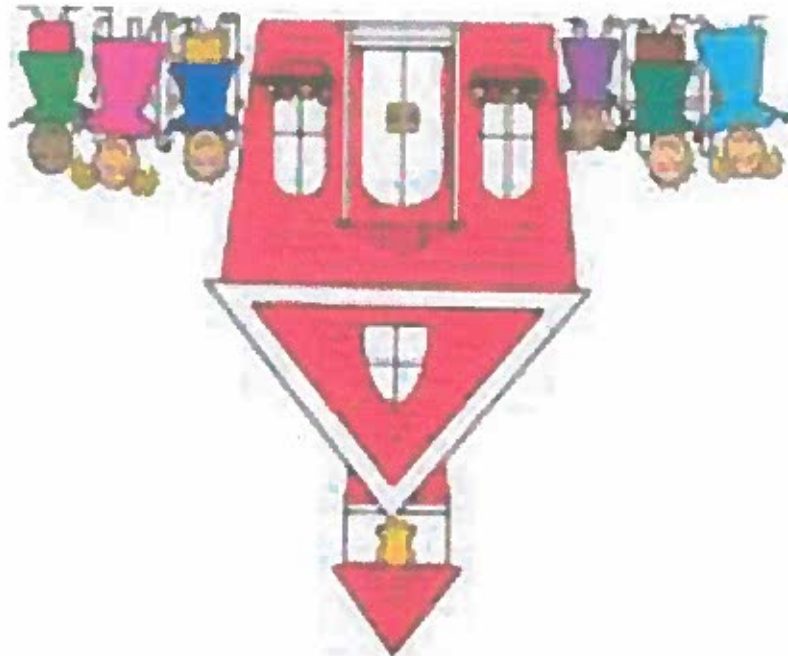


YMCA of Greater Westfield
67 Court Street
Westfield, MA 01085
(413) 568-8631 fax (413) 572-3995
www.westfieldymca.org



PRE-SCHOOL REGISTRATION PACKET FOR THE 2018-2019 SCHOOL YEAR

FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY



Welcome!
We are pleased to have your family join us during the 61st year of the Westfield YMCA
Preschool. This handbook will provide you with information about our program.

LEADERSHIP

The YMCA of Greater Westfield is proud to offer an experienced staff that is
Department of Early Education and Care qualified. Teachers are chosen on the basis of
skill and ability, experience and personal warmth. All of our staff has a criminal
background check (CORI check), First Aid, CPR, and Child Abuse Prevention training.
Above all our teachers have one thing in common-a love for working with children. The
nursery school program is licensed by the Massachusetts Department of Early Education
and Care. For concerns or info on our program you can contact EEC there address is:
Department of Early Education and Care
1441 Main St
Springfield, MA. 01103
413-788-8401

Requirements for Administration

The Westfield YMCA Preschool director is a full time administrator. She will be
responsible for developing and maintaining the early childhood education program of the
center, including but not limited to such functions as daily activities for the children,
including children with special needs, health and safety, nutrition program, field trips,
family involvement and social services. The director is responsible for staff supervision,
development and training. The director must be Massachusetts EEC Director II qualified.

Provisions for Temporary Absence of Administrator

In the event that the Director of the YMCA Preschool is temporarily absent from the
premises, a staff person who is lead teacher qualified will be appointed temporary
administrator. The entire staff will be informed who is in charge. If the administrator is
to be absent more than 2 weeks a person who is Director II qualified must be appointed.
No staff person will perform administrative duties when they are assigned teaching duties
with groups of children.

Business Management Policy

All Preschool accounts, books, payment of bills and records will be kept by the YMCA
Business Manager.
All Preschool tuition payments will be paid and recorded at the YMCA main reception
desk by the reception desk staff.
All Financial Assistance will be applied for through the Preschool Director.

All Financial Assistance records, teacher EEC required records and children's records
will be maintained by the Preschool Director.

All personnel records will be maintained by the YMCA Business Manager.

INTAKE PROCEDURE FOR CHILDREN IN PRESCHOOL

Child should be 3 years old by September 1st for 3-year-old group.

Child should be 4 years old by September 1st for 4-year-old group.

Child should be 5 years old by September 1st for 5-year-old group.

Exceptions are made for age, if after a visit with the family and child the director and family agree the child will be comfortable in a different age group.

No child under 2.9 years of age will be admitted.

The family and child will be shown the school including classroom, outside play area, gym and swimming pool. Families will be informed about curriculum, snack, free play, outside play, field trips and swimming. They will be given a family handbook and all Department of Early Education and Care required information. They will meet the teachers and be informed of all fees and tuition.

If a child with a disability wishes to enter the program, the Preschool will make every effort to accommodate that child with changes or modifications in participation in school activities, size of group and appropriate staff/child ratio.

If the Preschool feels these modifications will cause an undue burden on the center, the family will be notified in writing within 30 days. Toileting needs will not be considered and undue burden. The determination of undue burden will include:

1. Nature and cost of accommodations.
2. Ability to secure funding or services from another source.
3. Financial resources.
4. Number of persons employed by center.
5. The impact of such action on the center.

Research and Experimentation, Unusual Treatment

The Westfield YMCA Preschool will conduct no research, experimentation or unusual treatment involving children without the written, informed consent of parents or guardian. No physical harm will come to the children. When observations are allowed by students parents will be given written notice. There will be no interaction between the children and observers. There will be no identification of individual children.

Unauthorized Activities

The Westfield YMCA Preschool will not authorize any activities not related to the direct care of the child without written consent of the parent or guardian.

FINANCIAL POLICIES

The following financial policies are written to ensure that quality preschool is consistently available. The fee amount has been determined based on the cost of providing quality services including materials, supplies, equipment and a well-qualified, educated staff. Fees from tuition are used exclusively for the operation of the school and the purchase of equipment. Because the school's financial obligations are constant, refunds cannot be made because of absence. Registration is for a full school year and parents will be responsible for giving two weeks notice if they intend to withdraw a child from the program after the school year has begun.

Tuition is due the first of each month. If it is not received by the 10th of the month, a reminder will be sent to you. If payments are two months in arrears, you will be asked to withdraw your child from the program until arrangements are made or the amount due is paid in full. Tuition checks made out to the YMCA, can be paid at the main reception desk of the Y or mailed to 67 Court St. Please write your child's name on the notation line of your check. Checks returned due to insufficient funds will be assessed a \$25.00 service charge by the YMCA and re-deposited only once. Should this happen a second time, payment must be received in cash for that bill and for any other fees for one year. Pre school can be paid for with a credit card.

