and children occasionally get hurt while engaged in activities. We are trained in first aid and will contact you if medical care is needed. Staff will fill out an accident/injury report for any injury that occurs that we observe or are told about. It is therefore important that you give staff any changes in emergency telephone numbers.

ALLERGIES/FOOD: Snack is served in the preschool program. Please inform the staff of any allergies, food or otherwise special considerations your child has. Snacks and lunches are served at the designated times, however, special arrangements will be made to accommodate medical needs. Food for special occasions, such as birthday celebrations must be commercially purchased.

ABUSE OR NEGLECT: Oregon State law requires that all Old Mill Center for Children and Families staff file a report when there is reasonable cause to believe that a child has been abused or neglected. We are mandatory reporters. The report is filed with Child Welfare Division of the Department of Human Services

who is responsible to investigate the situation. Note: We are not allowed to investigate situations ourselves—that is DHS’s responsibility.

VISITORS AND VOLUNTEERS: All visitors are scheduled and accompanied by staff. They must sign in and out at the front desk. College students and other professionals may visit Old Mill Center for Children and Families to learn about the program. Special community volunteers and interns help us keep programs high quality, warm and caring. They are trained in confidentiality. Only information necessary to successfully work with each child are shared.

ARRIVAL AND DEPARTURE: The staff requests that **you bring your child no earlier than the program starting time 8:00 or no later than 8:45 unless arranged with the teacher.** Try to bring your child by this time so she/he can start their day with the group. All children must be brought into the center accompanied by an adult. **Please sign in and out each time you drop off and pick up your child.** It is also important to remain with your child until he or she has been accepted by a paid staff member. Young children may **not** be left in the car during drop-off or pick-up, no matter how brief a time is anticipated. **(Arrangements may be made with the teacher if you are responsible for other children and have them in your car at this time.)**

Aug 2021, during these months, we are asking parents to drop off outside of the facility to limit contact between multiple households to keep child, families, and staff as safe as possible. Staff will sign in and out child daily. We will keep records for any contract tracing if needed. We will monitor situations and change when ready.

It is essential that you **pick up your child on time.** This respects the teacher's planning time, personal schedule and ensures your child has appropriate activities and supervision while at Old Mill Center for Children and Families. Remember, lingering goodbyes to caregivers in the morning and delayed good byes to peers at the end of the day are actually more difficult for the children once their routine is established.

In the event that you or the individuals on the emergency form are unreachable by 3:00pm, the center’s staff is required to contact the management team and the Corvallis Police Department.

ACCESS TO POLICIES: Only the most relevant agency policies are included in the Parent Handbook. A more complete version can be viewed. Please ask the operation manager if you’d like to do this.

CONVERSATION WITH STAFF: The Old Mill Center for Children and Families staff wishes to be accessible to parents, please refrain from long conversations during classroom hours. This is an important time for focusing on the children and their needs. Please call or make an appointment for a more flexible time.

OBSERVATION ROOMS: Caregivers have diverse responses to these rooms. With this in mind our policy allows caregivers to use the room with appropriate orientation and debriefing. If you wish to use this room please make arrangements with the program manager or head teacher for you to observe.

TOILETING: Children come to Old Mill Center for Children and Families with a variety of skills and needs. Caregivers are requested to share with the teacher their child's toileting considerations and fill out the appropriate information form before school starts.

MEAL TIMES: Meal times at Old Mill Center for Children and Families are designed to be a time for children and staff to connect and to work on self-help and communication skills. Snack is served family-style. Staff sits with the children during meal time, modeling the skills they want children to learn. Children must remain seated while eating to prevent choking. Uneaten snack on plates will be discarded. During COVID, staff will limit contact with sharing and handling food. Staff must serve children snack and lunches.

OLD MILL CENTER'S COMMITMENT TO FAMILIES

Old Mill Center for Children and Families is a family-oriented program. Old Mill Center is here to serve not only your preschoolers but also needs of your active family. We are committed to providing a variety of support and information services to you. We will:

- Include you in conferences where decisions, options and progress related to your child can be discussed.
- Meet your child's education and care needs through the classroom.
- Maintain regular contact relating your child's experience at school through AEPS three times a year and newsletters.
- Provide information regarding child development and parenting skills of interest to you.
- Provide supplemental home activities to help meet your child's developmental needs as needed.
- Take your input into consideration during program planning, Parent Leadership Council
- Offer assist in accessing support services to meet the unique needs of your family.
- Staff is committed to meet your child's education and care needs through the school program.
- Always available to hear your ideas, thoughts, suggestions and concerns.

CAREGIVER JOB DESCRIPTIONS

We invite caregivers to help be a part of the classroom, its running and maintenance. The following is a list of possibilities for helping. If you have skills you'd like to share, please let us know.

EQUIPMENT REPAIR: Upkeep of equipment in school and the outdoor play area.

FIELD TRIPS: Driving your child to and from field trips throughout the year. (limited field trip opportunities during COVID)

OUTSIDE PLAY AREA UPKEEP: Sweep and straighten equipment.

CLASSROOM PHOTOGRAPHERS: Willing to use a digital camera to take pictures for special events—send them to the lead teacher for use in end-of-year experience books.

CUT-OUTS: Check with the teacher about these projects. They include a variety of hand projects to do in front of the TV or relaxing in the evening.

PUBLIC LIBRARY BOOKS: Choose books from the public library to match the themes in the classroom. Be responsible for delivery and return of books. Consult with children's librarians or browse the shelves on your own.

