Williams College
Children’s Center
Handbook

Revised and Beginning July, 2023

44 Whitman St.
Williamstown, MA  01267
413-597-4800
Fax: 413-597-4889
# Table of Contents

Letter of Welcome 5

Statement of Purpose 6
  • Mission 6
  • Vision Statement 6
  • Core Values 6
  • Commitment to Diversity, Equity and Inclusion 7

Licensing/Incorporation 7
  • Families’ Rights 7

Chart of Organizational Authority 8

Program and Curriculum 8
  • Ratios and Teaching Structure 8
  • Infant and Toddler Program 9
  • Pre-School Program 10

Enrollment Procedures 11
  • Non-Discrimination Statement 11
  • Enrollment and Continuing Enrollment Process 12
  • Enrollment Agreements 12
  • Tours and the Waitlist 12
  • Enrollment Priority Guidelines 13
  • Community Accommodation Policy 13
  • Space Holding for College Employed Families 13
  • Children with Special Needs 14

Transitioning Children Plan 14
  • Welcoming New Children and Transitioning to Childcare 14
  • Move Ups: New School Year 15
  • Developmental Placements 15
  • Daily Transitions 16
  • Transitioning to Kindergarten 16
  • Children Leaving the Program 16

Child Guidance 17
  • Goals for Children 17
  • Child Guidance Practice 17
  • Prohibitions 19
• Reward Systems 19
• Working with Families 19
• Plan to Support Children If Behavior Becomes More Challenging 20
• Suspension or Termination 21

Family Communication and Involvement 21
• Family Engagement and Volunteering 21
• Family Advisory Committee 22
• Community Events 22
• Daily and Weekly Communication 22
• Family Teacher Conferences and Child Portfolios 22
• Family Questions, Concerns and Comments 23
• Divorced or Separated Families 23
• Confidentiality 23
• Children’s Records 24

Activities Requiring Authorization 24
• Photography, Videography and Other Technology 24
• Research 25

Plan for Transportation 26
• Transporting Children with Disabilities 26
• Field Trip Transportation 26

Operating Schedule 27
• Calendar and Holidays 27
• Snow Days, Inclement Weather and Other Emergencies 27

Financial Topics 28
• Fee Schedule - Also, please see Fee Schedule on our website 28
• Prompt Payment Policy 28

Health and Safety 28
• Health Consultant 28
• Required Medical Examinations for Children 28
• When a Child Becomes Sick 29
• Illness Exclusions from Care 29
• COVID Policies 31
• Head Lice 32
• When Children Have Surgery 32
• Emergency Procedure 32
• Incident/Accident Reports 32
• Emergency Evacuation 32
• Medications/Permission Forms 33
• Plan for Special Health Care Medical Conditions/Allergies 34
• Sleep Safety 34
• Bottle Warming Safety 35
• Diapering 35
• Toilet Training 35

Food and Nutrition 36
• No Peanut Policy 37
• Oral Care 37

School & Classroom Policies 38
• Wash Hands on Arrival to School 38
• Choke Free Clothing 38
• Outdoor Shoes 38
• Toys from Home 38
• Food from Home 38
• Use of the Playground 38
• Holiday, Birthday Celebrations, and Traditions 39

Reporting Child Abuse & Neglect 40
• Mandated Reporting 40

Referrals, Social Service, and Community Resources Plan 41
• For Children from Williamstown 42
• For Children from North Adams 42
• United Cerebral Palsy of Berkshire County 42
• Community Agencies 42
On behalf of Williams College I would like to welcome you and your child to the Williams College Children’s Center. We will do everything possible to assure quality care and education for your child and look forward to building relationships with you over the years.

You are always welcome at the Children’s Center. We hope you will join your child for an occasional lunch as well as participating in other classroom and Center wide activities. We invite you to take as active a role in our community as you would like. We know that the relationships families and children make during their years in early childhood programs can last a lifetime. We have a wonderful, state-of-the-art facility filled with evidence of children’s learning and the high quality of care. We value families’ knowledge about their children, the contributions that families can make to programming, and the thoughts that families can offer as we continue to develop our learning community.

This handbook will answer many of your questions about the program. We urge you to sit down with it so that you can become thoroughly familiar with all aspects of the Children’s Center.