FEEES AND PAYMENT SCHEDULE

A fee of \$25.00 is payable upon registration and not refundable if registration is canceled. Tuition is payable in 9 equal payments by the first of the month, September through May.

2.9-3-year-old program - \$1170.00 (\$130.00 per month)
Tuesday and Thursday 9:00AM-11:30AM 12 children per group

3 & 4 year-old program - \$1422.00 (\$158.00 a month)
Monday, Wednesday, Friday 9:00AM-11:30AM or 12:30-3:00PM 12 children per group

3 & 4-year-old program - \$3384.00.00 (\$376.00.00 a month) Combo class
Monday, Wednesday, Friday 9:00AM- 3:00PM 12 children per group

4 and 5 year old program - \$2115.00 (\$235.00 per month)
Monday through Friday 9:00AM-11:30AM or 12:30-3:00PM 12 children per group

4 and 5 year old program - \$4860.00 (\$540.00 per month) Combo class
Monday through Friday 9:00AM-3:00PM 12 children per group

5 year old program (pre-K Room) \$5193.00 (\$577.00 per month)
Monday through Friday 9:00AM-3:00PM

Enrichment 5 Sessions- Tuesday and Thursdays 12:30PM-2:30PM \$75.00 per session (without lunch bunch). With lunch bunch \$155.00

Extended Day Care Sign-Up Form

Offered Monday – Friday from 7:00AM-9:00AM & 3:00PM-5:00PM at Hanks House.

The Y does not provide BREAKFAST.

The AM cost is:

- 2 days- \$20.00 per week
- 3 days- \$25.00 per week
- 5 days- \$38.00 per week

The PM cost is: A snack will be provided in the afternoon.

- 2 days- \$20.00 per week
- 3 days- \$25.00 per week
- 5 days- \$38.00 per week

Lunch Bunch \$5.00 per day

If two children from the same family are enrolled simultaneously in the preschool program the fee will be \$50 less per year (\$5 per month) for the second child. This reduction is not in available for families with children on financial assistance.

Financial assistance is available through the YMCA Partners with Youth

Westfield YMCA Preschool Statement of Purpose

The Westfield YMCA Preschool provides experiences in which preschool children will learn through play. The children will find security, support and satisfaction with patient and consistent teachers. They will use equipment and furnishings geared to size and materials to encourage creativity. They will have opportunities to share, take turns and respect the rights of others. The children will develop a confident sense of self-worth and a life long love of learning that leads to future academic success.

The goals of the Westfield YMCA Preschool encourage children to:

1. Grow in independence
2. Develop self confidence
3. Develop self discipline
4. Increase their ability to listen and follow instructions
5. Learn to relate to other children and adults
6. Learn non-sexist human roles
7. Learn large and small motor skills
8. Learn to understand and control the physical world
9. Learn new words and develop language skills
10. Learn to give and share
11. Develop positive feelings about the world and its people
12. Develop positive feelings about school

The YMCA Preschool serves all girls and boys between the ages of 2.9 and 5 years in a 2, 3 or 5 half-day or 5 day full day in our pre-k room, developmentally appropriate preschool program.

PROGRAM

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GOALS

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GENERAL INFORMATION

The clothing worn to school should permit freedom of movement, be easily washable and practical for vigorous play. All clothing, both indoors and outside wear, should be easily manipulated to encourage children to help themselves when dressing and undressing. Pull over shirts with slacks or jeans are excellent for both boys and girls. Sneakers or rubber-soled shoes should be worn for safety. **No Flip-flops please.**

We have a supply of extra clothing for your child in case the need arises. These should be washed and returned promptly.

Each child should bring a bag or backpack to school each day for carrying home special papers and artwork. When swimming begins a bag will be needed for a bathing suit and towel.

If something is lost or forgotten at school, please check the lost and found box in the school hallway.

CHILD GUIDANCE

The Westfield YMCA Preschool believes in accentuating the positive rather than negative behavior of the children in the preschool program. The preschool staff uses child guidance techniques such as setting reasonable and positive expectations, offering choices and providing children an opportunity to verbalize their feelings, which encourage children to develop self-control through understanding. Where appropriate and feasible children will be encouraged to participate in the establishment of rules and policies with experience charts, songs, stories, and dramatic play.

In particular instances time out may be needed in preschool school. If time out and removal from group is required, children are reassured that the action and behavior, not the child, are the reasons and when ready to return to the group, he/she may do so. Time out will be no longer than 5 minutes. Time out will consist of the child sitting apart from the group where the teacher can still supervise him/her. Time out will never be used as a form of belittling or humiliation.

If continued behavior problems persist, if a child may be harmful to himself/herself or others, family consultation with teacher, director, and possible referral action is taken.

At no time does the Westfield YMCA Preschool allow:

1. Spanking or other corporal punishment of children
2. Subjecting children to cruel or severe punishment such as humiliation, verbal or physical abuse, neglect, or abusive treatment
3. Depriving children of meals or snacks
4. Force feeding children
5. Disciplining a child for soiling, wetting or not using the toilet, or forcing a child to remain in soiled clothing or forcing a child to remain on the toilet, or using any other unusual or excessive practices for toileting.

HEALTH

A medical history and physical examination form completed by the child's physician must be presented upon entrance to school. These medical forms must be kept current. Therefore your child must have a physical once a year on or near the child's birth date. A developmental history will also be required.

Recommended immunizations by age 2 years: 4 doses of DPT, 3 doses of polio, 1 dose of MMR, 4 doses of Hib, 3 doses of hepB, 1 dose of varicella vaccine or physician-certified history of chickenpox disease plus a LEAD screening. Children must have the immunizations listed unless exempted for medical or religious reasons.

Minimum first aid will be administered by the teacher in case of an accident. Further treatment will be referred to the family. If an emergency exists, family and child's physician will be notified. If immediate family members cannot be reached, emergency contact, given on child's history form, will be called. The child will be transported by ambulance to Noble Hospital unless parents request other specific arrangements.

ALLERGIES

Any allergies to foods, chemicals or other materials should be listed in the "Allergies" section of the child's information form. Please include any reactions and treatments of the allergies. This information will be placed on a master list and posted in the director's office, classrooms and snack room. All staff will be informed of children's allergies. Because in past years we have had children enrolled in our program with peanut or peanut butter allergies, we will not serve it for snack.