FUND RAISING EVENTS: Throughout the year, there will be opportunities to help plan and work at our various fundraising events that help support programs and scholarships. Biggest opportunity is our annual Auction, first day of May.

OMC COMMITTEES/BOARD: There are opportunities for parents to have leadership roles within the organization. Please let us know for more information.

CAREGIVER'S RIGHTS

The following is a list of your rights according to federal and state rules and regulations (45 CFR 121a.511, ORS 343.163, ORS 343.173 and OAR 581-15-075). The intent of these rules and regulations is to keep you fully informed concerning decisions about your child, as well as your rights should you disagree with the decision. An explanation of rights is available at Linn-Benton ESD or your local school district office.

1. Right to inspect and review your child's records
2. Right to obtain an independent evaluation
3. Right to refuse consent for pre-placement evaluation
4. Right to refuse consent for initial placement of your child in a program providing special education and related services
5. Right to request that your child's records be changed
6. Right to refuse consent for the use of your child's record
7. Right to ask for an impartial due process hearing
8. Right to request a list of the of the types and locations of educational records collected, maintained, or used by the school district
9. Right to request the destruction of your child's records

CHILDREN'S RIGHTS

A child has the right to a committed environment (home, community, Old Mill Center for Children and Families) regardless of their response to it. A committed environment takes the following form:

1. Basic nutrition
2. Basic clothing
3. Basic shelter
4. Basic hygiene
5. Sensitivity and concern for feelings
6. Supervision - protection from harm
7. Affection
8. Attention
9. Fun, happiness, joy
10. Opportunities for learning; academically socially, inter-personally
11. Information
12. Predictable and consistent environment
13. Individuality
14. Dignity
15. To BE: to experience success and failure in learning limits of strengths and abilities
16. Experience failure without severe environmental reaction
17. Privacy
18. To reasonable decision making on issues directly affecting them
19. To be heard
20. Choice of personal address when age appropriate

DAILY CLASSROOM SCHEDULE

Our classroom is designed to provide all children with the opportunity to develop a strong base of pre-academic, physical and social skills in a supportive, enjoyable and developmentally appropriate environment.

The daily classroom schedule is consistent to assist children in developing concepts of time and routine. It provides the security of knowing what comes next and what choices are available.

The daily schedule is designed to provide both an optimum learning sequence and environment. We have attempted to alternate experiential and structured learning time, time for small and large groups and quiet and active times.

Arrival of Children/Choice Activities

Most children are dropped off and picked up by a caregiver. **We require caregivers to come into the school with their children and sign them in/out.** This allows for daily contact between staff and families, which helps develop open communication and trust. Staff, interns and volunteers greet parents and children, help with coats, and insure a warm, friendly beginning and ending to each child's school day. Activities will be placed around the classroom. After washing their hands, they are able to choose an area in which they would like to play. Caregivers have the choice of saying good-bye to their child at their cubby or helping transition into the classroom. The activities that have been selected focus on the socialization of children. Each activity is chosen to accommodate the developmental level of each child.

Meal Time

Snack is served family style. After washing their hands, children seat themselves at assigned places. Adults sit with small groups of children enabling them to model social, self help and language use. Each child cleans up their snack spot encouraging the ideas of being responsible for one's own "mess"! Children are encouraged and assisted in making responsible food choices. Snacks help develop a sense of responsibility and confidence in the area of self-help skills. Activities such as pouring, spreading and using utensils are emphasized. Children also learn about proper nutrition and about a variety of foods, textures and tastes. Snacks serve as a motivator for most children and this is an excellent activity for language stimulation. The semantic skills of object permanence, disappearance, recurrence and labeling, asking and answering questions are all essential language skills which are easily elicited at snack time. (See COVID operations, looks different)

Families will receive a copy of the monthly snack and lunch calendar each month. The menu is posted outside the classroom and agency kitchen. **Cheese, fresh fruits & vegetables, juice, crackers, yogurt, and whole grain crackers are samples of some of the snack foods used. Burritos, salad, salsa, fruit is an example fo lunch we can have throughout the year.**

Note: We follow USDA food guidelines. Sugar is avoided. **Please be sure to let us know if your child has any food allergies,** so we can make any substitutions if necessary.

Celebrations

If a caregiver wishes to provide a special treat or snack in recognition of their child's birthday or other special day they are welcome to do so. We require these snacks to be purchased at a grocery store or commercial bakery. Due to the possibility of allergies, non-food items, such as stickers would also be appropriate. Please make prior arrangements with your child's teacher.

Circle Time

Children, staff, and volunteers come together to greet each person present and learn one another's names. During this time children learn to participate cooperatively in large group activities. Cooperation, turn taking, leadership, creativity and imagination are emphasized. Each child has the opportunity to experience being a performer as well as part of an audience, and the opportunity to feel part of a group. Circle time activities include: Music, songs, CD's, puppets, musical instruments, dramatic play, stories, obstacle courses, nursery rhymes, instruction for specific activities such as field trips or other large group projects. Guest presentations such as a dentist on tooth care or a firefighter on fire prevention may also occur at this time. This is a great opportunity for parent involvement bringing in your job to teach children. Classroom adults attend circle so they can provide laps and support for children who still need assistance attending to and participating in songs, finger plays, etc., and modeling good listening skills.

