



# Parent Handbook

**Downtown Baltimore Child Care, Inc.**

A Non-Profit Organization  
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# TABLE OF CONTENTS

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<b>Accreditation &amp; EXCELS</b>	<b>1</b>	<b>Items Your Child Will Need</b>	<b>24</b>
<b>Governance</b>	<b>1</b>	Clothing	
<b>Mission</b>	<b>1</b>	Toys from Home	
<b>DBCC's Philosophy</b>	<b>2</b>	<b>Diapering &amp; Toileting</b>	<b>26</b>
The Theory		Diapering Procedures	
Curriculum Development		Sanitizing	
Infants		Toilet Learning	
Toddlers & Two-Year-Olds		<b>Food &amp; Nutrition</b>	<b>28</b>
Preschoolers		Meals & Snacks	
Teachers		Birthday Celebrations	
Solving Problems & Discipline		<b>Assessments &amp; Screening</b>	<b>30</b>
Conclusion		<b>Discipline</b>	<b>31</b>
<b>Admission &amp; Enrollment</b>	<b>7</b>	Infant & Toddler Guidance	
Transitioning into the Center		<b>Transitioning to a New Classroom</b>	<b>35</b>
Infants & Toddlers		<b>Parent Involvement &amp; Communication</b>	<b>36</b>
Preschool		<b>Health Policy</b>	<b>38</b>
<b>Custody Policy</b>	<b>8</b>	Immunization Policy	
<b>Tuition Policy</b>	<b>9</b>	<b>Immunization Requirements</b>	<b>40</b>
<b>Calendar</b>	<b>10</b>	<b>Medication Administration</b>	<b>41</b>
<b>Hours of Operation</b>	<b>11</b>	<b>Center Visitors</b>	<b>42</b>
Arrivals & Departures		Students & Volunteers	
<b>DBCC Program Overview</b>	<b>12</b>	<b>Confidentiality &amp; Privacy Rights</b>	<b>44</b>
Infant & Toddler		<b>Release of Information</b>	<b>45</b>
Preschool		<b>Inclement Weather Policy</b>	<b>45</b>
<b>Staffing &amp; Group Sizes</b>	<b>17</b>	<b>Emergency Procedures</b>	<b>45</b>
<b>Inclusion</b>	<b>19</b>		
<b>Daily Schedule</b>	<b>21</b>		
Outdoor Play			
Library			
Field Trips & Enrichment			
Activities			



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# ACCREDITATION AND EXCELS

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DBCC maintains MSDE Accreditation and participates in Maryland EXCELS, which means we continually strive to meet the highest quality of care throughout all aspects of our program. Maryland EXCELS is a voluntary Quality Rating and Improvement System that rates programs using standards in five program areas that encompass licensing, learning environments, staffing and professional development, developmentally appropriate practices, child assessment, program administration and policies, and accreditation. DBCC has been awarded a level 5 in MD EXCELS, the highest rating possible.

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# GOVERNANCE

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DBCC's Board of Directors is composed of parents, representatives of sponsoring institutions, local businesses and interested citizens. The Board meets several times each year, and all meetings are announced on DBCC's Calendar. DBCC's Annual Meeting is usually held in late Fall. **Parents are always welcome!**

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# OUR MISSION

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Downtown Baltimore Child Care, Inc. is a non-profit, educational organization whose mission is to provide outstanding, all-day, group child care where the concurrent development of the physical, social, intellectual and emotional aspects of the child can be fostered and nurtured. This is accomplished through individual, play-based, interactive learning in a diverse community.

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# DBCC'S PHILOSOPHY

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Downtown Baltimore Child Care is a place where children play to get smart!<sup>1</sup> It is an early care and education center where young children are enriched by each other, caring relationships with the teachers, a stimulating environment, and a carefully planned emergent curriculum. DBCC's focus on child development and play allows the children to meaningfully integrate physical, social, cognitive, and academic growth while they pursue their own interests and learn to cooperate in a group.

## The Theory

DBCC's motto, "Childhood should be a journey, not a race," embodies our humanistic philosophy of early childhood education. Our curriculum does not begin with a pre-programmed schedule of themes, topics, and events designed by outside experts. Instead, it begins with each individual child. In order to learn, children first need to have their physical and emotional needs met—they need to be fed, rested, and healthy. They need to feel secure and loved. They need to feel confident and capable that their environment be safely explored.<sup>2</sup> Having these needs met consistently allows children in their infancy and early childhood years to develop trust, autonomy, and the skills to plan and act with purpose.<sup>3</sup> A prerequisite for all learning is the ability to take risks. Children whose needs are met will more likely be able to explore and to take initiative for their own learning.

## Curriculum Development

DBCC uses the Maryland State approved Creative Curriculum as a guide for all age groups. DBCC offers a program that focuses on not only what children learn, but also *how* children learn. DBCC's program integrates physical, social, emotional, and intellectual experiences for individual growth and development. Play is at the center of DBCC's program and we plan our curriculum based on the children's interests, strengths, and needs. We agree with the American Pediatrics' statement that, "Play is important to healthy brain development."<sup>4</sup> The structure in our program can be found in the carefully designed classroom environment and in the types of interactions that occur between children and teachers. Each

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<sup>1</sup> Cooper and Jones, 2005

<sup>2</sup> Maslow 1968

<sup>3</sup> Erikson, 1963

<sup>4</sup> Ginsburg, 2006

Classroom is arranged to optimize active, open-ended play and exploration. Teachers engage in authentic conversations with children, asking open-ended questions and using language to extend a child's knowledge as they play.

## Infants in Action

DBCC's approach to infant care is based on the principle of relating to infants with respect.<sup>5</sup> From this perspective, curriculum consists of building trusting relationships with caregivers in addition to exploring the world. Consistent caregiving and routines are a vital part of our infant curriculum. Schedules are adjusted according to each child's eating and sleeping rhythms and are always informed by a high level of communication with the child's parent(s). In this way, trust is built between the infant and the care provider, as well as between the parent(s) and the care provider. Holding and touching are determined by children's preferences for body contact so they can be gently introduced to sensory and motor experiences. Infants are talked to, read to, sung to, and played with to encourage the development of language, motor skills, and early peer social interactions. During infancy, as at every other age, all areas of development are intertwined: physical, social/emotional, cognitive, and language. Infant classrooms are especially designed so adult caregivers can easily respond to children's language, gestures, and needs. This allows caregivers to participate with the babies as they learn to safely explore their world.<sup>6</sup> Infants are regularly taken outside for stroller rides, walks, and gross motor play outside on our infant/toddler playground.

## Toddlers and Two-Year-Old's in Action

Toddlers and young children learn best from first-hand experiences. Educator and author Bev Bos says, "If it hasn't been in the hand, it can't be in the brain."<sup>7</sup> Manipulative materials such as paint, play-dough, sand, water, blocks, puppets, and props for dramatic play comprise a vital part of DBCC's curriculum. Children are encouraged to explore and test their ideas each in their own way and at their own level of understanding. Children are taught to make simple choices and use this skill to promote their peer relations. Teachers model using language to help children learn about and label their emotions. John Medina, in *Brain Rules for Baby*, advises that this facilitates connecting the nonverbal and verbal pathways in the brain.<sup>8</sup> Toddlers enjoy regular outdoor time with plenty of opportunities for gross motor play and nature exploration. Our toddlers are also introduced to basic health education as teachers establish healthy routines like handwashing, family-style eating, and nutrition.

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<sup>5</sup> Gerber, 2002

<sup>6</sup> Brazelton, 1969

<sup>7</sup> Bos, 1994

<sup>8</sup> Medina, 2011

# Preschoolers in Action

DBCC's preschool classrooms are designed around interest centers that allow children to make choices, move freely, grow in areas of need, and develop personal interest. Learning centers are equipped so that children can pursue special projects, utilize language, create artistically, explore mathematics, and experiment scientifically. There are carpeted places for reading and listening to music. There are opportunities for cooking activities and for the care of plants and animals. Indoor and outdoor space is dedicated to a range of activities to develop large muscle skills and build strong, healthy, bodies. Children are encouraged to self-select among activities that are provided to develop cognitive skills as well as enhance divergent thinking and problem solving skills.<sup>9</sup> While a play-based curriculum might not look like what you would expect your preschool classroom to look like, early childhood research supports that the most valuable early educational experience for children is one that supports the development of executive function and self-regulation.<sup>10</sup>

Language development is carefully encouraged at DBCC. Children ask questions, challenge assumptions, and work cooperatively. Language is a key to every classroom experience. Opportunities abound for writing and early reading skills. From our youngest infants to our oldest children, adults read to children on a daily basis. Children are encouraged to talk and therefore they learn language in its original, meaningful context.

DBCC children know their ideas are taken seriously and respected. With adult support, all children are challenged to reach beyond what they can do independently and tackle new, higher levels of skill.<sup>11</sup> Preschool children at DBCC spend time outside each day, engaging in a broad range of gross motor play opportunities. Our playground is also designed to facilitate nature exploration—children have opportunities to garden, to work with natural materials such as sand and woodchips, and to learn about the natural world.