PARENT INVOLVEMENT

Parents are allowed to make unannounced visits to the YMCA Preschool while their child is present.

Parents are encouraged to provide input in the development of the center programs and policies by filling out a Parent Survey and bringing suggestions to the Preschool teachers and director. If a parent makes a suggestion for a policy or program change and the Preschool cannot adopt this change, the parent can request a written response.

PARENT CONFERENCES AND REPORTS

The Westfield YMCA Preschool will make the staff available for conferences with parents. It will provide parents with written progress reports at least every 6 months or every 3 months for children with disabilities. Special problems or significant development will be brought to the parent's attention as soon as they arise.

A child's school record will be available to the parent at all times.

SEPARATION AND ADJUSTMENT

Each child is a unique individual and therefore, there will be a wide range of separation reactions. While some children, particularly those who have attended a program before, may make an easy adjustment, other children will need a longer period of time to feel comfortable. Your presence at school may be required as a sign of familiarity and reassurance. Hesitation is a natural reaction to new situations but with a healthy beginning; fears, anxieties and regressive behavior (irritability, bed wetting etc.) will soon pass. Patience, understanding and compassion for the child's feelings are important.

If after the first days of school your child still needs your presence, we encourage you to gradually separate by staying for a short time at the beginning of each session and returning before the session is over.

We believe that a positive initial separation experience will help your child's adjustment to new situations that arise through life. Many children faced with separation due to school may have anxiety and doubts but with careful attention this can become a happy and rewarding experience and the foundation for a child's feelings about school in future years.

BEGINNING THE DAY

When children are brought to school, take them into their classroom each day. Do not leave until you are sure that your child's teacher knows of your arrival. Try to be calm and secure when you bring your child to school. This will help your child feel comfortable about beginning his/her day.

There may also come a time at some point in the year when a child will say, "I don't want to go to preschool." While it may be the result of an incident at school, it often is a means of testing parents. Sometimes the thought of facing the "howling mob" that morning may seem overwhelming or Barney on TV may seem more appealing. In most cases unless there is genuine anxiety, the best way to handle such a situation is by calmly continuing to help the child get ready for school. Be sure to let the teacher or preschool director know if this difficulty arises. Helpful suggestions are available.

Please do not allow children to bring toys from home to school. At school the toys and equipment belong to everyone and it is soon learned that each child has a right to a toy until it is given up within a reasonable length of time. It is often hard to prevent something from getting broken or lost. Sharing a book or record or something for the nature table is encouraged. A security toy or blanket will sometimes be a comfort to a child during the first days of school. After the first several sessions, we will encourage the child to keep this important article in his/her cubby.

Guns and other violent toys are not allowed in school. We are concerned over the increase of violence in the lives of young children in American society. Gunplay is discouraged.

ENDING THE DAY

Please be prompt when picking up your child. If it is not possible to be on time, call the preschool school office and let us know when we can expect you. Children sometimes become afraid that they have been forgotten if they are not called for at their usual time

When you pick up your child, show him/her that you are really glad to see them. Two or three hours are a long time for your child to be away from you. They have missed you and want to know that you have missed them too.

Perhaps instead of "What did you do today?" you could ask "Did you have a good time today?" or "Tell me something you liked doing today." Often children begin to express themselves when they feel that they are not under pressure to "tell everything."

SHARING TIME WITH YOUR CHILD

Talk with your child and listen when they talk to you. This encourages speech and language development. When you listen you can find out what they think and how they feel.

Read to your child. Visiting the library and borrowing books is a wonderful way to spend an afternoon.

Take trips outside your neighborhood and talk to your child about what you see.

Give your child a few simple chores to do at home. This helps a child develop a sense of responsibility and importance.

Bedtime can be a comforting and relaxing time when you read a quiet story and chat about what has happened during the day.

FAMILY PARTICIPATION

We encourage family participation. Families have enjoyed sharing their musical talents, including piano, guitar and singing. Some families have shared their creative abilities in art and cooking projects. Others have brought pets to school. Speak with the director or your child's teacher. We welcome your ideas and appreciate your help. Our school program enhances your teaching at home. Teachers and families can work together to help children live up to their best capabilities and develop their individual personalities.

Families are encouraged to take part in the following:

Individual conferences with the director and teachers. During the year families are encouraged to discuss with the teacher or director, concerns they may be having at home, just as the staff may ask to speak with them about any concerns at school. It is helpful if families notify us of any major changes, such as a death, move, divorce or hospitalization. We also want to know about your child's positive reactions to school. Family/Teacher Conferences are scheduled once a year or can be arranged upon request. Progress reports are provided twice a year.

There will be times when extra hands are needed at school, especially with projects during holidays. Families always have fun helping and are usually amazed at how much the children are capable of doing.

Field Trips will be scheduled during the year and families are often asked to help chaperone. Suggestions for field trips are always welcome.

Our swim program needs family participation to run smoothly. Helping the children in the locker room and acting as a spotter while the children are in the pool are important jobs. A schedule will be sent home with each family assigned to one class in rotation. Each family will be asked to help once every 5 or 6 weeks. A Family/Child swim time takes place during the last class for each group at the end of the school year. We will schedule a meeting to explain our swim program before classes begin.

Families are welcome to visit school at any time. Never judge your child's behavior by what happens on that particular day.

FAMILY EDUCATION AND WORKSHOPS

Westfield Community Partnerships for Children will be offering educational workshops throughout the year as a resource for families. They will present topics important to today's families through videos, speakers and discussion. If there are topics you would like to see addressed please suggest them to your child's teacher or the director.

FAMILY EVENTS

Throughout the year we will be offering events for families - holiday celebrations, family swim and picnics. It is our desire to support the entire family and to offer activities that you can enjoy together.

SCHEDULE

The daily schedule will include teacher-guided activities, group and individual exploration and play.

Play Room 1:15

Block play, dramatic play, water and sand table play,

Puzzles, small manipulative toys, cooking, story and circle time,

Show and Tell, discussion

Art:25

Creating with paint, crayons, chalk, paper, recyclables, clay

and finger-paint

Music:25

Singing, dancing, stories, conversation, puppets, musical instruments

Outside Play Yard or Gym:25

Climbing, sand play, balance beam, fitness exercises and playscape.

In addition to the daily schedule the Preschool provides:

Snack - apple juice, fruit, crackers, cookies, pretzels or trail mix.