Station Time

Children participate in station time to develop skills in the areas of language, cognition, and fine and gross motor. We use a curriculum written and published by Old Mill Center for Children and Families called PICNIC--Preschool Interactive Curriculum for the Natural Integration of Children. A non-structured activity may also be available for children who finish activities early. Activities are constructed around a monthly theme and are designed to assist children in developing skills outlined in our curriculum. Additional resources are utilized in developing an early childhood program that supports our philosophy. Activities are also intended to assist children in affective/social development; an important overriding goal of our program philosophy. These stations provide many opportunities for adults and peers to model language, problem-solving, sharing, turn taking and playing cooperatively. Children's individual skills and needs are considered when planning and implementing station time activities.

Typically, three to four children participate in an activity center at one time. Up to six or seven children can be in a group depending on the number of adults in the room during that time. Each activity is facilitated by an adult-- a staff member, volunteer; intern, as needed, for doing planned activities. It is very important that the teachers and other adults are perceptive to the mood and needs of each child to best meet the needs of all children. Data is taken and this information shared in progress notes and used for Assessment Educational Processing System (AEPS).

Supervised Outside Activities

Outdoor and indoor movement activities are emphasized for children. We are outside rain or shine. These activities enhance body awareness, balance, temporality, spatial awareness, fine and large motor control and eye/hand coordination to develop total body coordination and self confidence. Climbing, running, jumping, sliding, rolling, tricycles, ball throwing catching, swinging and balance beam experiences are included as skill development activities. This time is child directed. Our outside area includes bikes/trikes, balls, climbing structures, dramatic play, circle cycle, play houses, swings and a sandbox. If a child needs to develop ball skills, climbing skills, or pedaling skills, staff members may encourage and assist the child in such involvement. Bubble tables and water tables can also be an option during warmer, nice weather times.

Nap/Rest time(1:05-1:25pm)

Children will each have an opportunity to lay down and rest for 20 minutes. Each child will have their mat and their quillow to rest with during this time. Soft music will be playing to create a calming soothing environment. Lights will be turned off and blinds will be down. Adults will be available to read stories to 1 child at a time to allow children some down time during the day. Other quiet activities will be available to support children to keep quiet for those that sleep.

CLASSROOM MANAGEMENT

The philosophy of classroom management at Old Mill Center for Children and Families is based on respecting the dignity and worth of each individual. We try to teach appropriate ways to express anger and other feelings and use encouragement and structure to prevent inappropriate behavior in the classroom. We do not believe in punishment but work with children to assist them to accept the responsibility for and consequences of their actions.

When working with children, here are some methods we employ to promote positive interactions, safety, learning and fun:

- Make clear, simple statement of what you want to child to do:

Best to say...

"Paint on the paper"

Instead of...

"Don't paint on the table"

- Use a calm, pleasant tone of voice.
- Show enthusiasm for the activity at hand.
- Use humor and playfulness to keep things positive. For example: if children are wiggly, talking at once and not listening to instructions, make a game of having them touch their nose, touch their ears, look at the ceiling, etc., to focus them. Or, if a child does not wish to participate, create a silly situation to get them involved like "we better get this play dough put away before a big, hungry giant comes and eats it".

- Describe positive behaviors you see: "Look at the way Suzie is sharing her blocks with Bill".

- When giving directions, use the child's name, then give a clear, action oriented direction.

Best to say...

"Bob, hold on tight"

Instead of...

"You might fall off, Bob, so be sure to hold onto to swing tightly with both hands".

- Give directions one at a time.
- Ask one question at a time.
- When possible, give choices. "Would you like red paper or blue paper?"
- Make it clear when there is no choice.

Best to say...

"It is time to get on the Bus

Instead of...

"Would you like to get on the bus?"

- Use encouraging, rather than praising language.

Best to say...

"You look like you're really having fun with those paints"

or

"That is a really tall tower you are painting"

Instead of...

"That is a good building"

or

"You are a good boy"

If a child continues to have difficulty following directions, here are some further alternatives.

- Describe the child's feelings and set limit on the behavior:

"I can see you are angry--you don't like having to share the crayons. You need to use your words, not your body, to show you are mad".

- Give choices:

"You can stand up by yourself, or I will help you stand up".

- Problem solving:

"There is one blue trike and two kids that want to use it. What are your ideas?"

- Try again:

If a child grabs a toy from someone else, take the toy from the child and have them practice asking for what they want rather than grabbing. "We are going to try this again...."

TRY: REMINDER, WARNING AND CONSEQUENCE: REMEMBER: Children do well if they can!

1. Remind child of the rule ("We eat at the snack table.")
2. Provide the child a warning about the behavior and what will happen if the behavior occurs again ("This is your warning. Eat at the snack table. If you play again, you can be done—you will clear your place and put your dishes away.")
3. Consequence: If the behavior occurs again, follow through, kindly, but no extra chances. Remind child he has had a reminder, warning, and now you are carrying out the consequence.

TAKING A BREAK: The need to take a break to gain composure at Old Mill Center for Children and Families is not regarded as punishment. Breaks are merely a chance for children to calm down, think about what has been happening and be assisted to make more appropriate behavior choices. Procedure for taking a break is:

1. Child has been unable to respond to other methods of redirection.
2. Let child know that next time she/he needs reminder she/he will have to take some time to calm down.
3. State why you are asking the child to take a break: "Hitting other kids is not OK. You need to calm your body and think about what happened".
4. Wait for several minutes (usually 1 minute per age of the child), and then go ask child if she/he is calm and ready to talk. This can take as long as is necessary. Then discuss what happened and what can be done differently the next time.