My door is always open. Please come and speak to me any time you have thoughts or concerns.

Welcome!

Carrie A. Gagne
Director
Statement of Purpose

The Williams College Children’s Center serves children infancy through pre-school five days per week, full days from 8:00 AM with a pick-up time of 5:15 PM. If space permits, we accommodate part-time schedules.

Mission

The Williams Children’s Center provides outstanding, responsive early education and care for young children while supporting families as they work and raise their children.

Vision Statement

We join together as a community of diverse families and teachers to inspire children’s wonder, joy, and curiosity. We prepare children for their futures - connected, hopeful, and open to the world of learning and possibility.

Core Values

Vital relationships among teachers, children, and families are essential for children to trust and learn about their world

We hold play and the ability to form positive relationships as a foundation for children’s learning. Children bring goodwill, kindness, and generosity to their relationships and share ideas in play and collaborative group work. Teachers value the family’s image of their child, openly welcoming each family’s stories and knowledge.

We intentionally create aesthetic, responsive environments which support children’s independent abilities to explore, discover, and invent through authentic hands-on learning

We design beautiful environments to inspire creativity. We make natural, soft, and light spaces for children and present “loose parts”, open-ended pleasing objects that invite children to investigate and develop thinking with others. Experiences with the outdoors and natural materials are central to active learning so that children value the beauty and uniqueness of the world around them. Children connected to nature are far more likely to contribute to a sustainable world.

By offering extended time to dwell and discover we build upon the ebb and flow of learning across the classrooms throughout the years

We value the chance for children to play, concentrate, and experiment with learning, both formally and informally, over time. Knowledge expands when children dabble, create, and hone thinking and skills. Because teachers carefully observe, they know when to facilitate or extend the next step as children ponder, experiment, pause to consider, and try again.

We document and communicate children’s work to better understand and make learning visible to the children, families, and ourselves
The work of children is present throughout the center. We select photos and capture observations to highlight aspects of learning. Families see evidence of their child’s growth and engagement. Documentation allows teachers to reflect on their teacher practice, pose questions to each other, and make plans to extend learning. Like the children, teachers engage in a cycle of inquiry.

Children and teachers alike challenge themselves to develop life-long dispositions for learning

Children are competent, curious, full of wonder and joy; they engage their minds as they figure out the world around them. We plan learning experiences to foster curiosity, critical thinking, persistence, flexibility, compassion, resilience, inventiveness, and an ability to problem solve in future learning beyond our walls. Teachers feel accomplishment through their common, reflective work, engaging their hearts and minds as they invest in their own learning and that of the children. Teachers and children grow alongside each other.

Commitment to Diversity, Equity and Inclusion

At the Williams College Children’s Center, we are committed to all children, families, and staff having a sense of belonging and an experience where they feel affirmation of their identities and cultural ways of being. We all respectively live, work, and learn together in a diverse and inclusive environment full of joy and wonder.

Licensing/Incorporation

The Williams College Child Care Center, part of Williams College, is licensed by the Massachusetts Department of Early Education and Care (EEC) and is in compliance with the state and local regulations such as building codes, fire laws, and health/safety guidelines. The Center meets, if not exceeds, the licensing requirements for staffing.

Families’ Rights

The General Laws of the Commonwealth of Massachusetts mandate the Department of Early Education and Care the legal responsibility of disseminating and enforcing the rules and regulations governing the operation of child care centers (including nursery schools), and school age programs.

Williams College Children’s Center is required to inform families of certain information about their rights and responsibilities at the time of their child’s admission to the Center. The majority of that information is contained within this handbook.

You can review the Early Education and Care Regulations at any time. If you have any questions regarding any regulations, please speak with the Director. The Center must make available any information requested by the Department of Early Education and Care to determine compliance with any Department regulation governing the program, by providing access to its facilities, records, staff and references. Families may contact the EEC for information regarding the program’s regulatory compliance history at the Springfield office:

1441 Main St, Springfield, MA 01103
Phone: 413-788-8401; Fax: 413-784-1227
**Chart of Organizational Authority**

Williams College Board of Trustees

President of Williams College

Vice President for Finance and Operations

Director of the Children’s Center

Assistant Director

Lead Teachers

Teachers

Administrative Assistant

The Family Handbook is written by the Directors of the WCCC and approved by the Department of Early Education and Care.