YMCA preschool swim lessons - Each group will participate in swim lessons once a week during their nursery school session. A Parent Information Meeting

will be held before swimming begins.

SNACKS

Snacks will provide one item each from two basic food groups.

Example: Water-and a fruit or vegetable

Ritz Cracker from the bread group

Children will receive an adequate amount and variety of food. They will be allowed to eat at a reasonable and leisurely pace. No child will be denied snack for any reason other than a written medical direction. Children will not be forced or coerced to eat against their will, but will be encouraged to eat at snack time. Snacks representing a particular ethnic group of a child enrolled in the program will offered regularly.

TOILETING

No child will be punished, verbally abused or humiliated for soiling, wetting or not using the toilet. Children will be supervised while using the bathroom, either by their teacher, an aid or the director. They will wash their hands with soap and running water after toileting. Individual towels will be used to dry hands.

CLASSROOM TEACHERS OR TEACHER AIDES ARE NOT ALLOWED TO WIPE A CHILD AFTER USING THE BATHROOM.

Clothing soiled by feces, urine, vomit or blood will be bagged in plastic, stored apart from other items and returned to families.

A change of clothing will be available for each child. Center-owned clothing will be available for changing as well as clothing brought from home. Center borrowed clothing must be laundered after use and returned to the school within 5 days.

No child will be allowed to go with any person other than his/her parent or guardian without permission from the parent or guardian. If you are carpooling to and from preschool, make sure your child's teacher is aware, in writing. If there is a change in the scheduled transportation of your child, please notify the school in writing.

1. Park in rear parking lot with car motor off.
2. Guide your child up and down the stairs.
3. Bring your child into the classroom.
4. Do not allow your child to run in the parking lot.
5. Do not leave children unattended in your car or the parking lot.
6. Be sure a member of the staff is aware of your arrival and departure.
7. Do not park in spaces for the handicapped unless applicable.

PARKING REQUIREMENTS

If the Westfield public schools are closed due to stormy weather, preschool will be closed. Radio stations WHYN 560AM and 93FM and TV station WFLP channel 22 will announce the closing. If the public schools have a one or two hour delay and cancel AM kindergarten, preschool will be in session at the regular time. If the public schools close at mid-day do to worsening weather, the nursery school will close. An announcement will be made on local radio and TV stations about the closing. Preschool will be in session if the public schools are closed for any reason other than inclement weather, the unless notified on local radio and TV stations. If there is school during bad weather, the final decision concerning school attendance must rest with the individual parent.

INCLEMENT WEATHER POLICY

When your child is going to be absent from preschool, please call the YMCA reception desk by 8:30AM if possible, and let us know the reason for the absence. This helps us know if a child has a serious illness or if we have an infectious illness that could spread to other children and their families.

ABSENCE

Staff will wash their hands with liquid soap and running water for at least 10 seconds and dry them with a disposable towel. Avoid recontamination from faucets by turning off faucets with towel:

Upon arrival
Before preparing or serving food
After assisting children with toileting or nose wiping
After handling pets or animals
After contact with any potentially infectious materials, including bodily fluids.

Children will wash their hands with liquid soap and running water and dry their hands with a paper towel.
Upon arrival
Before snacks, meals, or handling food
After toileting or nose wiping
Handling center animals
Children will be supervised during hand washing. Immediately following hand washing, children will return to their table for snack.

HAND WASHING

FIELD TRIPS AND SPECIAL VISITORS

During the school year the children will take field trips to places such as the library, fire station, pumpkin patch, Discover Westfield Children's Museum, Noble Hospital and Gran-vale Farm and Scoop. Our special visitors may include a police officer, mail carrier, farm animals, pets and parents with special talents or hobbies. There will be special occasions such as birthdays and holidays. If you wish to have a special birthday celebration at school or if you would like to provide a holiday treat, please discuss this in advance with your child's teacher.

Volunteers and Student Interns

Volunteers including student teachers or interns will be chosen for their ability to meet the needs of children and will be provided appropriate orientation, training, supervision, and staff development.

Each volunteer, student teacher, or intern who has unmonitored contact with children will have a background that is free of conduct that bears adversely on his or her ability to provide for the safety and well being of the children. For each staff volunteer, student teacher or intern the licensee will have evidence of compliance with 102CMR 7 COR1 and have conducted and documented two reference checks.

In the event the volunteer is a parent who has a child enrolled in the program and the parent is not included in the required staff/child ratio then 102CMR 7 COR1 is not applicable.

The licensee will describe in writing any arrangements with any school or professional training program, including a description of student responsibilities and supervision of students by the school or training program and the Westfield YMCA Preschool.

We currently have interns from Westfield State University, Bay Path College, and Holyoke Community College.

TRANSPORTATION PLAN

Five Star Transportation of Southwick, MA, will provide transportation of children on field trips. The driver and vehicle will conform to Massachusetts school bus requirements as contained in M.G.L., c.90 and 540CMR 7.00 (Minimum Standards for Construction and Equipment of School Buses). A teacher and an asst. teacher will accompany each group on the trip. A first aid kit and emergency numbers for the children will be available on the vehicle. Each group of children will ride the bus no more than 2 or 3 times during the school year for field trips. If case of an accident or emergency the Five Star Transportation (the school bus company) must be called. An accident report or citation will be on file with Five Star. The YMCA staff on the bus will call the Youth Development Director and or Asst. Youth Development Director and the children parents will be notified. Five Star Transportation info is:

Five Star Transportation
809 College Highway
Southwick, MA. 01077
413-789-4789



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Standard 3.6.1.1: Inclusion/Exclusion/Dismissal of Children

Preparing for managing illness:

Caregivers/teachers should:

- a. With a child care health consultant, develop protocols and procedures for handling children's illnesses, including care plans and an inclusion/exclusion policy.
 - b. Review with all families the inclusion/exclusion criteria. Clarify that the program staff (not the families) will make the final decision about whether children who are ill may attend. The decision will be based on the program's inclusion/exclusion criteria and their ability to care for the child who is ill without compromising the care of other children in the program.
 - c. Encourage all families to have a backup plan for child care in the event of short- or long-term exclusion.
 - d. Consider the family's description of the child's behavior to determine whether the child is well enough to return, unless the child's status is unclear from the family's report.
 - e. A primary health care provider's note may be required to readmit a child to determine whether the child is a health risk to others, or if guidance is needed about any special care the child requires.
- Daily health checks as described in [Standard 3.1.1.1](#) should be performed upon arrival of each child each day. Staff should objectively determine if the child is ill or well. Staff should determine which children with mild illnesses can remain in care and which need to be excluded.