SAFETY PRECAUTIONS

Caregivers and staff are responsible for every child while in attendance at Old Mill Center for Children and Families. Plans should include the following precautions:

1. Emergency phone numbers for each child are kept in a folder by the phone in each classroom, in an emergency file in the office and in the child's file.
2. Exits must be kept clear at all times. They should not be obstructed. Remember, windows can also be used in an emergency. Study the evacuation plan.
3. For emergencies such as fire, it is important to remain calm and remove children from the building as quickly as possible using the closest exit doors, or windows, if needed. We practice fire drills monthly and alternative drills every other month.
4. The location of fire extinguishers should be noted by all adults. Ask teachers to show their placement throughout the building.
5. The alarm located in the lobby will be used to alert the group to immediate danger such as a fire.
6. A well-stocked first-aid kit is available in each classroom.
7. Any accident, no matter how slight, should be reported to the teacher. Accident reports will be completed.
8. Smoking in the building or while working with children is prohibited.
9. There should be at least two adults present at all times with the whole group in case an emergency should arise.
10. Show children how to safely use equipment. An adult should be near, ready to give help and encouragement whenever slides, swings, and climbing apparatus are in use. Carpentry tools are used only with adult supervision.
11. Prevent misuse of equipment. Blocks are to build with, and not to use as weapons. Sand should not be thrown. Appropriate use of trikes/bikes wagons and scooters should be encouraged at all times (helmets for 2-wheelers & scooters.) No crashing. Scissors should be used with appropriate materials and under supervision. Sticks and other sharp pointed objects should be put way out of reach of the children. Playing with guns or using objects to represent guns is prohibited.
12. Be alert and watch the children at all time. Know the number of children present each day. Count heads prior to leaving the building and when returning.
13. Be alert to signs of illness, fatigue, or listless play. If you see such signs, notify a staff member immediately.

Mandatory Reporting of Abuse or Neglect of a Child

Policy In accordance to Oregon law, all employees must report or cause a report to be made when there is a reasonable cause to believe that a child has been abused.

Statement It is the responsibility of staff to report suspected incidences of abuse and neglect as required by Oregon Revised Statute 419B-005 to 419B-015 and Senate Bill 1515 Section 36 (Oregon Laws 2016, Chapter 106) and to document the abuse or neglect immediately through OMCCF established procedures and forms. All parents, care givers and foster parents are informed of this responsibility.

Procedure Staff working directly with the children should be aware of the signs in the case of suspected abuse/neglect. Staff will be given training of child abuse recognition, policies and procedures on an annual basis. Training will include the psychological aspects of abuse and family dynamics associated with child abuse.

Staff will be aware of the following definition and requirements in ORS 419B (see full text below) and Senate Bill 1515:

- Child means an unmarried person who is under 18 years of age

- Types of abuse include :

1. Neglect
2. Physical Abuse
3. Sexual Abuse
4. Mental Injury including Verbal Abuse and Bullying
5. Threat of Harm
6. Involuntary seclusion
7. Wrongful use of physical or chemical restraint
8. Financial exploitation
9. Abandonment

- Report to:

Department of Human Service Child Welfare or law enforcement personnel.

- Required content of report:

1. names of child and abuser/s
2. addresses of the child and parents or those having care of the child
3. child's age
4. nature and extent of abuse
5. timing of the abuse
6. explanation given by parent/care provider or client for the abuse
7. other pertinent information
8. any follow up by DHS after the report

- Staff give the completed report to their manager for review.

- Reports are reviewed by the respective program manager.

- All reports are stored in a centralized and secure filing cabinet after program manager review.

- All reports are reviewed quarterly by the Quality Assurance Committee

Mandatory Reporting Training will be renewed as required under program accreditation and licensing.

Definitions of Abuse: As used in ORS 419B.005 (Definitions) to 419B.050 :

(1) "Abuse" means:

(A) Any assault, as defined in ORS chapter 163, of a child and any physical injury to a child which has been caused by other than accidental means, including any injury which appears to be at variance with the explanation given of the injury.

(B) Any mental injury to a child, which shall include only observable and substantial impairment of the child's mental or psychological ability to function caused by cruelty to the child, with due regard to the culture of the child.

(C) Rape of a child, which includes but is not limited to rape, sodomy, unlawful sexual penetration and incest, as those acts are described in ORS chapter 163.

(D) Sexual abuse, as described in ORS chapter 163.

(E) Sexual exploitation, including but not limited to:

(i) Contributing to the sexual delinquency of a minor, as defined in ORS chapter 163, and any other conduct which allows, employs, authorizes, permits, induces or encourages a child to engage in the performing for people to observe or the photographing, filming, tape recording or other exhibition which, in whole or in part, depicts sexual conduct or contact, as defined in ORS 167.002 (Definitions for ORS 167.002 to 167.027) or described in ORS 163.665 (Definitions) and 163.670 (Using child in display of sexually explicit conduct), sexual abuse involving a child or rape of a child, but not including any conduct which is part of any investigation conducted pursuant to ORS 419B.020 (Duty of department or law enforcement agency receiving report) or which is designed to serve educational or other legitimate purposes; and

(ii) Allowing, permitting, encouraging or hiring a child to engage in prostitution as described in ORS 167.007 (Prostitution) or a commercial sex act as defined in ORS 163.266 (Trafficking in persons), to purchase sex with a minor as described in ORS 163.413 (Purchasing sex with a minor) or to engage in commercial sexual solicitation as described in ORS 167.008 (Commercial sexual solicitation).

(F) Negligent treatment or maltreatment of a child, including but not limited to the failure to provide adequate food, clothing, shelter or medical care that is likely to endanger the health or welfare of the child.

(G) Threatened harm to a child, which means subjecting a child to a substantial risk of harm to the child's health or welfare.