**Program and Curriculum**

We are inspired by approaches to early childhood education beginning in schools in Reggio Emilia, Italy. We view children as capable researchers and scientists as they learn about their world through social interactions and hands-on exploration. We thoughtfully create learning environments that offer challenging and engaging materials where teachers can observe children to learn their interests and what children wonder, what their questions are. Children pose questions, research interests, develop hypothesis, and experiment all to learn answers to their questions. Our curriculum emphasizes social-emotional development, long-term investigations, and child-initiated problem solving. We help children develop a love of learning. Our materials reflect our value of natural and recycled materials.

**Ratios and Teaching Structure**

Each classroom has a teaching team of one lead teacher and two teachers. For the main part of the day, we aim to have our three teachers in the classroom with the children. At the ends of the day, when enrollment is lower, we may schedule fewer teachers to meet state ratios. Below are the Department of Early Education and Care’s required ratios.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Staff: Child Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants: (6 weeks – 15 months)</td>
<td>1:3 and 2:7</td>
</tr>
<tr>
<td>Toddlers: (15 mo. – 2 years, 11 mo.)</td>
<td>1:4 and 2:9</td>
</tr>
<tr>
<td>Preschool: (3 years – school age)</td>
<td>1:10 and 2:18</td>
</tr>
</tbody>
</table>
The ages above, as of September 1st, are guidelines used for placing children. Placement consideration will be based on the number of children in a particular age group, the developmental ages of individual children, and with consideration toward group diversity.

**Infant and Toddler Program**

The early years of life are when children acquire a sense of trust, safety, autonomy, and independence. The sense of security and safety that comes from the family is echoed in the warm, responsive, predictable care teachers provide throughout the day. Teachers are loving as they feed, diaper, and comfort children. They communicate with children at eye level, join in laughter and conversations, and extend language as they respond to children’s vocalizations or queries. Teachers also narrate what is happening throughout the day to help children understand how the world works around them. They are responsive to children’s signals of distress and structure children’s days with calm in mind. Autonomy and independence increase as we encourage more opportunities for independence and exploration.

We partner with families by learning about family care routines and practices so that young children feel safe and secure in our care. Teachers observe how families interact with their infants so that they can imitate a family’s response in ways that are warm and predictable to the child. We welcome each family’s culture and diversity by honoring children’s first language, working with families to understand and support child-rearing practices, and encouraging families to bring in such items as pictures, books and other materials that are familiar to each child.

“We appreciate the teachers taking the time to get to know the needs of each of the babies, and teach us families a trick or two! One of the teachers noticed that while I nursed my daughter, she liked to nuzzle her cheek up against me and was comforted by that. She realized that if she used a soft cloth as she held her she would nuzzle up against that and instantly be comforted. We copied the trick at home, too, and it worked like a charm!”

_Geraldine, Infant Mom_

Providing consistent routines and responses to children supports healthy attachments and dependable relationships. We support the development of relationships so that children can gain a sense of security and safety that is necessary for all future learning.

Moments of one-to-one or small group care and learning are at the center of healthy development, caring, nurturing, and learning. Children connect with people through conversations and respond to their surroundings through active play. A rich, built-in learning environment allows a child to touch, talk, listen, and play and allows teachers relaxed time to nurture, feed, diaper, dress, or ease a child into or out of sleep.

Young children need a safe environment with ample opportunities to actively explore and enjoy experiences which allow them to see, hear, feel, touch, and move. Infants and toddlers are sensory-motor beings. They explore the world with their senses and their developing motor skills. The emphasis therefore is on what the child gains in the process of engaging with people, equipment and materials rather than on the creation of a product.

_"The staff in the infant room has been exceptional at helping our son adjust to his daycare routine. Being first time parents to a child born almost 7 weeks premature the teachers and staff at the Children’s center have been extremely accommodating to meeting his unique needs. The center has graciously worked with the outside_
specialists that have been brought in to assist with our son’s development, and it all happens so smoothly, there is really no significant interruption to his day or any interruption to the day of the other children."