Staff should notify the parent/guardian when a child develops new signs or symptoms of illness.

Parent/guardian notification should be immediate for emergency or urgent issues.

Staff should notify parents/guardians of children who have symptoms that require exclusion and

parents/guardians should remove the child from the child care setting as soon as possible.

For children whose symptoms do not require exclusion, verbal or written notification of the parent/guardian at the end of the day is acceptable.

Most conditions that require exclusion do not require a primary health care provider visit before reentering care.

Conditions/symptoms that do not require exclusion:

- a. Common colds, runny noses (regardless of color or consistency of nasal discharge)
- b. A cough not associated with fever, rapid or difficult breathing, wheezing or cyanosis (blueness of skin or mucous membranes)
- c. Pinkeye (bacterial conjunctivitis) indicated by pink or red conjunctiva with white or yellow eye mucous drainage and matted eyelids after sleep. This may be thought of as a cold in the eye. Exclusion is no longer required for this condition. Health professionals may vary on whether or not to treat pinkeye with antibiotic drops. The role of antibiotics in treatment and preventing spread of conjunctivitis is unclear. Most children with pinkeye get better after 5 or 6 days without antibiotics. Parents/guardians should discuss care of this condition with their child's primary care provider, and follow the primary care provider's advice. Some primary care providers do not think it is necessary to examine the child if the discussion with the parents/guardians suggests that the condition is likely to be self-limited. If no treatment is provided, the

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child should be allowed to remain in care. If the child's eye is painful, a health care provider should examine the child. If 2 or more children in a group develop pinkeye in the same period, the program should seek advice from the program's health consultant or a public health agency.

d. Watery, yellow or white discharge or crusting eye discharge without fever, eye pain, or eyelid redness
e. Yellow or white eye drainage that is not associated with pink or red conjunctiva (i.e., the whites of the eyes)

f. Fever without any signs or symptoms of illness in children who are older than four months regardless of whether acetaminophen or ibuprofen was given. For this purpose, fever is defined as temperature above 101 degrees F (38.3 degrees C) by any method. These temperature readings do not require adjustment for the location where they are made. They are simply reported with the temperature and the location, as in "101 degrees in the armpit/axilla".

g. Rash without fever and behavioral changes. Exception: call EMS (911) for rapidly spreading bruising or small blood spots under the skin.
h. Impetigo lesions should be covered, but treatment may be delayed until the end of the day. As long as treatment is started before return the next day, no exclusion is needed;
i. Lice or nits treatment may be delayed until the end of the day. As long as treatment is started before returning the next day, no exclusion is needed;
j. Ringworm treatment may be delayed until the end of the day. As long as treatment is started before returning the next day, no exclusion is needed;
k. Scabies treatment may be delayed until the end of the day. As long as treatment is started before returning the next day, no exclusion is needed;

l. Molluscum contagiosum (does not require covering of lesions);
m. Thrush (i.e., white spots or patches in the mouth or on the cheeks or gums);
n. Fifth disease (slapped cheek disease, parvovirus B19) once the rash has appeared;
o. Methicillin-resistant Staphylococcus aureus, or MRSA, without an infection or illness that would otherwise require exclusion. Known MRSA carriers or colonized individuals should not be excluded;

p. Cytomegalovirus infection;
q. Chronic hepatitis B infection;
r. Human immunodeficiency virus (HIV) infection;
s. Asymptomatic children who have been previously evaluated and found to be shedding potentially infectious organisms in the stool. Children who are continent of stool or who are diapered with formed stools that can be contained in the diaper may return to care. For some infectious organisms, exclusion is required until certain guidelines have been met. Note: These agents are not common and caregivers/teachers will usually not know the cause of most cases of diarrhea;
t. Children with chronic infectious conditions that can be accommodated in the program according to the legal requirement of federal law in the Americans with Disabilities Act. The act requires that child care programs make reasonable accommodations for children with disabilities and/or chronic illnesses, considering each child individually.

Key criteria for exclusion of children who are ill:

When a child becomes ill but does not require immediate medical help, a determination must be made

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regarding whether the child should be sent home (i.e., should be temporarily "excluded" from child care). Most illnesses do not require exclusion. The caregiver/teacher should determine if the illness:

- a. Prevents the child from participating comfortably in activities;
- b. Results in a need for care that is greater than the staff can provide without compromising the health and safety of other children;
- c. Poses a risk of spread of harmful diseases to others.

If any of the above criteria are met, the child should be excluded, regardless of the type of illness. Decisions about caring for the child while awaiting parent/guardian pick-up should be made on a case-by-case basis providing care that is comfortable for the child considering factors such as the child's age, the surroundings, potential risk to others and the type and severity of symptoms the child is exhibiting. The child should be supervised by someone who knows the child well and who will continue to observe the child for new or worsening symptoms. If symptoms allow the child to remain in their usual care setting while awaiting pick-up, the child should be separated from other children by at least 3 feet until the child leaves to help minimize exposure of staff and children not previously in close contact with the child. All who have been in contact with the ill child must wash their hands. Toys, equipment, and surfaces used by the ill child should be cleaned and disinfected after the child leaves.

Temporary exclusion is recommended when the child has any of the following conditions:

- a. The illness prevents the child from participating comfortably in activities;
- b. The illness results in a need for care that is greater than the staff can provide without compromising the health and safety of other children;
- c. A severely ill appearance - this could include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash;
- d. Fever (temperature above 101°F [38.3°C] by any method) with a behavior change in infants older than 2 months of age. For infants younger than 2 months of age, a fever (above 100.4°F [38°C] by any method) with or without a behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea) requires exclusion and immediate medical attention;
- e. Diarrhea is defined by stools that are more frequent or less formed than usual for that child and not associated with changes in diet. Exclusion is required for all diapered children whose stool is not contained in the diaper and toilet-trained children if the diarrhea is causing "accidents". In addition, diapered children with diarrhea should be excluded if the stool frequency exceeds two stools above normal for that child during the time in the program day, because this may cause too much work for the caregivers/teachers, or those whose stool contains blood or mucus. Readmission after diarrhea can occur when diapered children have their stool contained by the diaper (even if the stools remain loose) and when toilet-trained children are not having "accidents" and when stool frequency is no more than 2 stools above normal for that child during the time in the program day;

Special circumstances that require specific exclusion criteria include the following (2):

A health care provider must clear the child or staff member for readmission for all cases of diarrhea with blood or mucus. Readmission can occur following the requirements of the local health department authorities, which may include testing for a diarrhea outbreak in which the stool culture result is positive for Shigella, Salmonella serotype Typhi and Paratyphi, or Shiga toxin-producing E coli. Children and staff members with Shigella



should be excluded until diarrhea resolves and test results from at least 1 stool culture are negative (rules vary by state). Children and staff members with Shiga toxin-producing E coli (STEC) should be excluded until test results from 2 stool cultures are negative at least 48 hours after antibiotic treatment is complete (if prescribed). Children and staff members with Salmonella serotype Typhi and Paratyphi are excluded until test results from 3 stool cultures are negative. Stool should be collected at least 48 hours after antibiotics have stopped. State laws may govern exclusion for these conditions and should be followed by the health care provider who is clearing the child or staff member for readmission.