## Teachers

DBCC's teachers facilitate learning through exploration and discovery, interacting with all children as unique individuals and nurturing their developing sense of independence and accomplishment. Teachers utilize several roles to enhance children's social, emotional, physical, and cognitive skill development. Teachers set the stage for learning by setting up the environment. They mediate children's conflicts and complicate the children's play. Teachers spend time observing and engaging children in authentic conversations in order to gain knowledge about all the children in their class, to determine the group dynamics, and to

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<sup>9</sup> Copple and Bredekamp, 2009

<sup>10</sup> Galinksi, 2010

<sup>11</sup> Berk and Winsler, 1995

identify the strengths and needs of both the individuals and the group. Teachers assess children's progress through observing and documenting their daily activities and using tools such as anecdotal records, portfolios, and Teaching Strategies Gold for all age groups. After determining children's strengths and areas of growth, teachers use that knowledge to plan for the group and for the individuals. They set goals, determine activities, and plan curricula.<sup>12</sup>

## Solving Problems and Discipline

DBCC's focus on individual development and play allows children to plan, negotiate, solve problems, and plan again. Children's socio-dramatic play allows them to "exchange worldviews with their peers"<sup>13</sup> and teachers and develop an ever-increasing understanding of how the world functions. An important part of our teachers' responsibilities involves helping young children identify their own feelings and the feelings of others. It is our goal that children develop the ability to self-discipline. Limits are clear and firm so children are able to function comfortably without a lot of adult correction, but flexible enough so individual needs are met. DBCC's children have plenty of opportunity for problem solving and conflict resolution. Answers are not automatically given to children - instead, open-ended questions are posed such as, "What do you think?", "What is your idea?", "How are you feeling?", and "How we can we make that better?" DBCC has a written discipline policy that includes guidelines that are appropriate to each stage of development.

## Conclusion

A local paper proclaimed that DBCC offers the "care of a relative in the learning environment of a private school."<sup>14</sup> Our enriching program provides emotional support, intellectual stimulation, creative outlets, and social interaction in a safe and secure environment. Our philosophy of education is based on a model of children as highly competent human beings, born not only ready to learn but passionate in their quest to grow, develop, and become productive members of society. Our approach is unapologetically child-centered without any anxiety or urgency to prepare for elementary school or some unknown future. Our ultimate goal is that the cognitive practice gained by working through play scenarios and actively choosing their industry gives children their first experiences the democratic process of developing consensus.<sup>15</sup> We are proud to think that today's DBCC students could one day use the skills fostered in our school to create a positive change in a family, a community, or even the

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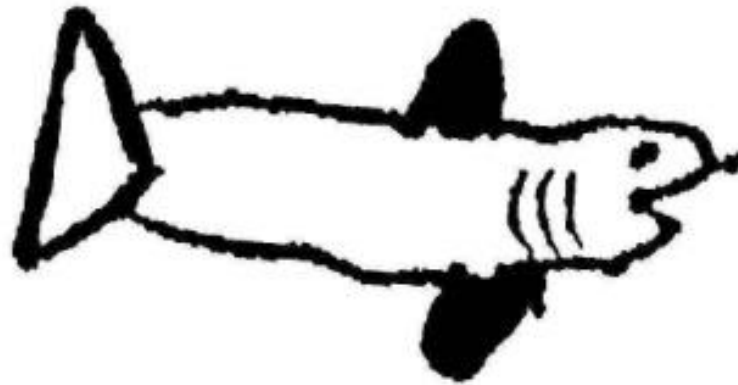
<sup>12</sup> Jones and Reynolds, 1992

<sup>13</sup> Nimmo and Jones 1994

<sup>14</sup> City Paper, Best of Baltimore 2008

<sup>15</sup> Jones and Cooper, 2006

world. It was many years ago when Jean Piaget said, “The principle goal of education is to create men who are capable of doing new things, not simply of repeating what other generations have done—men who are creative, inventive, and discoverers.”<sup>16</sup> This is the essence of DBCC’s philosophy!



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<sup>16</sup> Piaget, 1988



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# ADMISSION AND ENROLLMENT

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Admission to and employment by Downtown Baltimore Child Care, Inc. is open individuals without regard to race, color, religion, national origin, sexual orientation, gender, or any other criteria prohibited by law.

DBCC enrolls children as young as 12 weeks and as old as five years in age.

A signed Application for Enrollment along with a non-refundable \$45.00 Application Fee is required (\$25.00 if submitted with a Scholarship Application). The Application for Enrollment is not binding upon the applicant or upon DBCC.

A signed Tuition Agreement is required prior to enrollment along with the required deposit. Maryland Licensing Regulations require a medical form signed by a physician, a signed record of immunization, and an emergency card for each child in the program. Other forms are supplied by the Center and parents must complete all the necessary forms before the child's enrollment is complete. **Children may not be left at the Center without completing and providing the state required forms.**

## Transitioning into the Center

We believe that a gradual enrollment scheduled over a period from a few hours the first day to a full day toward the end of the transition period is crucial because it allows a child time to ease into a new situation with as little stress as possible. This type of plan enables the child to have time to form a trusting relationship without undue pressure.

### Infants and Toddlers

To ease parents' transition into a group infant/toddler program, caregivers work closely with parents. They gather information about the child's routines at home and maintain verbal and written communication by talking to parents and maintaining a daily contact sheet that charts the child's day in the child care setting. Each child's contact sheet contains the type and quantity of foods and liquids the child consumed during the day and the times of feedings. Diaper changes, sleep times, and other significant events are recorded as well. The contact sheet is also used by parents to note details about the child's morning at home. At the end of the day, the parent receives a copy of the contact sheet, which aids in building cooperation between the parents and caregiver while maintaining consistency for the child between the Center and home.

Sharing information enables parents and caregivers to understand and cooperate in the care of the child. In addition to contact sheets, infant and toddler parents may find it comforting to touch base with providers by phone or email throughout the day or week. We are flexible and open to communicating with families in a way that meet everyone's needs.

## **Preschool**

A preschooler's transition into a group program can usually be accommodated more quickly than an infant's or toddler's. They generally have a more well-defined sense of self as individuals than younger children, and they have achieved the cognitive capacity to hold a mental picture of their absent parents in their mind. In order to facilitate the transition to school, a visit to the Center will be scheduled for both the parents and child. This visit will be an opportunity for the parent and child to become familiar with the classroom, the equipment, and especially the adults. It will be a chance for parents to talk with the teachers about their child, discuss the daily schedule, and have all their questions answered.

Parents are encouraged to visit the Center whenever possible because we believe a sound philosophy of care for children is based on the development of a positive relationship between the parent and the program. We strive for relationships that are supportive to parents, nurturing to children and enriching to staff. In keeping with our aim to enrich a child's experience at DBCC, we encourage parents to plan their visits thoughtfully, taking into consideration factors such as possible separation anxiety. We also encourage families to let teachers know ahead of time when they plan to visit. This helps teachers plan their day and prepare the children for something they may feel is out of their usual routine.

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# **CUSTODY POLICY**

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DBCC recognizes the parent or guardian that signs the tuition agreement as having custodial rights unless a court order is on file indicating another legal arrangement. (See Parental Custody Policy in enrollment packet.)

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# TUITION POLICY

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Tuition for each school year is set by the Board of Directors and announced no later than March of each year. Tuition amounts are disseminated by letter to each family and are available on the DBCC website. Hard copies are also available by request.

Tuition is due on the first school day of each month. A late charge of \$25.00 will be added to payments received after the tenth day of the month if no previous arrangement has been made with the Center. A fee of \$25.00 will be added to any charges for returned checks. Tuition is not refundable.

Changes in tuition go into effect the first of the month following the month in which the Child turns 24- or 36- months.

Because of operational expenses, there is no change in tuition for a Child who is absent. Holidays, inclement weather closings/delays, and other closings have been taken into consideration and do not affect the tuition rate for the month in which the holiday, inclement weather closings/delays, or other closings occur.

An advance deposit of one full month's tuition for all placements is due when the Tuition Agreement has been signed. This amount will be credited to the last month(s) of the Tuition Agreement Period. However, the advance deposit is non-refundable if the Child fails to start at the Center or leaves the Center before the end of the Tuition Agreement Period.

Spring acceptances of applicants for Fall enrollment will require the deposit along with the signed Tuition Agreement. The non-refundable deposit is applicable as the tuition advance.

The Center requires that each child have a School Accident Insurance policy. The charge is \$5.00 per year and is due with the first month's tuition.

A 5% reduction in tuition is given to families who enroll two or more full-time children, from the same immediate family and paying full tuition rates for their enrolled children. The 5% reduction only applies to the children with the lowest tuition rates.

An additional charge is made when children are picked up after the Center closes. For each ten-minute period or fraction thereof on or after 6:05 p.m., the charge is \$10.00.

All tuition and fees should be paid by check made payable to Downtown Baltimore child Care, Inc. (DBCC, Inc.)

The Center does not guarantee readmission if a child is withdrawn during the Tuition Agreement Period.

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# CALENDAR

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At the beginning of each new Program Year, a DBCC Calendar is published and given to all families and staff members. Calendars are always available in the office and posted around the Center. Calendars will include all closings in addition to

DBCC is closed for the *entire week* two weeks preceding Labor Day. This week separates each program year. The new program year begins the Monday before each Labor Day.

DBCC is **usually** closed on:

- Labor Day
- Columbus Day\*
- Thanksgiving Day
- The Friday after Thanksgiving Day
- Christmas Eve Day
- Christmas Day
- New Year's Day
- Martin Luther King, Jr's Birthday
- Presidents' Day\*
- Friday before Easter
- Memorial Day
- Independence Day

\*Professional Development Days



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# HOURS OF OPERATION

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**DBCC is open from 7:30 am to 6:00 pm, Monday through Friday.**

Breakfast is served between 8:30 and 9:00 am, and lunch is served around 12:00 noon. Due to the nature of our curriculum, extreme lateness is discouraged. **Children should not arrive after 9:30 am unless a prior arrangement has been made.** If you are delayed for some reason, please call the Center. The beginning of the day is very important to your child. It is difficult for the child to enter the room when everyone is involved with the morning activities and social groups have already formed. It can be devastating to a child to arrive at the end of the morning when everyone is cleaning up and an activity they may have anticipated is already over. Teachers often take advantage of good weather to take a neighborhood walk, which is another reason we discourage late arrivals. It can be particularly upsetting to a child to arrive to the Center and find that their group is not there.