Patty, Infant mom

The child’s entire experience with the program is important; there is no clear separation between learning and caring, play and work. The learning environment is designed to:

- Support relationships between educators and children, families and children, and children with each other
- Empower each child to become a confident, lifelong learner and a secure, caring person
- Promote all aspects of development: social, emotional, language, cognitive, and physical health and well-being
- Nurture a positive self-concept
- Encourage children to accept and enjoy diversity
- Provide a wonderful place for childhood learning and play

The fundamental premise at Williams College Children’s Center for curriculum is that infants and toddlers are active learners who learn best through investigating the rich and carefully planned environment that teachers provide. Children are recognized as scientists and builders, as gymnasts and artisans who need active experiences with the world of people and things. Teachers offer materials and opportunities for children to create and learn and are there to stimulate and respond to the children’s language, questions, and curiosity. Staff support and encourage the children. They offer children new challenges while helping them to build autonomy, confidence, and self-regulation to develop increasingly more sophisticated skills, relationships and knowledge.

Infants and toddlers not only explore the world of the classroom and outdoor playground, but also the neighborhood through walks. In the oldest toddler classroom the children occasionally go on local field trips.

Finally, teachers also incorporate suggested practices from the Massachusetts Early Learning Guidelines for Infants and Toddlers.

Pre-School Program

Children in the Pre-School continue to need loving, attentive, consistent, and responsive care as they move through their busy days and gain increasing autonomy and skill. Teachers keep calm in mind as they plan children’s days and are always there with a warm hug, a ready smile, a chance to share laughter and conversation, and to build relationships.

Play continues as the heart of the Pre-school program with the understanding that children are active designers of their own learning. Play inspires delight and curiosity and impels children to investigate and experiment. Play is the framework for building relationships with other children, for sharing and furthering ideas. It is the serious work of experimenting with materials, processes, and ideas over time that allows children to pose questions, adjust thinking, and make connections across their learning. Children try out and hone techniques. With increasing independence and growing skills they become familiar with enough of the world to begin a life-long commitment to their own interests and learning. In the landscape of play and
relationships, creativity takes root. Individuals contribute thinking and action to the whole group which allows shared thinking and creativity to become more than the contributions of individual children.

In the Pre-school children join with each other in visions for play and projects. Children work out relationships while joining other children, at times leading, at times following as they problem-solve, collaborate and mediate with each other. The Children’s Center helps children form affectionate, respectful and lasting relationships so that all children are included in the community of the classroom. We acknowledge the range of feelings that children have while offering them practice in how to express feelings appropriately, form friendships, problem-solve conflict, and value the diversity of their peers. Children embark on a life-long respect for diversity by appreciating differences in classmates’ choices, opinions, and cultures.

Like the younger classrooms, the Pre-school rooms are set up for independent, age appropriate exploration of materials and experiences. Classrooms include areas for blocks, the arts, music, games, sensory play, exploration with manipulative toys, construction, science and math investigation, books and early literacy experiences.

Teachers construct curriculum which responds to the observed interests and concerns of the individuals and the group while also incorporating the teacher’s educational goals for the group and the individuals. Learning goals also reflect the goals set out in the Department of Early Education and Care Pre-School Learning Standards and the Core Standards. Teachers frame the days so that there is an alternating mix of active and quiet learning times, individual and group exploration, child-initiated and teacher-led learning. As children move through the pre-school years, emphasis is placed on longer-term involvement with individual and group projects. Such projects emerge out of observed interests of individual children or group thematic curricula. Authentic formalized learning is woven into group studies in ways that support the development of skills, helping children launch into further independent learning and expression.

In addition children are offered structured experiences which introduce them to and help them gain skill in early literacy, mathematics, the sciences, social studies, the arts, and health education. The totality of exploratory, social, and formal learning helps children to become confidently prepared for future school learning.

Finally, Pre-school classes take advantage of the Williams College campus, walking through the neighborhood and taking trips to near-by points of interest that extend the learning in the classroom.

Enrollment Procedures

Non-Discrimination Statement

Williams College Children’s Center is committed to mixed groupings of children and believes this type of grouping provides them with unique and valuable opportunities for enhanced learning and social interactions. To this end, no family will be excluded or subject to discrimination based on race, color, religion, sex, sexual orientation, national origin, age, disability, political beliefs, cultural heritage, or any other protected status. In addition, toilet training status is not an eligibility requirement for enrollment.
Enrollment and Continuing Enrollment Process

We begin our enrollment process each year in March when we first survey all currently enrolled families about their enrollment schedules for the coming year (July 1 – June 30). Once current children are added to our projections for the coming year we are able to see what available spaces we will have for incoming families on the waitlist. We begin reaching out to college employed waitlist families in late March/early April to talk about availability based on the date of joining the waitlist. Offers are made in April to college families and agreements are confirmed on May 1.