- a. Vomiting more than two times in the previous twenty-four hours, unless the vomiting is determined to be caused by a non-infectious condition and the child remains adequately hydrated;
- b. Abdominal pain that continues for more than two hours or intermittent pain associated with fever or other signs or symptoms of illness;
- c. Mouth sores with drooling that the child cannot control unless the child's primary care provider or local health department authority states that the child is noninfectious;
- d. Rash with fever or behavioral changes, until the primary care provider has determined that the illness is not an infectious disease;
- e. Active tuberculosis, until the child's primary care provider or local health department states child is on appropriate treatment and can return;
- f. Impetigo, only if child has not been treated after notifying family at the end of the prior program day. Exclusion is not necessary before the end of the day as long as the lesions can be covered;
- g. Streptococcal pharyngitis (i.e., strep throat or other streptococcal infection), until the child has two doses of antibiotic (one may be taken the day of exclusion and the second just before returning the next day);
- h. Head lice, only if the child has not been treated after notifying the family at the end of the prior program day. (note: exclusion is not necessary before the end of the program day);
- i. Scabies, only if the child has not been treated after notifying the family at the end of the prior program day. (note: exclusion is not necessary before the end of the program day);
- j. Chickenpox (varicella), until all lesions have dried or crusted (usually six days after onset of rash and no new lesions have appeared for at least 24 hours);
- k. Rubella, until seven days after the rash appears;
- l. Pertussis, until five days of appropriate antibiotic treatment;
- m. Mumps, until five days after onset of parotid gland swelling;
- n. Measles, until four days after onset of rash;
- o. Hepatitis A virus infection, until one week after onset of illness or jaundice if the child's symptoms are mild or as directed by the health department. (Note: Protection of the others in the group should be checked to be sure everyone who was exposed has received the vaccine or receives the vaccine immediately.);
- p. Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

Procedures for a child who requires exclusion:

The caregiver/teacher will:

- a. Make decisions about caring for the child while awaiting parent/guardian pick-up on a case-by-case basis providing care that is comfortable for the child considering factors such as the child's age, the surroundings, potential risk to others and the type and severity of symptoms the child is exhibiting. The child should be supervised by someone who knows the child well and who will continue to observe the

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child for new or worsening symptoms. If symptoms allow the child to remain in their usual care setting while awaiting pick-up, the child should be separated from other children by at least 3 feet until the child leaves

to help minimize exposure of staff and children not previously in close contact with the child. All who have been in contact with the ill child must wash their hands. Toys, equipment, and surfaces used by the ill child should be cleaned and disinfected after the child leaves;

b. Discuss the signs and symptoms of illness with the parent/guardian who is assuming care. Review guidelines for return to child care. If necessary, provide the family with a written communication that may be given to the primary care provider. The communication should include onset time of symptoms, observations about the child, vital signs and times (e.g., temperature 101.5°F at 10:30 AM) and any actions taken and the time actions were taken (e.g., one children's acetaminophen given at 11:00 AM). The nature and severity of symptoms and or requirements of the local or state health department will determine the necessity of medical consultation. Telephone advice, electronic transmissions of instructions are acceptable without an office visit;

c. If the child has been seen by their primary health provider, follow the advice of the provider for return to child care;

d. If the child seems well to the family and no longer meets criteria for exclusion, there is no need to ask for further information from the health professional when the child returns to care. Children who had been excluded from care do not necessarily need to have an in-person visit with a health care provider;

e. Contact the local health department if there is a question of a reportable (harmful) infectious disease in a child or staff member in the facility. If there are conflicting opinions from different primary care providers about the management of a child with a reportable infectious disease, the health department has the legal authority to make a final determination;

f. Document actions in the child's file with date, time, symptoms, and actions taken (and by whom); sign and date the document;

g. In collaboration with the local health department, notify the parents/guardians of contacts to the child or staff member with presumed or confirmed reportable infectious infection.

The caregiver/teacher should make the decision about whether a child meets or does not meet the exclusion criteria for participation and the child's need for care relative to the staff's ability to provide care. If

parents/guardians and the child care staff disagree, and the reason for exclusion relates to the child's ability to participate or the caregiver's/teacher's ability to provide care for the other children, the caregiver/teacher should not be required to accept responsibility for the care of the child.

Reportable conditions:

The current list of infectious diseases designated as notifiable in the United States at the national level by the Centers for Disease Control and Prevention (CDC) are listed

at <https://www.cdc.gov/ndss/conditions/notifiable/2016/infectious-diseases/>.

The caregiver/teacher should contact the local health department:

- When a child or staff member who is in contact with others has a reportable disease;
- If a reportable illness occurs among the staff, children, or families involved with the program;
- For assistance in managing a suspected outbreak. Generally, an outbreak can be considered to be two or more unrelated (e.g., not siblings) children with the same diagnosis or symptoms in the same group within one week. Clusters of mild respiratory illness, ear infections, and certain dermatological conditions are common and generally do not need to be reported.