If you plan to pick up your child between 1:00 pm and 3:00 pm, please let us know because this is naptime. Informing teachers in advance allows them to have your child ready to leave without disturbing the other children.

**We close promptly at 6:00 pm. There is a Late Pick-up Fee of \$10.00 for every ten minutes or fraction thereof after 6:05 pm.** Please make every effort to be on time. It is upsetting to a child to see everyone else leave. Even a short wait can cause anxiety, especially at the end of the day when your child is tired. Also, teachers have families and other commitments, and it is inconsiderate to expect them to work past their regular hours.

## Arrivals and Departures

Please bring your child into their classroom in the morning, sign them into the Center either on the classroom sign-in sheet or on your infant/toddler daily contact sheet, and be sure that a teacher recognizes the child's arrival. Spending a few minutes to help your child become involved in an activity can smooth the transition from home to school.

Children will not be released to anyone without written consent of the parent(s) who have a tuition agreement with DBCC. If you do choose to authorize alternate pick-up people, it is important that you notify the Center and that the person provide government-issued photo identification. DBCC will make a copy of their ID for the child's file.

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# DBCC PROGRAM OVERVIEW

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## Infant and Toddler Program

The play of infants and toddlers is a basic need, not only for intellectual but also for social, emotional, and motor (fine-motor and gross-motor) development. The child's involvement with interesting objects nurtures one of the most important natural powers for growth in the child—the interest and motivation to explore, experiment with, and problem-solve. When a child's interest in the objects and people in the world around them is not stimulated, one of their major needs is being neglected. A child who does not have opportunities to become engaged with a variety of materials at their individual level of skill and to choose their own goals in those activities tends to become increasingly passive, angry and aggressive, or generally unhappy. Failing to capitalize on a child's natural curiosity or interest may stunt their social, emotional, and intellectual growth.

Psychosocial (affective) development and cognitive (intellectual) development are inseparable in the infant and young child. A child who is emotionally healthy—meaning a child who is attached to and trusts significant adults in the home and childcare setting—will be motivated to explore their physical environment. Objects that become play materials for the infant are part of that physical environment.

For gross-motor development, babies need space and equipment that allow them to engage safely in vigorous physical play both indoors and outdoors. The relative level of gross-motor activity varies greatly among infants and young children. Their interest in physically enthusiastic play tends to be more intense at some periods in their development than others. Toddlers do not always know what they can execute safely, and the difficult balance between giving them independence and close supervision needs to be achieved during gross-motor activities.

It is important to provide ample opportunity for all infants and toddlers in a child care setting to engage in as much gross-motor activity as they desire. Occasionally, it may be appropriate to encourage a sedentary child to attempt something new and challenging, but not all infants and children need the same amount of physical exercise.

Fine-motor development is encouraged by providing carefully selected play materials. Caregivers closely monitor infants and toddlers to see which toys and activities can be offered to each child to develop their potential. Like Maria Montessori famously said, "The environment must be rich in motives which lend interest to activity and invite the child to conduct his own experiences."

## Caregiving Routines

The heart of DBCC's infant and toddler program is the attention and care we give to your child's ability to bond with their caregiver. The bond created between the primary care provider and the child is vitally important in infant and toddler development. Caregiving tasks such as diapering, feeding, and preparing for rest times, are understood to be great opportunities to develop that bond. Teachers make eye contact with, smile at, talk to, and even engage in social games with the child. This is especially important for the younger infant, whose range of activities with the significant adults is more limited than that of older infants and toddlers. Adults must be sensitive to different tolerance levels and to the amount of stimulation each child can handle.

Interactions with adults are important for children's emotional health and social, language, and cognitive development. Infants are encouraged to experiment with language, to communicate through body language and facial expressions, and are given opportunities to listen to stories, songs, and books.

When the same children are frequently together, they become increasingly interested in each other. The intensity of that interest varies from child to child and from one moment to another and generally increases with age. A few group activities, such as meal time and music time, help infants become aware not only of each other but gradually of themselves and of others as part of a group. When one infant is interested in exploring or "playing with" another infant, the infant's desire to explore is supported and supervised. Infants are not aware of what hurts another child as they explore each other; therefore, adults carefully observe infants' interactions, support positive contacts, and intervene in actions that might hurt or injure.

## Infant and Toddler Sleeping Areas

In the infant rooms, there is a separate sleeping area with a sturdy crib for each child. While separate so that it is soothing and conducive to rest, this area can be monitored easily by staff. In the toddler rooms where children need fewer naps each day, very low cots are used.

In keeping with the recommendations of the American Academy of Pediatrics, DBCC will put babies to sleep on their back or their side with the lower arm forward to stop them from rolling over until they are old enough to turn over on their own.

## Infant and Toddler Outdoor Space

Infants and toddlers have a separate outdoor space that can be entered by using the main entrance and taking a walk through the preschool playground. This space is separated from the main part of the playground and is surrounded by a fence. There is a sand area and slide, a paved space for wheel toys, and a grassy area. Strollers, which hold one or two children, are used regularly for walks around the pathways of the main playground and occasionally around the grounds of the campus.

# Preschool Program

Play for young children is not a recreational activity. It is their work and their most important mode of learning, as well as their fun. At DBCC, we celebrate and build upon children's play and their need to discover. As children explore materials and use equipment, we help them go from what they already know to new but related ideas. We encourage and support them to expand a simple idea into a more complex one.

One way we support the preschooler's development is by carefully planning and arranging the classroom environment. The rooms are attractive, stimulating, comfortable, and safe places for young children. Each area has a purpose, and teachers constantly evaluate the learning activities in each center and rearrange or add new challenges as needs are indicated.

We provide many different interesting materials and activities at the same time, so children can have the opportunity to make choices, take risks, and guide their own learning. We define areas for each activity so that multiple activities can be carried on concurrently, and we arrange materials so that children can clearly see what is being offered. Each teacher plans curriculum content to make use of these areas of activity and interest to extend knowledge, language, and imagination to help the children grow from what they already know to what they need to know. We allow enough time to pursue an interest or to go from one interest to another. We supply children with new and intriguing props to spark their imagination and foster new ideas. We listen to children, showing them our interest through our words, gestures, facial expressions, and physical contact.

The program at DBCC is based on theoretical understandings of basic child development and the current research that supports these theories.

**We know that each child is a unique individual.** Often, several activities are going on at the same time, both indoors and outdoors. Within each activity, children are free to function at the level of performance that is right for them.

**We know that children thrive in the company of trusted adults.** There is evidence of warmth and of close, friendly relationships between teachers and children.

**We celebrate each child's autonomy and self-esteem.** Children are encouraged in all of their activities—dressing, planning, caring for the room—to carry as much responsibility as they are able, and we share in their delight when they exclaim, "Look! I did it all by myself!"

**We recognize the necessity of learning good social skills.** The occasions for whole-group instruction are limited and are usually of short duration. Children are free to work in small groups of two to four, or they are free to work alone if they prefer. Children are free to talk openly and easily with each other as they work and play with teachers acting as facilitators when necessary.



**We understand that children have boundless** physical energy and that they are still learning how to manage their growing bodies. At DBCC, occasions for staying seated are primarily self-chosen by the children. Other occasions are of short duration. Children are free to move from one activity to another and to change their activity. Care is taken to alternate quiet activities with more active periods and to alternate indoor and outdoor times. Activities such as running, climbing, bike riding, balancing, and digging develop muscle skill and build strong, healthy bodies.

**The relationship between teacher and child is characterized by sympathetic understanding and by gentle guidance based on awareness of whatever problems the child faces.** Records are kept on the cognitive, physical, social, and emotional growth of individual children, and plans are made for constant challenge.

**We honor the unique creativity of children.** They are given opportunities to experiment freely with materials and to learn as much as possible from their own manipulation and experimentation.

**We know that children learn best from first-hand experiences, rather than verbal instruction.** There are trips, visitors, displays, and, as supporting second-hand experiences, books and pictures to widen the horizons of children. There are appropriate materials available such as paint, clay, wood, sand, blocks, equipment for dramatic play so that children are encouraged to react on the stimuli flowing to them, each in their own way and at their own level of understanding.

**The teacher's main role is to reinforce children's own learning and to offer new information when there is clear evidence of the child's readiness to learn.** We strive for a friendly, open, and easy relationship between parents and teachers, enabling a constant exchange of informal communications. Time is provided for as many individual parent-teacher conferences as needed.

**There is recognition of the inter-relationship of all areas of learning in the actual problems of day-to-day life.**

**We foster a love of nature and encourage children to understand their role in the stewardship of our environment.** Children at DBCC play an active role in caring for plants and classroom pets. We have child-sized brooms, rakes, and snow shovels so we can involve children in caring for our playground environment. Our playground also features areas designated for small classroom gardening projects.

DBCC uses an "emergent" curriculum. This means that instead of using a curriculum that is scripted or generic in nature, our teachers acquire their ideas for classroom activities and areas of study from the strengths, needs, and interests of the children as well as the interests of the teachers. These areas of study will last as long as the children are interested and will get as complex as the children need. For example, dinosaurs are often of great interest to four-year-old children so the emergent curriculum might encompass fossils, bones, types of dinosaurs,

We share the point of view that people--children and adults--who are skilled at play with both things and ideas have more power, influence and capacity to create meaningful lives for themselves and others than people who, because they are less skilled in finding order when faced with ambiguity, get stuck in defending the way things are (or were).

We believe that play is a powerful mode of response to experience that can and should be "taught" to children, teachers, parents and other people. Teaching play requires setting the stage for self-active learning--hands-on activities, reflection, and dialogue--as well as investigating the theory.