(H) Buying or selling a person under 18 years of age as described in ORS 163.537 (Buying or selling a person under 18 years of age).

(I) Permitting a person under 18 years of age to enter or remain in or upon premises where methamphetamines are being manufactured.

(J) Unlawful exposure to a controlled substance, as defined in ORS 475.005 (Definitions for ORS 475.005 to 475.285 and 475.752 to 475.980), or to the unlawful manufacturing of a cannabinoid extract, as defined in ORS 475B.015 (Definitions for ORS 475B.010 to 475B.545), that subjects a child to a substantial risk of harm to the child's health or safety.

(b) "Abuse" does not include reasonable discipline unless the discipline results in one of the conditions described in paragraph (a) of this subsection.

(2) "Child" means an unmarried person who:

(a) Is under 18 years of age; or

(b) Is under 21 years of age and residing in or receiving care or services at a child caring agency as that term is defined in ORS 418.205 (Definitions for ORS 418.205 to 418.327, 418.470, 418.475, 418.950 to 418.970 and 418.992 to 418.998).

GRIEVANCE PROCEDURE: At OMCCF we attempt to be fair with parents and children in all circumstances. If there is a time you feel you or your child is being treated unfairly, or if you have a concern, you have the right to get it straightened out. We recommend first talking to the teacher; then program manager. Grievances may be filed.

GRIEVANCE PROCEDURES

This process is not appropriate for:

- a. Issues which have been or are currently being adjudicated in a court of law;
- b. Issues which are a term or agreement in the agency contract with the Oregon Department of Human Resources;
- c. Issues regarding your child's special education program. If your child has an IEP or IFSP there is a different process available to you about which staff may provide information.

The use of this process does not interfere with your right to file a complaint with the Department of Health and Human Services, Office of Civil Rights Region X, 2201 Sixth Ave., Seattle WA 98121.

When you have a problem or complaint with Old Mill Center for Children and Families (OMCCF):

Differences of opinion may occur between OMCCF and its individuals or their parents/legal guardians. If you are unhappy about you or your child's treatment and/or education process, or if you feel you are being treated unfairly, there are things you can do to resolve the problem. It is always the goal of OMCCF to address the needs of you and your child and to resolve differences.

Step 1. You are an important player in you/your child's treatment and/or education. Try to learn as much as you can about OMCCF and the plan for you/your child. If you don't understand something, if you disagree with something, or if you have a suggestion or a concern, please bring it up as soon as possible.

Step 2. If you have attempted to resolve differences with OMCCF informally and have not been successful, you may use the grievance procedure outlined here.

If you have a disagreement with OMCCF, tell the staff what your concern is and what you would like to have happen. They will talk with you and try to work out a solution to the issue. The staff will write a report on the situation to be placed in the school or clinical record of your child.

Step 3. If that does not work, you can meet with the Executive Director. Write a request for a meeting to the Executive Director. This letter should state your concerns, what you have done to try to resolve the issue, and what you would like to have happen (see attached Grievance Form). This meeting will be at an agreed upon time and place, and will give you a chance to tell the Executive Director what you feel is wrong and what solution you are looking for. The Executive Director will give you a written response within 30 days of the meeting. *Expedited Grievances: In circumstances where the matter of the grievance is likely to cause harm to the individual before the grievance procedures outlined in these rules are completed, the individual, or guardian of the individual, may request an expedited review. The Executive Director must review and respond in writing to the grievance within 48 hours of receipt of the grievance. The written response must include information about the appeal process.*

Step 4. If your concerns are still unresolved, you may appeal to the president of the Board of Directors. The Board is comprised of individuals from the community who bring a variety of experiential and professional perspectives. This formal, written appeal must be received within 30 days after you received the response of the Executive Director. This written appeal must include a description of your concerns, what has happened to try to resolve the issue, and a description of what action you believe is needed. We will explain this process to you and provide assistance in writing the letter, if requested. However, you will have to pay your own costs and attorney fees should you seek counsel. You will be asked to consent to public release of information by the agency should you publicly

share information on the case. The Board may review the action to date, interview interested parties, review records, and consider any information that concerns the grievance issues. This review will begin within 30 days of receipt of your written request. The Board will prepare a written response to you within 10 working days after the review.

Step 5. You may also contact any of the following agencies for additional support or information: Oregon Department of Human Services, Addictions and Mental Health Division at 503-945-5763, Benton County Mental Health at 541-766-6835, Disability Rights Oregon at 503-243-2081, and IHN CCO at 541-768-4550

Step 6. Appeals: Individuals and their legal guardians, as applicable, must have the right to appeal entry, service conclusion and grievance decisions as follows:

- (a) If the individual or guardian, if applicable, is not satisfied with the decision, the individual or guardian may file an appeal in writing within ten working days of the date of the program administrator's response to the grievance or notification of denial for services as applicable. The appeal must be submitted to the Benton County Mental Health Director in the county where the provider is located or to the Addictions and Mental Health Division as applicable;
- (b) If requested, program staff must be available to assist the individual;
- (c) The Benton County Mental Health Director or Addictions and Mental Health Division, must provide a written response within ten working days of the receipt of the appeal; and
- (d) If the individual or guardian, if applicable, is not satisfied with the appeal decision, he or she may file a second appeal in writing within ten working days of the date of the written response to the Addictions and Mental Health Assistant Director.

OLD MILL CENTER FOR CHILDREN AND FAMILIES TOILETING

POLICY It is the policy of OMCCF to discuss each individual child's toileting needs with parent(s), guardians or care providers. Individual toileting procedures will be clearly outlined and reviewed with all appropriate staff members.