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Caregivers/teachers should work with their child care health consultants to develop policies and procedures for alerting staff and families about their responsibility to report illnesses to the program and for the program to report diseases to the local health authorities

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MANAGEMENT OF INFECTIOUS DISEASE

1. When a child is ill, families are expected to keep him/her at home.
 2. If a child becomes ill at school, he/she will be isolated in the director's office and the family will be notified. The director will request that the parent or a family member will come to pick the child up if this child has diarrhea, is vomiting, shows signs of a rash, or is running a fever.
 3. Until a family member arrives the child will be made comfortable on a vinyl mat.
 4. The director or a qualified teacher will remain with the child.
 5. If a child has been evaluated by a physician and is considered to pose no health risk to himself/herself or other children he/she may return to school.
 6. If there is a communicable disease at the center, parents will be notified on the parent bulletin board or with a letter.
- Infection Control**
1. Staff and children will wash their hands with liquid soap and running water using friction. Hands will be dried with disposable paper towels. Staff and children will wash their hands at the following times.
 - a. Upon arrival
 - b. Before eating or handling food
 - c. After toileting
 - d. After coming in contact with body fluid or discharge.
 - e. And after handling center animals and equipment
 - f. After cleaning
 - g. After assisting children with toileting or nose wiping
 2. The equipment, items, or surfaces are washed with soap, water, and disinfectant using the following schedule.
 - a. After each use:
 - Mops used for cleaning body fluids
 - Thermometers
 - At least daily:
 - b. Toilets and toilet seats
 - Sinks and faucets
 - Drinking fountains
 - Water table and equipment
 - Play tables
 - Mops used for cleaning
 - Smooth surfaced floors
 - At least monthly:
 - c. Washable fabric toys
 - Dress up clothes
 3. All cleaning supplies and disinfectants will be stored in a secure place out of children's reach.
 4. Universal Precautions
 - a. Staff will be provided disposable gloves to be used for the clean up of blood spills and body fluids

- b. The affected area will be disinfected
 - c. Used gloves will be thrown away in a lined container
 - d. Staff will wash their hands thoroughly with soap and water after cleaning the area
 - e. Clothing soiled with vomit, blood, feces or urine will be sealed in a plastic bag and labeled with child's name and returned at the end of the day
5. Staff will be trained on infection control procedures at the beginning of the school year and retained or reviewed half way through the school year.

ADMINISTRATION OF MEDICATION

Medication, whether prescription or non-prescription may be administered to a child only with written parental authorization and written order of a physician (for prescription medication this may include the label on the medication). Families will be notified by telephone before a prescription medication is administered. Authorization is valid for one year.

For non-prescription medication, a statement signed by the physician stating the dosage and criteria for its administration must be presented. Family authorization must be a signed statement allowing the center to administer the medication in accordance with the written order of the physician. Families will be notified by telephone before a non-prescription medication is administered. Authorization is valid for one year.

Topical non-prescription medications such as sunscreen, petroleum jelly or other ointments may be administered to a child with written family permission. A written authorization is a signed statement, listing the specific topical non-prescription medication to be administered and the criteria for administration.

No medication will be administered contrary to the directions on the original container unless authorized by a written order of the child's physician.

All medication will be kept labeled in its original container with the child's name, the name of the drug, and the directions for its administration and dosage.

A written record will be kept on all medications, prescription and non-prescription, that are administered to each child. This record will be part of the child's file and will include:

1. Child's name
2. Time and date of each administration
3. Dosage
4. Staff member's name who administered the medication

All medications will be stored under proper conditions for sanitation, preservation, security, and safety. All unused medication will be returned to the family when no longer needed. If your child is on medication that needs to be administered during program hours:

- *We must receive a completed and signed consent form (the program will supply forms and it is 1 form per medication).
- *Medication must be in a prescription container with correct dosage and your doctor's name on it or the program can not receive or administer the medication.
- *Medication must be given directly from the parent to staff and children can not hold medication with them.
- *When your child/children leave the program the parents or guardians must take the medication with.

*The program is not allowed to mail back or flush any type of medication down the toilet or sink. Medication that is left will be brought to the Youth Development Director or Assistant Youth Development Director and the Westfield Board of Health will be called on how to properly dispose of medication.

*If your child has a chronic illness a corrective plan of action must be written by the doctor on steps to take for the care of your child/children and parents must train the staff that will be working with the child.

This includes prescription medication as well as non-prescription medication.

Children's Specific Health Care Needs

Parents/Guardians are required to fill out a Developmental History of their child upon entry to Preschool. This history includes questions on language use, social relationships, sleep habits, toileting habits, physical disabilities, allergies, medications needed and serious illness.

Teachers are required to read the history and make pertinent notes on each child in their class.

A list of children's allergies is posted in each classroom and the hall.

Injury Prevention

The director and teachers will monitor the Preschool and playground daily and remove or repair any hazard that may cause injury.

All toxic substances, first aid supplies, medication, sharp objects, matches and hazardous objects must be secured and out of the reach of children.

All injuries will be recorded in a central injury log. This log will be monitored weekly to make sure there are no areas that are hazardous to children.

Parents or guardians will be informed of an injury/illness in preschool to a child on the day of the accident. They will be informed of the manner in which the injury/illness occurred and the first aid given. They will receive a written Injury/Illness report within 48 hours of the injury/illness. The report will be completed and signed by the person who witnessed the injury/illness. A copy of the report will be signed by the parent or guardian and placed in the child's file.

When a child must receive medical attention for an injury/illness, a report will be completed by the Director and submitted to the Department of Early Education and Care within 3 business days. A copy of the First Aids cards of the staff involved and a hospital report if applicable must also be submitted.

EMERGENCY PROCEDURES FOR INJURIES AT PRESCHOOL

1. In case of injury in the immediate Preschool area, the classroom teacher will administer the first aid. A teacher assistant or the Art teacher will stay with the remainder of the class.
2. In case of injury in the playground or indoor facility other than the Preschool area, one teacher will administer the first aid and the other teacher and teacher assistant will stay with the remainder of the class. A first aid kit will accompany all classes to the playground or indoor facility.

3. If assistance is needed, the director or person in charge will be notified.

A. Director will contact ambulance if needed.

B. Director will contact reception desk.

C. Director will contact family. (If family cannot be contacted at home, director will call business telephone numbers. If still unable to contact family, director will call emergency number given on child's history form located in director's office.

D. If the director is not available, the person in charge will be responsible for the above.

4. Teachers will keep all children out of the immediate area and occupied.

5. If the accident/injury is minor, have the family take the child home, to doctor, or hospital.

6. All accidents/injuries, minor or major, are to be reported to the family the day they happen.

Tell family first aid measures taken.

7. All injuries are to be documented in an accident report, dated, signed by parent or guardian and put in child's folder. The parent or guardian will receive a copy of the report.

8. All injuries are to be recorded in a central injury log, which is located in the director's office.

9. Any injury that requires medical attention either by child's physician or emergency room treatment must be reported to the Department of Early Education and Care.