*The Hands-On Play Experience: Implication for Teacher and Parent Education" handout. Sponsored by the NAEYC Play, Policy & Practice Caucus, NAEYC Conference, 1997*

archaeology, carnivores, herbivores, etc. Children are encouraged to engage in literacy, math, science, social studies, the arts, and health-related activities. Children might use a tape measure and chalk to create a life-sized dinosaur "footprint" out on the playground, observe real fossils through a magnifying glass, engage in a dramatic play and sensory exploration as they pretend to dig for bones and fossils, paint a scenic background for a dinosaur puppet show, or research what types of foods each dinosaur would eat. Our educational program encourages the acquisition of concepts and skills through experimentation and discovery.

Most importantly, when you look at our preschool programs, know that we value the child's input. Research has proven that child-initiated play is the most valuable use of a child's time. When we let children decide what they want to play, rather than handing out pre-cut shapes for them to glue together, they are developing all the important skills they need to be successful in school and in life for many years in the future. When we talk to them about their plans for and reflections on their play, we are helping them develop vital skills that they could not learn from a teacher-directed environment.

## Pre-Kindergarten Program

DBCC has sought and received approval from the Maryland State Board of Education for the morning portion of our Pre-Kindergarten program. This approval is for the traditional school year calendar, totaling 180 days, within the year-round operation of the center. This means that DBCC fulfills all the standards of the Maryland State Curriculum and has a fully qualified teacher who meets state teaching standards for non-public schools.

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# STAFFING AND GROUP SIZES

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DBCC is staffed by an Executive Director, Center Director, an Assistant Director, Mentor Teachers, Head Teachers, Team Teachers, and Substitute Teachers who are professionally trained and experienced in early childhood education and child development. Teachers work as a team within each classroom, sharing responsibilities for planning experiences consistent with DBCC's developmentally appropriate curriculum for individual children and their group.

DBCC also employs a full time Kitchen Manager who maintains the environment, prepares breakfast and snacks, disinfects toys, and sanitizes surfaces.

## Teacher : Child Ratios

Quality child care and early education is labor intensive. The younger the children, the smaller the group and the more adults needed per child. Overall, DBCC's teacher to child ratios exceed Maryland State licensing regulations.

### Illustrative DBCC Ratios:

	Age Group	Children	Number of Teachers
Room 1	Infants	8	4 full-time, 1 part-time
Room 2	Toddlers	9	4 full-time
Room 3	Infants	7	3 full-time, 1 part-time
Room 4	Two-year-olds	12	3 full-time
Room 5	Three-year-olds	15-17	3 full-time
Room 6	Preschool	16-18	2 full-time, 1 part-time

Infants and toddlers are divided into groups according to individual needs. In the infant rooms, babies range from 12 weeks to 12 months at the beginning of the year in a group size of 7 or 8 children with a full-time, primary caregiver assigned to care for 2 to 3 children. Each of the infant rooms also has a part-time caregiver who comes in to maintain ratios during the teacher's afternoon breaks and in the late afternoon when the opening teachers leave.

In the toddler rooms, the children range from 12 months to 24 months at the beginning of the year with 3 or 4 full-time teachers. Each full-time teacher is designated as a primary caregiver for 2 or more children.

Each infant and toddler receives continuity of care by having a primary caregiver. These teachers are significant adults in the child's life. A limited number of significant adults for each child is important because:

- The child forms secure attachments (the child builds trust);
- The caregiver forms a bond, thus stimulating interest in the growth and achievement of each individual child and enhances their ability to sustain quality interactions throughout the months of routine caregiving;
- Primary caregivers get to know their child well, understanding what is "normal" for that child with respect to physical signs of health or illness (such as body temperature; stool consistency, color, and frequency) and with respect to emotional signs such as mood, common social reactions, and emotional tone; and
- The caregiver knows each individual infant's developmental achievement level and personal learning style, and what works to motivate him/her.

At DBCC we pride ourselves on providing care that exceeds the standards set by Maryland State licensing regulations.

## **Preschool**

Preschool children are divided into groups using age as a guide, but ultimately the need of each individual child determines group placement. Our two-year-old class size is capped at 12 children with three full time teachers. Preschool classes are capped at 15 to 17 children with three full time teachers, or two full time teachers and one part-time teacher, depending on the needs and ages of the children enrolled in the classroom. These ratios are smaller than you will see at other centers. Our experience has showed us that small class sizes and low child to teacher ratios allow teachers to get to know individual children and plan for their individual development as well as the development of the group.

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# INCLUSION

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DBCC's philosophy of providing caring relationships, a stimulating environment, and planning emergent curriculum to meet the individual needs of children, creates a strong foundation for including children with special needs. Because we focus on the individual child we are able to respond to differences in learning, physical abilities, and emotional development in a multi-faceted way. DBCC supports inclusion by:

*Communicating with families* before, during, and after the process of enrollment. If a child has an IEP or an IFSP, we obtain a copy of it and review it with the child's parents, the classroom teacher, our administrative team, and any service providers that are already involved with the child's care.

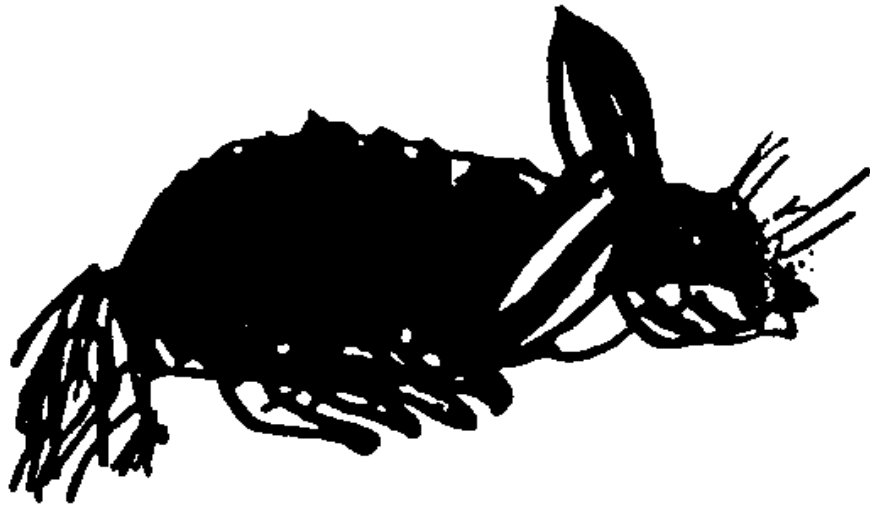
*Maintaining family partnerships* by scheduling regular conferences to discuss the child's progress, designing curriculum and selecting materials that reflect all families within the program, and providing information about services and community resources.

*Screening and seeking support* for children who demonstrate atypical development. All children at DBCC are screened using the ASQ-3 upon enrollment, mid-year if needed, and again at the beginning of each new program year. In addition to developmental screening, children at DBCC are assessed through informal observation and documentation, as well as through formal assessment tools such as Teaching Strategies Gold, Setting the Stage, the Work Sampling System, and EC-CAS. DBCC works with the Early Intervention Project, Maryland Infants, and Toddlers, Child Find, as well as some local private providers to make referrals for children who demonstrate special needs.

*Collaborating with the Early Intervention Project.* Our early intervention specialist is an invaluable resource who supports our classroom teachers, facilitates the referral process for children who demonstrate a special need, and, most importantly, is an ongoing informal source of professional development in the area of special needs.

*Embedding intervention services here at DBCC.* Intervention can occur in many ways. Our teachers conduct ongoing observations and document the ways in which they differentiate instruction for all students here at DBCC. For a student who requires accommodations, planning will include information from anecdotal observations, developmental screenings, a child's IEP or IFSP, as well as feedback from parents and other care providers. We take all aspects of our program into consideration when planning for children with special needs: room arrangement, routines and schedules, lesson plans, materials, staffing, professional development, and ongoing collaboration with families. Families are encouraged to arrange for outside service providers to come here to DBCC. This provides additional support without removing the child from their natural environment.

*Consulting with families about placement options.* We support families in the process of navigating decisions regarding school placement and kindergarten readiness. If DBCC finds that a child's needs exceed the scope of our program, we utilize the aforementioned resources to establish a clear plan and determine the appropriate placement of the child.



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# DAILY SCHEDULE

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DBCC's toddler and preschool classrooms each maintain their own schedules that balance active and quiet activities. You will find the written schedule posted on the wall inside your child's room. Young children feel more secure when they know what is going to happen next. The daily routine provides that security while also remaining flexible enough to be adjusted to meet the needs and interests of the group.

The schedules of individual babies in the infant rooms are governed by each child's own sleeping and eating routines. When infants first attend the Center, caregivers develop each child's schedule based on suggestions from their parents. As caregivers get to know the child in the Center setting, they share their experiences and observations with the parents in order to provide the child with as much continuity as possible. During this period of rapid growth, infant schedules are frequently updated.

As children transition into toddlerhood, their sleep and meal times naturally become more consolidated. Most children in the toddler rooms are eating on a three-meal-a-day schedule with morning and afternoon snacks. Also, most toddlers take a longer nap in the afternoon. The toddler rooms offer a more cohesive group schedule, with lots of room for individualization and plenty of flexibility.