Community families, both current and on the waitlist, are contacted about enrollment possibilities after our college families have been served. Community families who are offered an enrollment agreement are confirmed on June 1. As a department of the college, we serve college employed families first. However, it is important to us to have community children continue with their familiar caregivers and we make every effort for that to happen when possible.

Enrollment Agreements

Continuing enrollment begins each year in late March when families are asked to complete their requests for enrollment schedules for the next agreement year, beginning in July. We confirm enrollment for college families by May 1st and for community families by June 1st.

During the continuing enrollment process, families who anticipate a need for changes in enrollment days at the start of a new semester should make this request on the continuing enrollment form. A decrease in days may affect priority for enrollment, as full-time families are given highest priority. However, when possible we will work to accommodate this request.

Sometimes families may want to add an extra day to their child’s week on an occasional basis. Families who would like this should speak to the teacher as well as the Administrative Assistant to see if this can be accommodated in the classroom. The fees for such days are listed in the Fee Schedule on our website.

On occasion, for reasons particular to a child’s and family’s situation, the family’s care needs may change. Families may reduce the number of days of care during an enrollment agreement year or terminate enrollment with a four-week written notice. Please speak to a director if you are thinking about this.

Tours and the Waitlist

We welcome families to come visit The Children’s Center. The Director or Assistant Director will offer initial tours to families to see our “state of the art center,” meet the staff, and to answer questions about the care of the children, the curriculum, and the enrollment process. At this time, we recommend that families complete their Application Form to enroll at the Center if you have not done so already. Once your application form is completed you will either be offered a slot if one is available at that time, or you will be placed on a waitlist to be contacted about upcoming available slots. Families are welcome to be in touch with further questions at any time.

The Assistant Director checks in periodically with waitlist families to give an idea of upcoming availability of slots. We do not inform families of their exact place on the waitlist since variables such as college or sibling
priority can affect the waitlist at any time. We typically experience long wait lists and thus recommend that families apply as soon as they know they may need care.

**Enrollment Priority Guidelines**

The Children’s Center serves both college and community families. Priority is given in the following manner with the understanding that slots desired by families have to fit within what is available at the Center.

- Children of College employed faculty and staff
- Children of College enrolled students
- Children of alumni of the College
- Children of community families
- Families requesting full-time care schedules (Monday – Friday) have priority over families seeking part-time care schedules.

**Community Accommodation Policy**

When space allows, we are pleased to offer care to community families with the mutual understanding that the Center serves primarily as a benefit to Williams College faculty and staff and as such the childcare needs of those families take precedence. These guidelines outline how the Center can offer care to community families when viable.

If there is space available in a desired classroom, a community member may enroll after June 1st for the upcoming year. Enrollment is secure thereafter until June 30th of the next year, or until an alternate date specified in an enrollment agreement when only a short term slot is available. Enrollment agreements are renewed annually and the availability of space for members of the community, outside of Williams College, is predicated on faculty and staff enrollment. Therefore, enrollment spots are not guaranteed for more than 12 months at a time, and may be for a shorter duration as outlined in the short-term enrollment agreement.

If a Williams College employee is in need of childcare in the following year in a room where there will be no vacancies but in which a community child is enrolled, the Center will notify the community family that their enrollment agreement for care may be terminated or renegotiated as of the next re-enrollment date (June 30). If the contract is to be ended, the Center will give the community family at least a one-month notice to find alternative childcare accommodations for their child.

Because there is a possibility that a slot will be needed for a College family each June, community families are advised to keep in touch with the WCCC Directors as to the status of their child’s slot as the contract time approaches.