EMERGENCY PROCEDURES ON FIELD TRIPS

1. A first aid kit will be taken on all field trips.
2. Children's files will be taken on all field trips.
3. In case of emergency, the teacher will give immediate first aid to child and child will be isolated from the group if necessary.
4. If the director is not with the group, she will be notified at the YMCA.
5. Family will be notified. (If family cannot be contacted at home, call business telephone number. If still unable to contact, call emergency number given on child's history form that will be in file).
6. If child is to be transported to hospital, that child's folder will go with him/her.
7. If on a field trip outside the city of Westfield and a serious emergency arises, the child will be transported by ambulance to the nearest emergency hospital. The classroom teacher will go with the child. Other staff and chaperones will cover the rest of the group.

PREVENTION OF ABUSE AND NEGLECT

According to Massachusetts General Laws Chapter 119, all administrators of child care centers, licensed family child care providers, and their employees (teachers, aides and assistants) are mandated reporters. As such, they are required to report suspected abuse or neglect to the Massachusetts Department of Social Services (DSS). The child care program administrator or designee is also required by the Massachusetts Department of Early Education and Care to immediately file a 51A report or learning that a 51A report has been filed alleging abuse or neglect of a child while in the care of the day care center.

The state does not require that the reporter have proof that abuse or neglect has occurred before reporting. The law specifies reporting of suspected incidents and includes the phrase "reasonable cause to believe." Reasonable cause means that, after examining all the facts in a particular situation, most people with similar training and experience would also suspect abuse. If you are unsure about what to do, call DSS and speak to a trained social worker about your concerns.

A mandated reporter must file a report if he or she has reasonable cause to believe that:

A child is suffering from physical or emotional injury resulting from abuse, including

sexual abuse

A child is suffering from neglect, including malnutrition

A child is physically dependent upon an addictive drug at birth

When there is suspicion of child abuse, the staff person will immediately inform his/her supervisor, who in turn will contact the Executive Director of the YMCA or a designee. The YMCA staff person receiving the initial report is responsible for confirming the facts reported and the condition of the child. This will be done immediately, on the same day the report is received. The responsible staff person will make a decision as to how the child's parent or guardian will be notified of the report. The report will be discussed with the parent or guardian. **Incidents must be reported as soon as they are noticed, since waiting for proof may involve grave risk to the child.**

In the event a reported child abuse incident involves an employed YMCA staff person or program volunteer, the YMCA Executive Director should without exception, suspend the person from all activities involving the supervision of children. Reassignment to administrative functions may be appropriate. Reinstatement of a staff person or program volunteer will occur only after all allegations have been cleared to the satisfaction of the YMCA Director and the investigating agency.

The Westfield YMCA Preschool will cooperate in all investigations of abuse and neglect, including identifying parents of children currently or previously enrolled in the program; providing consent for disclosure to the Department of Early Education and Care of information from, and allowing the Department to disclose information to, any person

and/or agency the Department may specify as necessary to the investigation of allegations and protection of children.

The Child Care Director must notify the Department of Early Care and Education in the case of a death or serious injury/illness that requires hospitalization or emergency medical treatment while child is in the program.

CONTINGENCY PLAN FOR EMERGENCY SITUATIONS

The YMCA of Greater Westfield has a Fire Evacuation Policy that is approved by the Westfield Fire Department. (See next page)

Following is additional information to number 6 on the next page. If children, teachers and parent helpers are in the pool or Girls Locker Room and an emergency prevents them from going to the General Purpose Room, they will leave the building through the emergency exit located at the top of the stairs next to the Cole Pool. The children, teachers, and parent helpers will walk across the driveway to City Hall for shelter until parents can be notified.

In case of loss of power, heat, or water in the mansion, the main building of the YMCA has a generator that will supply power. If we are forced to leave the mansion because of an emergency, the children and staff will go to the General Purpose Room of the YMCA until parents are notified. There is power fail telephone in the main building and also a pay phone. Because preschool is a half-day program, the time parents arrive to pick up their children will not be more than 2.5 hours.

If an emergency situation forces us to leave the main YMCA building during a regular session, we will walk to City Hall Located on 57 Court St and Evacuation procedures are posted in every room in the Preschool. They are practiced once a month at different times of the day.

Emergency Evacuation Procedures for Preschool

Plans to be used when leaving the building in case of an emergency are posted by each exit in the office, all halls and classrooms.

The teachers and teacher assistants will lead the children out of the building. Each teacher will take the day's attendance sheet with her and check to see if all children have left the building. If a child leaves a preschool session early, the time will be indicated on the attendance sheet or if a child leaves and returns, the departure and return times will be indicated. The director will check the classrooms and bathrooms to make sure all the children have exited the building.

Evacuation drills are practiced at least every other month with all staff and children. The director will document date, time, and effectiveness of each drill.

First Drill

Second Drill

Third Drill

Fourth Drill

Fifth Drill

REFERRAL POLICY

The Westfield YMCA Preschool will refer families to appropriate social, mental health and medical services for their child should the center staff feel that such additional services would benefit the child.

When a teacher has a concern either social or medical about a child...

1. The staff person will inform the director of their concern.
2. The staff person and director or another qualified teacher in the center will observe the child and record behaviors for at least six and one half day sessions before making a referral.
3. The staff person and director will meet with the family with documented concerns and observations and any efforts the center may have made to accommodate the child's needs.
4. The director will give to the family a current list of referral services including contact person for chapter 766 and early intervention programs and will assist the family in making a referral. The school will have written family consent before the referral is made.
5. The family will be informed of the right to appeal under Chapter 766.
6. The school will follow up the referral with family permission. If it is determined that the child does not need services at the time, observations and documentation will continue and be reviewed every three months.
7. The nursery school director will keep a written record of any referrals, including the family conference and results.

REFERRAL RESOURCE

Ft. Meadow Early Childhood Center at 35 White St., Westfield will provide assessments on the following: educational, psychological, speech/language, social/emotional, motor development, visual screening, hearing test, physical therapy assessment and occupational therapy. Ft. Meadow provides brief screenings on the first Friday of each month. If a child is not a Westfield resident, the nursery school will contact the school department in the child's home town to help the family find services.

Westfield Community Partnerships for Children's Outreach Worker is also available for observation and documentation of children plus referral help for families. The Outreach Worker will also conduct Family Education Programs.

If a child needs dental services the preschool will help the family contact Dental Resources of Western Mass. at 1-800-342-8747.