## Outdoor Play

Outdoor activities are as essential to the health, education, and development of children as the indoor program. In addition to its physical benefits, outdoor playtime provides children with a change of scenery in which they can expend energy and express themselves freely with fewer disturbances to others. Outdoor time can be particularly beneficial in the winter when the dry, heated air inside irritates nasal passages. Taking children outside to enjoy the untreated air allows dried membranes in the nasal passages to return to normal so they are better able to resist colds and other infections. Children with allergies also frequently benefit from a break from dust and particle-laden air.<sup>17</sup>

In cold weather, please send layered clothing along with boots, leggings, hats, and mittens. In hot weather, please send sunscreen with a UVB-ray and UVA-ray protection of at least SPF 15, a sun hat, and sun protective clothing. Also, send water play clothing as children will have extensive opportunities to get wet during outdoor play in the summer. Raincoats are also important because children may play outdoors in a summer drizzle.

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<sup>17</sup> 2013, third edition. Published collaboratively by the American Academy of Pediatrics, the American Public Health Association, and the National Resource Center for Health and Safety in Child Care and Early Education.

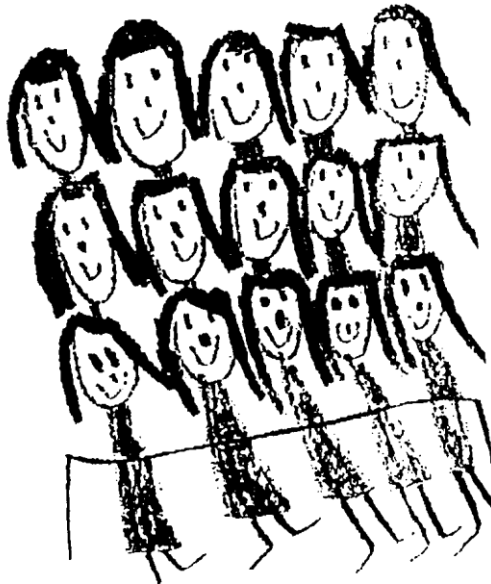
It is DBCC policy that children should only be at the Center if they are well enough to participate in every part of the program. Daily morning and afternoon outdoor time, except in the nastiest weather, is an important component of our program and philosophy. If your child is not well enough to go outside, they probably are not well enough to be at the Center.

DBCC follows the outdoor play guidelines published in the *Stepping Stones to Caring for our Children: National Health and Safety Performance Standards; Guidelines for Out-of-Home Child Care Programs*. Children play outside every day **except** during a Code Red or Code Orange air quality alert when the ozone and air pollution levels are unhealthy. This policy is outlined in the *National Health and Safety Performance Standards* and recommended by the Maryland State Department of the Environment.

## Library

Because we recognize the important role books play in development, DBCC strives to make books a part of each child's daily experience. In addition to the large collection of books in each classroom for daily use, our Center features a small library.

Literature contributes to language development in a variety of ways. By listening to stories and poems, young children come to appreciate the sounds and patterns of language. By handling books on a daily basis, children learn to enjoy them, to appreciate them, and to anticipate them as one of the pleasures in life. They learn that books can bring new information; an understanding of things, processes, places, and people; an aesthetic delight in beauty perceived and in expressive language. Books can help children clarify, associate and expand their ideas as well as develop their vocabulary.





## Field Trips & Enrichment Activities

Children learn by exploring the environment with all of their senses. Field trips are significant situations in which the child can be actively involved. They help instill children with a sense of place and connection to the community. Parents are asked to sign a Field Outings Permission Slip so that children may leave the Center grounds from time to time.

For the youngest children, field trip experiences are limited to short neighborhood walks. They might get a chance to experience a little bit of nature or to observe a close-by construction project. Then, as children get older and feel more secure in their preschool environment, they may have opportunities to attend cultural events throughout Baltimore City and visit places such as the Enoch Pratt Library, Lexington Market, B&O Railroad Museum, and The Walters Art Museum. If you are ever available to accompany the group, please let your child's teacher know. In addition to these opportunities, visitors and participants from nearby institutions come to the Center to perform. We have hosted performers such as Abu The Flutemaker, The Baltimore Lyric Opera, and Black Cherry Puppet Theater.

DBCC complies with Maryland's child safety seat law. This law requires all children under age eight to be secured in a federally approved child safety seat according to the safety seat and vehicle manufacturer's instructions unless the child is 4 feet, 9 inches or taller. The child restraint must be right for the child's size, age, and weight. Child safety seats include: infant seats, convertible seats, forwards-facing seats, booster seats, and other safety devices federally approved for use by children in motor vehicles.

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# ITEMS YOUR CHILD WILL NEED

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- Two complete changes of clothing
- Infants will need bottles, prepared with formula or breast milk
- Diapers and wipes
- Older children will need lunch from home
- A water bottle (to be taken home and washed **daily**)
- A sheet and a small blanket for naptime (check with the teachers for sizing)
- A small “lovey” or stuffed animal (optional)

Your child’s teacher may require additional items. We aim to help children develop independence and be responsible for their own belongings. Teaching them to fold and put away their linens is one way we facilitate this, so it is important that their blankets and pillows are small enough for a child to fold and store in their bag/bin or cubby. Full-size blankets are also harder to keep clean and sanitary because they also tend to spill out on to the floor where they can be walked over by dirty shoes.

Please consult with your child’s teacher about what size blanket is most appropriate for the cribs or cots in your child’s classroom. Teachers will also be able to give you guidance about the storage available in the classroom and the type of container that is best for storing your child’s belongings. Some classrooms have cubbies that are designed to hold snap-top bins, and some classrooms prefer to store the children’s things in bags. Bedding should be taken home every Friday to be laundered and returned to the Center on Monday morning.

Please label all of your child’s items and check occasionally that they are both size and season appropriateness. You can help our teachers by keeping your child’s cubby neat and taking home artwork and other items.

## Clothing

Dress your child comfortably for active play so they will feel free to participate in any and all activities at the Center. A typical day may include playing on a climber, digging in the sandbox or using clay and finger paints. Pants are usually safer than dresses when climbing.

When dressing your child, remember that we go outside daily! Coats with long strings may get caught in climbing equipment and cause a choking hazard. Snowsuits, leggings, boots, hats, mittens, and raingear should be worn in appropriate weather. The shoes your child wears should be sturdy and safe for running and climbing. Loose or slippery-soled sandals, flip-flops, clogs, jellies, crocs, and similar shoes are inappropriate for our outdoor play areas. If your child wears these shoes to the Center, please bring an extra pair for the playground.

## Toys from Home

We strongly discourage children from bringing in cars, trucks, dolls, and other small items that can easily be lost or broken. It is hard to share things from home, which can create unnecessary problems for your child and their friends. Teachers may gently require your child to keep objects from home stored in their cubby. We do allow transitional objects that help comfort children at nap time, such as a stuffed animal. If your child insists upon bringing something to the Center, encourage them to bring something we can all share such as a musical CD or book.

Be sure to label things with your child's name. The Center accepts no responsibility for safeguarding toys or other personal items from home.

Children should *never* bring candy, chewing gum, electronics, valuables, or money to the Center.



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# DIAPERING AND TOILETING

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Parents are expected to provide disposable diapers and pop-up wipes for their children. There are stored in containers marked with each child's name on a shelf above the diapering area. Extra supplies are stored in the cabinet below.

DBCC is required to post diapering procedures and parents and staff members are expected to follow them when diapering at the Center.

## Procedure for Diapering a Child

Maryland State Department of Education – Office of Child Care

Organize needed supplies within reach:

- Fresh diaper and clean clothes (if necessary)
- Enough diaper wipes for the diaper change (including cleaning child's bottom, child's hands and providers' hands after taking the soiled diaper away from the child's skin).
- Child's personal, labeled, ointment (if provided by parents and approved by a physician) removed from the container to a piece of disposable material such as facial or toilet tissue.
- Trash disposal bag
- **Supplies should be removed from their containers before starting the diaper change.**

1. Place a non-absorbent paper liner large enough to cover the changing surface from the child's shoulders to the child's heels (in case it becomes soiled and must be folded over to give a clean surface during the change) on the changing table. Diapering surfaces should be smooth, nonabsorbent, and easy to clean. Don't use areas that come in close contact with children during play, such as couches, floor areas where children play, etc.
2. Put gloves on now.
3. Carry the child to the changing table, keeping soiled clothing away from you and any surface that cannot be easily cleaned and disinfected.
4. Unfasten the soiled diaper but leave it under the child. Lift the child's legs as needed and use the disposable wipe to clean the child, wiping from front to back. Use a fresh wipe each time until the child is clean. Put the soiled wipes into the soiled diaper, or directly into a plastic-lined hands-free covered container.
5. Fold the soiled diaper surface inward and put the soiled diaper into a plastic-lined, hands-free covered container.
6. Remove gloves and put them into a plastic-lined, hands-free covered can.
7. Use a disposable wipe to clean the caregivers' hands, and another wipe to clean the child's hands. Put the soiled wipes into a plastic-lined hands free container.
8. Put on a clean diaper and redress the child. Use a facial or toilet tissue to apply any necessary diaper creams, discarding the tissue in a covered, plastic lined hands-free receptacle.

9. Wash the child's hands and return the child to play area. (The provider should not touch any materials in the classroom, other children, etc, at this point because their hands have not been properly washed yet.)
10. Clean and sanitize the diaper-changing surface. Throw away the disposable paper liner in a plastic-lined, hands-free container. Clean any visible soil from the changing surface with detergent and water. Wet the entire changing surface with the sanitizing solution(e.g. spray a sanitizing bleach solution of 1/4 cup of household liquid chlorine bleach in one gallon of tap water, mixed fresh daily) and wait 2 minutes (or allow surface to air dry) to allow the solution to kill germs before drying with a disposable paper towel.
11. Wash your hands.

## Sanitizing

A sanitizing bleach solution is used to sanitize the changing table after each diaper change. The diaper receptacle is sanitized with a bleach solution at the end of every day. All toys, especially mouthing toys, are sanitized and thoroughly rinsed at least once every day.