STATEMENT OMCCF recognizes that all children gain toileting skills on individual time lines. We recognize that children who are training or are trained may need assistance with the toileting process.

PROCEDURE

- Diapering: In the Community Preschool program, parents, guardians or care providers are asked to provide diapers and baby wipes for their child(ren) on an on-going basis. Diapering materials are kept in a cubby marked with the child's name near the changing table in classroom bathroom. In the Relief Nursery classrooms, diapers and wipes are provided at no cost to children. Children will wash hands once diapering has been completed. Soiled diapers will be bagged and disposed of in the lidded diaper pail and the diaper pail will be emptied at the end of the class session. Staff will practice universal precautions.
- Toileting: Each individual child's toileting needs are determined and pre-arranged with parents, guardians or care providers and reviewed with appropriate staff members. Children in diapers will be changed at scheduled times and as needed. Staff aids children as needed, and children will wash hands once toileting has been completed. Staff will practice universal precautions when assisting children with wiping. At times children may struggle with toileting. Staff will utilize different strategies to encourage compliance, such as doing standing diaper changes when wet only, utilizing pictures to indicate diaper/toileting time or transition/comfort objects during the diaper change. Staff will not force a child to have a diaper change, but rather work with the child to encourage compliance. If a child has a soiled diaper at the end of the day due to the inability to comply, the parent/care provider picking up the child will be notified and have the opportunity to change the diaper or support a staff member changing the diaper before leaving.

- Accidents: In the case of an unexpected toileting accident, staff will assist the child in the clean-up process in a manner recognizing each child's need for privacy and respect. Staff will notify parent/caregiver when a toileting accident occurs.

GUIDELINES FOR DISCIPLINE OF CHILDREN

The goal of discipline at Old Mill Center for Children and Families is to help children learn to control their own behavior and act in ways appropriate for their age and situation. There are several things we do to help children make good choices about their behavior:

1. Clear rules: Children know what we expect, what is allowed, what will happen if they break rules. We utilize reminder, warning consequence as a tool for creating understanding of the rules and expected behaviors.
2. Positive reinforcement: We plan for success, recognize accomplishments, praise, grant special privileges, give "points" or rewards for good behavior.
3. Problem solving strategies: We actively teach and practice the problem solving steps as per the 2nd Step Curriculum and collaborative problem solving techniques.
4. Other strategies: We may choose to ignore the behavior, move closer to the child, request the child to change his/her behavior, rearrange the situation, tell the child what will happen if the behavior does not change, give them a command to change their behavior, or permit the child to remove him/herself to a place where they can rethink the situation and gain better control of self.
4. "Taking a break" (sometimes referred to in other environments as "time out") is sometimes necessary to provide time away from the group for a child to regain self control, to refocus, to calm down and to consider the consequences of an action or to consider more appropriate ways to interact and/or communicate with peers and adults in the treatment and educational settings. To ensure safe and consistent use of breaks, only trained staff may order, review, supervise and carry out the break process. Old Mill Center staff routinely monitors their own feelings to ensure that breaks are carried out in a safe, caring yet firm manner. A staff member will always debrief a "break" with children prior to their re-entering the group to ensure that the child is ready to return. A typical time out lasts anywhere from 2-5 minutes, unless a child is having difficulty regulating his emotions. In this instance the length of time relates to how long it takes the child to calm down and debrief with an adult. The child will always remain within view of a staff member.
5. A child who is hurting themselves, others, or destroying property may need to leave the group and be removed to a safe space by a staff person. In the event that a child has to be stopped from hurting himself or others, a brief method of "catch and release" may be used by staff. In other words, it is a brief, hands-on physical engagement to remove the child to keep the child and others safe. Staff monitor children at all times and assist the child in preparing to rejoin the program activities as soon as possible (as in # 4 above.) A record is kept each time a child is removed from the classroom. If a child cannot be controlled by staff, the parent may be called to take the child home until an individual behavior plan can be adjusted or developed.
6. No chemical or mechanical restraints will be used with the children.

OLD MILL CENTER FOR CHILDREN AND FAMILIES OBSERVATION ROOM POLICY

Policy It is the policy of OMCCF to provide opportunity for program observation by parents, professionals, paraprofessionals, volunteers, trainees, and program evaluators. Guidelines for program observations are designed to protect the privacy of individuals observed and to ensure that information obtained is utilized in a manner that is beneficial to the parent(s) and child being observed and/or to enhance overall program effectiveness.

Statement OMCCF recognizes the value of observational information to parents and staff as a means of monitoring and improving program development and effectiveness.

Parents are invited and encouraged to observe their child to enhance knowledge and understanding of program structure, activities, and philosophy. In addition, observation can be enjoyable and often results in increased awareness of a child's abilities, special talents or traits as well as identifying needs.

Staff of OMCCF and other professionals utilize observational information to continually monitor and design appropriate individual child programs, to improve classroom management skills, to adjust and modify program procedures and structure in a manner that enhances the development and success of each child enrolled.

When appropriate, professionals who are not regular classroom personnel, may observe children for a specified purpose. Parental permission is obtained when the observation is focused on an individual child. Observations are also done for the purpose of program evaluation or providing information about program structure and procedures. Persons involved in a program evaluation observation sign a statement assuring confidentiality of individuals observed.