## Toilet Learning

This process has been mistakenly called “toilet training,” which implies it is the adult's responsibility to train the child. Toilet *learning* is a more accurate description because it implies that the child participates in the learning process. The adult begins teaching when the child shows readiness to learn rather than at some magical age predetermined by an adult. Mastering this important task at the child's own pace and with the child's cooperation is important for the child's feelings of worth and self-esteem.

When a child's parent(s) and caregiver agree that the time has come to begin the toilet learning process, a meeting will be arranged to discuss how both the caregiver and parent can support the child in this important learning endeavor.

The progression toward independence can be assisted by:

- Dressing the child in clothing that is easily removed. Doing so aids the child as well as the adult assisting the child.
- Incorporating the toilet into the regular diaper changing routine.
- Reading books, singing songs, and talking about the potty. This is a big milestone for toddlers and young preschoolers—join them in their excitement and enthusiasm!
- Paying close attention to children's comfort and level of interest in toilet learning. Too much pressure from adults can be counter-productive and stressful.
- Letting children set the pace and encouraging them along the way!

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# FOOD AND NUTRITION

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## Meals and Snacks

DBCC provides all children at the Center with a light breakfast and an afternoon snack. Infants and toddlers also receive an additional midmorning snack. At lunch time, we serve milk with lunch brought from home. Breakfasts and snacks are planned to meet USDA nutritional requirements, and we strive to use wholesome foods without additives or high sugar or sodium content. Monthly menus are posted on the classroom bulletin boards and are available on the Parent Information table by the front door. If you would like a copy of the menu but cannot find one, please ask the office.

Children eat in their own classrooms. We want mealtime to be a pleasant learning occasion where children develop social skills and desirable eating habits. Also, children sometimes participate in food preparation as part of the classroom learning experience.

Any dishes or utensils used during meal times are washed and sanitized in the Center's main kitchen.

Please leave any breakfast snacks that your child may eat on the way to the Center in your car. Not only has this become a problem for other children, but cereal and open drinks tucked in a child's cubby spill and attract insects.

## Infant Food

For a baby, the relationship between food and caregiving is extremely important because it sets the stage for bonding and the development of trust. If a caregiver cuddles a baby for bottle-feeding, they will have a natural and easy way of learning day after day who to depend on for food and the pleasures of their all-important sucking needs. Eating time is also learning time. Conversations and playful interaction are educational. Older babies who sit well and eat solid foods enjoy eating in groups of three or four as a sociable occasion. Bottles for babies are never propped or carried around by a walking child.

The Center provides Enfamil Premium as a formula choice for parents. Any other formula must be provided by the parents, along with all other food for babies who do not eat the food on DBCC's menu. Talk to your child's teacher about breakfast, snacks, and milk provided by DBCC. The kitchenettes in the infant classrooms provide food storage, preparation areas, and equipment for labeling each child's bottles and food jars.

Parents are also welcome to provide the Center with breast milk if they wish. Comfortable provisions are available for those who would like to breastfeed during the day, or at pick-up or drop-off times. Our breastfeeding room has an electrical outlet and access to a

nearby sink. We welcome all parents to use this room for quiet one-on-one time with their infant, whether or not they are nursing. Since it is not possible to breastfeed for every feeding while your child is in our care, *babies must be accustomed to bottles before starting at DBCC.*

DBCC supports breastfeeding by:

- Having an open door policy for parents. While there is a quiet, private room available for nursing or pumping, breastfeeding is welcome anywhere in our building.
- Encouraging families to supply fresh or frozen breast milk that is labeled and dated properly.

## **Toddler Food**

In the toddler classrooms, children sit at child height tables in small groups during eating times. At this age, children are learning to manage a training cup or a spoon.. Toddlers are offered whole milk with their snacks until they turn two, when they will be offered 1% milk. Children are not pressured to eat more than an amount with which they are comfortable.

An individual feeding plan is developed by caregivers and parents together and reviewed frequently to accommodate feeding changes. Feeding information is recorded on the daily contact sheet on each child's clipboard.

## **Birthday Celebrations**

Some parents like to share their children's birthdays with their friends and classmates. Please keep this a simple celebration. Our nutrition guidelines require us to limit salt, sugar, and fat, but occasional birthday treats (such as cupcakes or cookies) are acceptable. We encourage families to be creative. Birthdays can also be celebrated by bringing in fresh-cut fruit, muffins, a special game to play, or a special birthday book to read. We do not allow balloons because they can create a choking hazard. When planning for birthday celebrations, talk to your child's teacher several days in advance to make sure there are no other special occasions that conflict with your child's special day.

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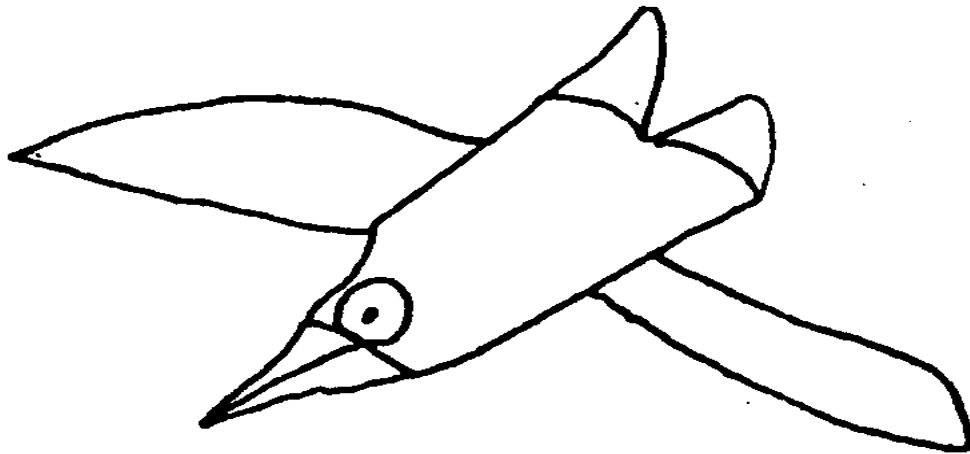
# ASSESSMENT AND SCREENING

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Upon enrollment at DBCC and at the beginning of each new program year, parents are given an ASQ-3 to complete. Children under the age of three are rescreened mid-way through the year. This developmental screening tool gives families and caregivers an overview of a child's development. If a child has an IEP or an IFSP, we obtain a copy for the child's file.

All of the children at DBCC are assessed using the Teaching Strategies Gold Assessment. Additionally, we follow the Maryland State Department of Education recommendation that preschool children participate in kindergarten readiness assessment programs such as MMSR, Setting the Stage, and EC-CAS. For all students, we utilize teacher observations and a portfolio of the child's work to document milestones and skill levels across all domains of learning.

Assessment data is communicated during regular parent-teacher conferences.





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# DISCIPLINE

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Discipline is a multifaceted term. The etymology of discipline is “branch of instruction or education.” At DBCC, discipline is about learning. It is about deciding which things you are going to insist upon. Discipline helps children to interpret their world, learn social skills, and cope with the challenges of daily living. Parents and caregivers frequently talk about and are concerned with discipline—the how’s, why’s, and when’s of setting limits and helping children learn to be self-disciplined. DBCC has a few guidelines for dealing with negative behavior that are in keeping with our understanding of child development and our philosophy.

Children at DBCC are never allowed to hurt themselves or others. Young children don’t yet understand that hitting hurts or why they should be nice and polite. They do understand that hitting, grabbing toys, throwing objects, and biting are not allowed.

Often, we are tempted to have children say “I’m sorry” as a way of resolving a conflict or problem. Young children’s experiences with regret are often more related to not having gotten the toy they wanted than remorse for their actions. Very young children are still learning about cause and effect. It is more important to insist that children take responsibility for their behavior by cleaning up a spill, providing a wet paper towel for an injury, or simply asking “Are you okay?” Although it makes adults feel better to hear children apologize, helping children find alternative things to do or say in expressing angry feelings is a more effective way of developing a conscience. You also help to build their consciousness by setting firm and consistent rules. The ultimate goal is self-discipline.

At different stages, behavior may mean different things. There are no hard or fast rules for handling situations. It is important to look at the child’s developmental age and any extraneous circumstances that may influence the behavior before you decide how to respond to the action. Disciplining takes a lot of patience.

## Infant/Toddler Guidance Techniques

One of our program goals for infants and toddlers is to help babies establish trust in their caregivers as well as in themselves and their growing abilities. A child’s trust is not strengthened by constant “No-no’s” or warnings. It is best to stress circumvention of dangerous situations and, where possible, prevention.

Distraction is a very effective technique with children of this age. Positive rather than negative-oriented expressions can be very helpful in returning infants and toddlers to more acceptable behaviors. Telling a child “We need to pour water into the *pail*,” or “Let’s rock your

doll more *gently* in her chair,” is preferable to saying, “Don’t spill the water on the floor,” or “Stop rocking so hard, you’re hurting your friend.” Using such positive methods aids behavior management.

## Grabbing Toys

Grabbing toys is very common when very young children get together. Children who grab toys are not necessarily being bad or aggressive. They have not yet come to understand that they can’t have everything they see. Often, all they require is help with the language needed to acquire the desired object. A child who grabs objects from others repeatedly and frequently may need help settling down to focus on play. They may be indicating a need for adult attention. DBCC’s emphasis on developing self-regulation and executive function helps children build the focus necessary to engage in play without infringing on others.

## Time Outs

We do not use time outs in the traditional way. We do not expect children this young to understand why they need to sit apart from their peers for a specified period of time. We do believe it can be constructive to remove a child from a situation and redirect their behavior, telling them, “You are having a hard time doing so-and-so. Let’s find something else for you to do.” Then, teachers make sure the child is well settled and involved before gradually releasing them to pursue their own play again. This gives the teacher an opportunity to express dissatisfaction at the child’s behavior and to gently explain a more appropriate way to play. By doing this, we help the child work towards *self-control* as opposed to adult control.

## Language

At DBCC children are encouraged to use words to express their feelings and work out difficulties. We believe even the youngest children should be exposed to verbal problem-solving. Teachers try to put a non-verbal child’s feelings into words: “You are angry because Katie took your toy”; “That makes you sad”; “No! You are saying, No, don’t hit me!” It is important to show how physical acts can be expressed verbally. Teachers must always model good communication skills. Needless to say, we never hit the child or use any form of physical punishment. We also believe children should be allowed to express their feelings verbally no matter how loud or negative they may sound.

Older children quickly learn that words can hurt other people’s feelings but may need some help in working this out with their friends. Sometimes this takes the form of teasing, which initially requires a teacher’s intervention. Teachers can help by explaining the effect the child’s words have on others and encouraging the child to express their own feelings verbally. For example, a teacher say to a child, “Look at John’s face. That hurt his feelings when you said that. Are you angry at John?” This aids older children in learning to handle teasing without a teacher, which is always our goal.

## **Prevention**

Prevention is often the best means of avoiding a potentially difficult situation. This is especially true with younger children. Teachers are skilled in recognizing trouble spots and try to intervene before a situation can escalate. Sometimes teachers will hold back and let children deal with a problem on their own and then compliment their effort. Preschoolers need a supportive environment to encourage conflict resolution and consensus-building skills.

## **Environment**

Discipline problems are diminished when a classroom is well organized with private spaces, cozy spaces, useful work areas, good traffic flow, and an aesthetic appeal. Behavior problems can actually be created and exacerbated in room that is poorly designed. A seemingly unmanageable group of children can be transformed by making adjustments to their environment. DBCC constantly analyzes the spaces children use for safety, functionality, and general potential for improvement because we know the environment is a very crucial element in a successful program.

## **Setting Limits**

We avoid many discipline problems by setting firm limits. Simply put, we mean what we say. Most of our limits are safety related and, therefore, non-negotiable. The three basic rules for the classroom are:

1. A child may not bother others at work at play,
2. A child may not endanger themselves or others,
3. Children must take care of classroom materials.

Making these limits clear to children keeps testing to a minimum. Children that break these rules take responsibility for their actions. Games that are broken are repaired by the child, with help from a teacher when necessary. An aggressive child helps doctor a child they have injured fetching ice or a cold paper towel. Our goal is for children to develop the skills they need to be self-controlled and to work out their own problems without needing teachers to act as police officers.

## Biting

Young children bite for many reasons. They may be teething, hungry, experimenting with the feel of their mouth on an object (other people are often seen as objects to very young children), or angry and out of control. Young children are in what is known as the “oral” stage. Everything goes into their mouths. This is their first means of exploring and learning about their world. The mouth is also the first source of comfort for young children. Children may resort to this primary means of expression when they become frustrated, angry, upset, scared, or homesick. Biting is scary to both the biter and the victim. Children who are going through a stage of biting need close and constant supervision. We don’t want the biter to be labeled or get a bad reputation. It is important to consider what else is going on in the child’s life. Difficult experiences such as weaning, toilet teaching, changes in their environment, or a new sibling may be related to biting behaviors. When children make developmental leaps in one area, they often regress in other areas.



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# TRANSITIONING TO A NEW CLASSROOM AT THE BEGINNING OF A NEW YEAR

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DBCC is fortunate that our center is small enough for the teachers to get to know all the children, even those children not in their own classroom. As new class lists are formed, teachers pay particular attention to the children who will be in their new class. There is a slow and steady effort to allow the relationship between teacher and child to develop in an unforced manner.

By the end of July, parents will be notified in writing about their child's class placement and who their new teachers will be. Parents need to be aware that there is never a guarantee their child will be matched with a specific teacher. DBCC thoughtfully plans each teaching team year-to-year and, on rare occasions, teachers leave unexpectedly.

In order to alleviate unnecessary anxiety for your child, we request that you put some thought into when and how you introduce the idea of being in a new class to your child. You may want to casually visit the new room in the morning or afternoon from time to time; you don't however, want to create too much excitement about the new room because your child can misinterpret your feelings and become overly anxious.

Currently enrolled infants and toddlers will individually visit their new rooms numerous times with their primary care provider. Currently enrolled preschool children will visit their new classroom as a group one to three times, depending on their age. During these visits, children will be allowed to play and explore the classroom. Teachers will take cues from the children to determine how much visiting is necessary.

Teachers will contact parents of the new children starting in the upcoming fall by August 1<sup>st</sup> to schedule a time to visit and discuss a staggered entrance.

If you have any questions, please do not hesitate to call or drop by the office. While it can be difficult for both young children and their parents, please be assured that each child will be supported and nurtured to ease them through this change.

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# PARENT INVOLVEMENT & COMMUNICATION

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Close communication is important if we are to provide the best possible experiences for your child. We welcome your questions, comments, and suggestions.

Each classroom has a set of fabric mailboxes with a pocket for each child's parents. Any notices, memos, newsletters, and notes from the teacher or the office will be in this pocket. Please try to check it daily. In addition, the office frequently uses email to communicate with families. To facilitate regular email communication between parents and teachers, each classroom has an iPad and access to a laptop. Infant and toddler teachers communicate with parents through phone calls, emails, daily contact sheets, and in-person conversations. Preschool teachers use all of the aforementioned means of communication, except they do not use daily contact sheets.

Please visit the Center as often as you wish, and feel free to call with any questions or comments. The Director and teachers are always eager to talk with you about your child or the program. Teachers and families should strive to work together to come up with ways to increase parent and family involvement.

Please share your talents with us! Can you build, paint, do small repairs, dance, play an instrument, sew, or plan a cooking project for the children? Are you available to assist in the classroom or on a trip? We encourage families to share aspects of their home culture, whether it's a favorite recipe, family photos, or singing a song in a home language.

## **Conferences**

Individual parent-teacher conferences are scheduled at least two times a year, and additional conferences can be scheduled as needed throughout the year. Teachers are available between 1:30 pm and 3:00 pm daily for telephone conferences.

## **Fall Classroom Meet & Greets**

During the first two months of the program year, each classroom will hold a Meet and Greet in the late afternoon. This is a time when teachers can explain curriculum, classroom expectations, upcoming plans, and answer your questions. This is also a time for you to connect with the other families in your child's class.

## Family Events

Traditionally, DBCC holds two or three family-centered events during the course of the year. In the past we have held:

- A “hootenanny,” where our music teacher sings and engages everyone in music and movement activities.
- A pot-luck dinner, where families bring in food to share, and are invited to eat with their children in the classrooms.
- A pancake breakfast, where grandparents and special friends are invited to join us in the morning for pancakes.
- An international picnic, where families are encouraged to bring in foods that represent their own unique home cultures.

## Parent Resources

We maintain a Parent Information table that is located next to the front entrance to the Center. This is where parents will find community resources such as school pamphlets, information about special services for children with expanded learning needs, articles and newsletters containing information about child development, and copies of our monthly menu.

## Parent Participation

Opportunities are available for parent involvement. Parents are encouraged to attend Board meetings, serve on Board committees, become Class Parents, and help with fundraising and classroom activities. We encourage parents to participate as much as they are able. Each classroom designates one or two “Class Parents.” Class Parents typically work to connect parents via email, possibly organizing class events at the Center or elsewhere. They should be available to teachers as a way of increasing parent support and involvement. For example, Class Parents might try to engage other parents by encouraging them to attend events and field trips. Class Parents have also voluntarily organized giving, coordinated meals and child care for a family in crisis, hosted an end of the year party, and begun a playgroup for families to meet outside of the Center.

## Gift Giving

Parents are under no obligation to give gifts to teachers for birthdays, Christmas, or any other occasion. Sometimes Class Parents will solicit donations for teacher gifts, but choosing to participate is strictly an individual decision. It is by no means a policy of the Center to require parents to donate.

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# DBCC HEALTH POLICY

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Downtown Baltimore Child Care, Inc. ("DBCC") provides outstanding early education and childcare to a diverse community. Prevailing research drives the curriculum, putting play-based, child-initiated learning at the heart of every child's experience. DBCC's children thrive socially, emotionally, physically, and intellectually in the loving care of talented, well-qualified educators.

In order to provide an environment where children and teachers are safe, and protected, DBCC adheres to the following protocols:

## When is a Child Too Ill to Come to DBCC?

A child is too ill to come to the center when s/he cannot fully participate in a day's activities and when the staff is unable to meet their responsibilities and adequately care for your child at the same time.

It is important to note that our days are very active and a child, who returns too quickly to the center after being ill, is more likely to have a relapse.

As working parents, it is vital for you to arrange some back up for times when your child is ill. Time off work, of course, would be ideal but that is not always possible. Relatives, babysitters, or Nanny services are all possible alternatives. Unfortunately, the reality of the situation is that we are unable to provide sick care here at DBCC.

DBCC adheres to these guidelines:

1. **Fever.** A child shall be deemed to have a fever when there is an axillary (under the arm) temperature of 100 degrees or more. In addition, if a fever develops while the child is in school, then the child will need to be picked up and taken home. The child may return to school if s/he has been fever free for 24 hours without medication.
2. **Respiratory Infections.** If a child is ill and requires antibiotics there needs to be a 24 hour period on medication before the child may return to school (i.e. strep throat). Ear infections are not contagious, as long as there is no discharge. "Exclusions of children with respiratory disease with no fever are probably not warranted, because transmission may already have occurred." (i.e., the common cold and coughs)\*
3. **Diarrhea or Vomiting.** Children who are ill and have symptoms of diarrhea or vomiting may not attend the center. If diarrhea or vomiting occur during the school day, the child needs to be taken home as soon as possible and may not return within 24 hours. "Public health and pediatric literature suggest that exclusion from the center reduces secondary cases thus decreasing transmission to other children."