OMCCF respects the right to privacy of each parent and child. In order to protect individual confidentiality and to ensure that information obtained through observation is understood in context of the program structure, all observers who are not regular classroom staff members are asked to sign a "Confidentiality for Observers" form, which is an agreement not to share information outside the classroom or program, and indicates the purpose of the observation. Each staff member and volunteer receives guidelines regarding confidentiality and signs an agreement to maintain the confidentiality of children and families.

Procedure The Executive Director, Treatment Coordinator, Education Coordinator, Teachers, and Therapists are available to provide access to other OMCCF personnel. Use of the observation room for observers who are not OMCCF staff will be scheduled by the Treatment Coordinator or Education Coordinator. All observers must be accompanied by an OMCCF staff member.

Classroom personnel will be notified that an observation is in progress by the observer placing the "observer" sign in the classroom. The sound system is to be turned off and the blinds closed when access to adjoining classroom or play therapy room is not appropriate. An Observation Record is to be signed for EVERY observation (Parents AND Staff).

Parent Use Of Observation Room

OMCCF has an "Open Door" policy for program classroom(s) and welcomes parents in the classrooms. OMCCF wants the transition from home to school and back again to be comfortable for parents and children alike. Therefore, cheery greetings, comments about activities, and information about the child's day are welcome and helpful! Parents are asked to please be aware of the daily classroom schedule and recognize that staff's first commitment is to the children and therefore, staff may not be able to leave the children or to disrupt the regular classroom routine to talk or meet with parents without prior arrangements. Parents are invited to contact the teacher to set up time when she/he can be available to address questions, concerns, or just provide an "update."

Due to the isolation of the observer and accessibility of information related to other children, parents are asked to make PRIOR arrangements with the Treatment Coordinator, Education Coordinator, or teacher before using the observation room. In this way, a staff member can be available to provide clarification and information regarding the observer's OWN child and questions regarding policies or procedures can be addressed in context as they occur. Parents sign a "Confidentiality for Observers" form and complete the Observation Record. The staff member will set up the sound system and eliminate access to the adjoining classroom or play therapy room as appropriate.

Staff Use Of Observation Room

OMCCF staff members observe "at will," on a "need to know basis." Information obtained is to be utilized for the basic purpose of individual child evaluation and development, as well as development of staff and program policies and procedures.

Use Of Observation Room As A 'Quiet Place' For Children

When it is in the best interest of a child to have opportunity to move out of the classroom into a smaller, less busy space, the observation room may be utilized for this purpose. The door to the observation room will remain fully open whenever a child and staff member are using the observation room for this purpose.

CHANGE OF PLACEMENT

Policy OMCCF provides support and assistance to parents in the referral process when it has been determined through the Placement Review Process that OMCCF is not the most appropriate or least restrictive environment for their child. Parents and OMCCF staff will determine whether it is in the child's best interests based on the program's ability to meet his/her needs to continue in the current placement until alternate resources can be established.

Statement When the process for Review of Appropriate Program Placement has resulted in a recommendation for change of placement, the staff of OMCCF will work with parents and involved professionals to identify the most appropriate placement, assist in referral procedures, and facilitate a plan for the child's successful transition to an appropriate program. The issues of parental permission, parental involvement, and confidentiality will be adhered to in each stage of the referral process.

Procedure If further evaluation is recommended, additional parental permission(s) for observation(s) by staff of possible alternative resources may be requested as well as permission(s) for exchange of appropriate information and records. If parents do NOT support request for additional evaluation, staff and parents will explore possible options and come to a decision regarding the child's continued placement at OMCCF. If parents DO support the request for additional evaluation, parents will have the opportunity to meet with staff of the referral program or agency and become informed about the nature of services suggested. Parental permission for appropriate observations, evaluations, and exchange of pertinent information and records will be obtained. Staff from the original OMCCF placement will provide referral information and support as requested by the child's parents to facilitate the transition process.

A. Intensive Treatment Service Plan

When the Education Coordinator and classroom staff identify ongoing problem behavior and the following has taken place:

1. Classroom staff has consistently implemented strategies such as following Behavior Intervention Guidelines.
2. Collection of some anecdotal and hard data has taken place for a period of up to two weeks.
3. Parents have been made aware of the issues and have had input in problem solving strategies.

Then: The Education Director and lead teacher will meet with parents about the need for having the child observed by Treatment Coordinator. With approval, the child is observed by the Treatment Coordinator. Following the observation, the Treatment Coordinator debriefs with the Education Coordinator and

classroom staff at one of the weekly staff meetings. Written recommendations emerge from this meeting. Recommendations could be: continuing with classroom strategies, setting up a behavior plan, seeking a more formal evaluation, consulting with Clinical Director, referral to outpatient therapy. When a Review of Appropriate Program Placement has resulted in a referral to the outpatient therapy, which has resulted in referral to ACIST for wrap around services, parents will have the opportunity to meet with staff to become informed about the nature of services suggested. The ITS Therapist will meet with parents and other program staff as appropriate to explain the intake process and procedures as well as to clarify the program services and expectations. If, after the parents have been informed of the nature of services provided they wish to proceed with the referral and the ACIST team feels ITS is appropriate and authorizes placement, a time to meet with the program's medical director will be scheduled. At this time a mental health assessment and a developmental screening will be completed. Policies, procedures, services, and expectations will be further clarified. If there is an immediate opening available, the family and child will complete the orientation process. If no opening is available, the child will be placed on the waiting list.

If the intake process results in determination that the child is appropriate, but there are no available openings, the parents and OMCCF will determine whether it is in the child's best interests based on the program's ability to meet his/her needs, to be maintained in the current placement or to assist the family in seeking alternate placement until an opening is available.

B. Outside Referral If parents and OMCCF staff agree on the need for referral and have identified a placement option, a meeting of parents, OMCCF staff, and staff from the suggested placement, will be held to clarify the services needed, determine appropriateness of the referral, explore possible goals, define necessary procedures and clarify the intake process. If the referral is deemed appropriate, the intake process will proceed as required by the identified agency. OMCCF will participate in coordination of information and procedures as appropriate. If the intake process results in entry to the referred program, the referral process is considered complete. If there is no opening available, the child is placed on a waiting list, OMCCF will work with the parents, and the new placement to determine whether it is in the child's best interest to be maintained at OMCCF or whether OMCCF and/or the new placement will be to assist the family in seeking alternate placement until an opening is available. If the referral is deemed inappropriate, OMCCF is not an appropriate resource, and the parents and OMCCF are unable to find an appropriate resource, OMCCF will assist the parents in seeking assistance through the appropriate Mental Health Office and/or Educational District as well as other available community resources.

REVIEW OF ADDITIONAL SERVICES

The intent of this plan is to help staff better serve a child who, with regular program support and services, is having a difficult time succeeding in the preschool program.

Services and supports offered all children in the program:

Highly trained staff

Integrated program

High adult to child ratios

Emphasis on social-communication skills

Screening and assessment and evaluation of skills

Small group work

Developmentally appropriate curriculum

Family Meetings and Family conferences

Snacks

Violence prevention through 2nd Step Curriculum focusing on feeling identification in self and others, self-regulation and problem solving skills.

Collaborative Problem Solving to work through social emotional problems.

When a child is exhibiting challenging behaviors and having difficulty succeeding in the classroom setting then staff immediately needs to begin a service review process. Signs of significant behavioral problems could include but are not limited to:

- Behavior strategies not working
- Teachers beginning to make individual accommodations such as an increase in 1:1 attention
- Increase in number of breaks due to aggressive and non-compliant behavior
- Teachers are concerned about future need for time out of the classroom

If one of more of these occur then staff discuss child during the next scheduled weekly staffing. If all agree that the child and classroom situation warrant a closer look then we begin tracking the child's behavior for 2 weeks and inform parents of this decision.

Behavior Tracking consists of:

- Data collection (probes and anecdotal) specific to child's behavior
- Possible observations from either the observation room or the classroom by:
 - Program Manager
 - Other Program Manager
 - Clinical Manager
 - Caregiver(s)

A form will be provided to help direct and facilitate the observation.

At the end of two weeks, the data is reviewed in staffing and the child's current behavior is discussed. If staff still feels that the child is exhibiting extremely challenging behavior, then we set up a time to meet with caregivers to review data collected and discuss additional support services available.

After this staffing, the Program Manager calls the caregivers and sets up a time to meet. At this team meeting, we provide what we call, a "mapping", examining the child's strengths and likes, family hopes and dreams, family fears and concerns, and then strategies and an action plan to help the child and family.

After 6-8 weeks, the team meets again to discuss progress and further needs of the family, including additional supports, referrals for additional services, etc. Eventually, consideration of a change in placement may be appropriate.

PRESCHOOL PROGRAM FIELD TRIP PROCEDURES

Throughout the regular school year numerous field trips are scheduled both in our immediate community and surrounding areas. We believe field trips are an important opportunity for children to experience what our community has to offer young children whether it is a visit to our public library via public transportation or an opportunity to visit the OSU sheep barns during lambing season. We encourage caregiver participation on all agency field trips.

The following procedure should be followed regarding the planning and following through with agency field trips.

WHO: Some field trips are planned on Monday/Wednesday/Fridays and some are plan on Tuesday/Thursday to give every child an opportunity to have a field trip experience.

HOW: Caregivers are informed of field trips not less than one week prior to the scheduled trip. Notice occurs through a posting outside of the classroom in addition to a signed permission form and a flier that is sent home. It should be noted that some field trips have come about due to a last minute opportunity. When this is the case, families will be personally called in order to inform them as soon as possible. Should a family fail to give their

signed permission then a verbal authorization between the program's Lead Teacher and the parent is acceptable. No child shall leave the building for a field trip without parent authorization. (See COVID operations)

6l'

TRANSPORTATION: Children and staff are transported to and from the agency via public transportation or personal vehicles, i.e. staff or caregiver vehicles. Under these circumstances, the staff person or caregiver providing transportation assumes liability should anything occur during the transport. During transport children and adults must follow Oregon state regulations regarding the use of child car seats and seat belts. All adults and children must be belted with children weighing less than 40lbs. restrained in car seats. If there is a caregiver driving another child, a paid staff member must be with them.

PRESCHOOL PROGRAM SOCIAL MEDIA PROCEDURE

Caregivers or other relatives of children in Old Mill Center programs may at times take photos of children in our program and make those available through social media examples include Twitter, Facebook, Instagram, MySpace, LinkedIn, YouTube, blogs, wikis, or any other service that allows user-generated electronic content.. **Best choice: Take pictures with your child only to post on your social media site.** Old Mill Center for Children and Families is not responsible to family's social sites. Please consider this before posting other children within our classroom, events, and field trips.

COVID Operations

COVID will be a living part of our community until a widespread immunity. We continue to learn more about the evolution, more infectious variants, and our knowledge about COVID over the course of the months.

Currently, our best response to protect ourselves and each other are vaccinations for those eligible, physical distancing, face coverings, ventilation and airflow, hand hygiene, and staying home if ill or exposed to someone with COVID-19. Transmission decreases with each response we use.