4. **Conjunctivitis.** Known commonly as “pink eye,” conjunctivitis is extremely contagious. In suspected cases, parents will be contacted and in confirmed cases, the child may only return to school after being treated with medication for 24 hours, and any discharge has dried up.
5. **Rashes.** This covers a wide variety from eczema to poison ivy to allergies, etc. If the rash is oozing, then the child may not attend school. If the rash is dry and past infectious transmission, then the presence of a rash in itself is not a reason to exclude a child.
6. **Serious Infections.** If your child has a serious infection such as rubella (German Measles), meningitis, or hepatitis, and less seriously chicken pox, the center should be notified immediately so that preventative measures can be discussed with DBCC’s consulting physician.

\*Quotes are from Pediatric Infectious Disease Journals.

## **Immunization Policy:**

Social justice is a value that permeates all aspects of DBCC’s philosophy, pedagogy, and practice. In keeping with this value and in order to protect the rights of others, DBCC will require vaccination\* for all children who are enrolled in the early learning and care center.

The only exception to this policy is a written physician-ordered exemption from vaccination due to medical reasons (immunocompromised, severe allergy to vaccine components, etc.). Children who are unvaccinated due to religious or personal beliefs will not be enrolled at Downtown Baltimore Child Care, Inc. This policy is implemented to protect those who cannot be vaccinated for medical reasons or those who do not mount an immune response to vaccines.

\*According to guidelines established by the U.S. Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices.

*Special thanks to Dr. Matt Laurens, DBCC’s pediatric consultant, for his help in drafting this policy.*

# IMMUNIZATION REQUIREMENTS

Immunization requirements for licensed child care centers (COMAR 07.04.02) and family day care homes (COMAR 07.04.01) are based on guidelines set by the Maryland Department of Health and Mental Hygiene. Copies of this immunization schedule are available in our office and online.



## Age Appropriate Vaccination Requirements For Children Enrolled In Child Care Programs Valid 9/01/17 - 8/31/18

Per **COMAR 13A.15.03.02 and 13A.16.03.04 G & H**

Vaccination requirements are met only by complying with the vaccine chart below.



Instructions: Find the age of the child in the column labeled "Child's Current Age". Read across the row for each required vaccine. The number in the box is the number of doses required for that vaccine based on the CURRENT age or grade level of the child. The age range in the column does not mean that the child has until the highest age in that range to meet compliance. Any child whose age falls within that range must have received the required number of doses based on his/her CURRENT age in order to be in compliance with COMAR.

Vaccine types and dosage numbers required for children enrolled in child care programs							
Vaccine Child's Current Age	DTaP/DTP/ DT/Td <sup>1,6</sup>	Polio <sup>2</sup>	Hib <sup>3</sup>	MMR <sup>2,4</sup>	Varicella <sup>2,4,5</sup> (Chickenpox)	Hepatitis B <sup>2</sup>	Pneumococcal Conjugate <sup>3</sup> (PCV)
Less than 2 months	0	0	0	0	0	1	0
2 - 3 months	1	1	1	0	0	1	1
4 - 5 months	2	2	2	0	0	2	2
6 - 11 months	3	3	2	0	0	3	2
12 - 14 months	3	3	At least one dose given after 12 months of age	1	1	3	2
15 - 23 months	4	3	At least one dose given after 12 months of age	1	1	3	2
24 - 59 months	4	3	At least one dose given after 12 months of age	1	1	3	1
60 - 71 Months	4	3	0	2	1	3	0

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# MEDICATION ADMINISTRATION

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Medication can only be administered with authorization from a licensed health care provider and a completed, signed Medication Administration Authorization form from the office. The prescription label on the medicine bottle will suffice for authorization from a licensed health care provider. All medication must be in the original container with the label intact.

Prescription medication will not be administered here at DBCC unless the child has already been given at least one dose of the medication at home. Medication may only be administered by a staff member who has completed an MSDE-approved medication administration training.

Topical applications such as diaper cream and sunscreen may be applied without approval from a health care professional, but only with written parental consent (please use the Medication Administration Authorization form for this purpose).



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# CENTER VISITORS

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DBCC, located on the campus of University of Maryland, Baltimore (UMB), is a model child care program and an approved Office of Child Care training site. It is also one of University of Maryland, Baltimore County's (UMBC) Professional Development Schools and a member of the public policy committee of Maryland Family Network (MFN).

Networking with these organizations has benefits for DBCC. We receive scholarship support and grant funding from UMB as well as professional development support from UMBC and MFN. Also, serving on MFN's public policy committee helps DBCC staff stay fully informed about the how the local, state, and federal policy and legislation might impact the smooth running of the center.

As a result of the responsibilities that accompany these affiliations and DBCC's status in the community, the Center hosts frequent visitors. This may include but are not limited to:

- Well-child rotations for third-year medical students
- Physical therapy students
- Pediatric Psychiatric fellows once annually
- Student teachers with majors in Early Childhood Education
- Student observers from local 2- and 4- year colleges
- Project Search interns
- Researchers interested in child health or development
- Student interns and volunteers getting their required hours for high school graduation
- Trainees learning to use and becoming reliable in using the Environmental Rating Scales (ERS) or Classroom Assessment Scoring System (CLASS).
- Administrative personnel or teachers from centers working toward accreditation or EXCELS
- Staff members from the Maryland Department of Education (MSDE)
- Policy makers wanting to see how policies impact practice or wanting to promote child and family friendly policies
- News media wanting to publicize child and family issues

Most visitors come mainly to observe and have very limited interaction with the children. They are instructed to respond to children who seek them out but not to initiate interaction. Student teachers, student interns, and Project Search interns are assigned to specific classrooms and have guidelines for playfully interacting with children; however, they do not support children's daily routines such as feeding or toileting and diapering.

We notify parents in advance when visitors are expected to spend more than an hour in a classroom.

## Students and Volunteers

During the school year, early childhood education students from area colleges and universities may be assigned to DBCC as part of their learning experiences. Professional staff members share skills with these student teachers and supervise their participation.

We also accommodate observers, including medical and physical therapy students, pediatric fellows and residents from the Department of Behavior Pediatrics at the University of Maryland, Baltimore, and nursing students from Coppin State College.

Student teachers and volunteers who are in the Center on an on-going basis must complete a medical screening and may also be asked to complete a criminal background check. Observers, who are typically here for only a few hours, are required to sign in our Visitor's Log, and we retain a copy of their state-issued identification card. Students, volunteers, and observers are never left alone with children, and they are supervised by our regular classroom teachers at all times.

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# CONFIDENTIALITY & PRIVACY RIGHTS

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Contents of each child's personal file are kept confidential. Children's records are kept in the office file cabinet next to the desk of the Administrative Assistant. A child's records are available to:

- A child's classroom teachers to help them obtain the information needed to work effectively with the child.
- Administrators who work directly with the teachers, parents, and consultants.
- Legal parents or guardians of the child who have signed a tuition agreement on file with DBCC.
- Non-custodial caregivers who have written permission from the child's parent(s)
- Consultants, but only with permission of the parents.

Additional records may be kept by teachers in the classrooms that include written observations, assessments, goals, and samples of a child's work. These records are generally kept in classroom closets.

All records pertaining to a child are available to that child's parents or guardians who have a signed tuition agreement on file with DBCC. Children's records are available upon request through a member of DBCC's administration.

Children's individual screening results and assessment information are used to set specific goals for each child. These goals will be unique for each child however we use the goals set by the Maryland State Department of Education for that child's age level as a guide. An individualized curriculum will be planned to help each child meet their individual and group goals.

No personally identifiable information from a child's records will be released without prior written consent of the child's legal parent or guardian. Copies of signed consent forms with a record of disclosures are kept in the child's file.

Requests for information from independent or public educational institutions or from physicians or psychologists will not be released without prior written consent from the child's parent or legal guardian. A consent form signed by the child's parent or legal guardian will accompany any DBCC request for information from any school, agency, center, or professional who has worked with the child.

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## RELEASE OF INFORMATION

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Requests for information from the admissions officers of independent and public educational institutions are always accompanied with a consent form signed by the child's parent or legal guardian. (If not, DBCC will request the parent's written permission in writing before releasing any information.)

Information for admissions purposes is usually requested on a particular school form. If not, DBCC submits a narrative description of the child's physical, social, emotional, and intellectual development as well as interests, strengths and any particular needs.

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## INCLEMENT WEATHER POLICY

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Every effort is made to keep DBCC open on all scheduled days. Weather closing information will be emailed to families and posted on DBCC's Facebook page. You can also call the Center after 6:30 am to check the outgoing message for closing information. If the message is unchanged you can assume that DBCC will be opening at its normal time.

Should roads become hazardous during the day and the Center must close early, a decision will be made by 1 pm and you will be notified by email and/or a phone call. Please respond so we will know you have received the information. The Center Director will provide all families with detailed information regarding inclement weather on-going throughout the program year.

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## EMERGENCY PROCEDURES

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The DBCC staff is dedicated to the health and safety of your child. In the event of an accident, we will administer first aid, contact emergency medical services if appropriate, and call you. Please keep your telephone numbers and where you can be located during the day current at all times. Also keep current the information concerning the person to contact if you cannot be reached.

Parents are required to purchase a School Accident Insurance Policy. The charge is \$5 per year and is due with the first month's tuition. School accident insurance covers any personal out of pocket expenses if your child requires emergency medical care due to an accident while at the Center, on the way to the Center, or on the way home from the Center.