**Space Holding for College Employed Families**

There are times when we offer an available slot to a family and the start date is sooner than they would like to enroll their child (which most often happens in the infant program). As we aim to fully enroll each classroom, we will offer all spaces until they are full. If a family is offered a slot earlier than they would like to enroll, and they will lose the slot to another family on the waitlist and lose care for that year, we can offer the option to hold the space to secure their slot.
Spaceholding can be used when the following occur:

- Family is offered a start date sooner than they wish to enroll
- Family would lose the space to enroll because other families are on the waitlist and would accept the space sooner

Spaceholding allows families to enroll their child when they are ready without risking the loss of the spot to another family. Spaceholding is charged at 50% of the weekly rate and can last for up to four months before enrolling. Families are able to join Williams payroll deduction for this fee and have it charged bi-weekly, or without payroll deduction the entire fee must be paid when the agreement is signed.

This policy is available for any classroom. It may not be used to hold a slot for an already enrolled child during a temporary absence. All fees paid are non-refundable. This option is available only once per child.

If this situation arises directors would contact families and talk about enrollment options.

**Children with Special Needs**

The Children’s Center welcomes applications for children with special needs. The Center, in conjunction with the family’s input, will identify in writing all the specific accommodations, if any are necessary, to meet the child’s needs while at the Center. This includes any modifications and or changes required in daily activities, special equipment needed and staff/child ratio to ensure a safe and enjoyable experience at the Center. This process will help the Center determine whether the accommodations required present an unreasonable or undue burden, considering the nature and cost, impact on the program, financial resources of the program and availability of funding or services elsewhere. If the necessary accommodations were to cause an undue burden to the program, the Center would notify the family in writing and let them know that they could request an EEC review of the program’s decision.

If the Center were able to meet the needs of the child, we would make appropriate accommodations and work with the family, local service providers, former schools and others to serve the child. The Director and family would discuss which age grouping would best allow the child to enjoy and benefit fully from the program.

**Transitioning Children Plan**

**Welcoming New Children and Transitioning Into Childcare:**

New families are invited to participate in an enrollment visit prior to enrollment. During this visit families and children meet with new teachers and other children in the child’s new classroom. The family meets with the Director and child’s Lead Teacher to go over any questions the family may have. They also discuss the child’s developmental history, center policies and procedures, and required paperwork and payment options. Before the enrollment visit we provide a link to this handbook.

We consider the child’s age, familiarity and ease with being in care, and create a transition plan to help the child transition into care. This plan will be developed by the Lead Teacher with the help of the family and
Director or Assistant Director. Once enrolled, we encourage families to visit the program at any time and share information with teachers that might be helpful in getting to know the child. Ongoing communication between families and teachers is always encouraged.

**Move-Ups: New School Year:**

Teachers and Directors inform families well in advance of move-ups that normally occur the last full week in August. We believe in the benefits of children remaining with their teachers and classmates for at least a year and aim to have once a year moves to new classes. If there were a special circumstance when a child may move to another classroom other than the scheduled fall move-up date directors, teachers and families will be in contact to plan the best transition for the child.

When age appropriate, teachers also provide activities to help children to understand the upcoming event. Teachers talk to the children about the upcoming move and work to support friendships with new children. Teachers may read books to children about moving to a new school or class, or they might use a visual tool like a calendar to cross off days before the move to another room. Teachers also help children learn about or practice expected routines in the new classroom.

Teachers work together in advance to arrange times for children to visit new classrooms. Scheduled visits are usually held school-wide the two days before our August professional development days and the Move-up day. Younger children begin with more informal visits and then more deliberately make longer visits before making the final move to another class. Teachers from the new room might visit the younger rooms prior to transition visits in order to get to know the children, or they might trade places in order to accompany children on early visits to the new class. Teachers share information with the next child’s teacher (with family permission in the “informed consent”) that includes the child’s developmental history, emergency contacts, and allergy/medical condition information. Information specific to the child can also be shared which might include approaches that reassure the child, the child’s interests and ways of learning, and special accommodations a child might need.

Prior to transitions teachers from both the current and new classrooms help the family to prepare for the transition. New teachers send out either a letter or welcome packet explaining their program prior to the transition. Families may meet with their child’s new teacher prior to the child’s transition to a new room or visit the classroom. Families are encouraged to visit and call as often as they would like and teachers are open to speak often with them about their child’s progress. We also hold a Meet the Teachers Event prior to the start of our new school year for all families to attend.

**Developmental Placements:**

We occasionally place a child outside of their chronologically defined age group (meaning the basic Infant, Toddler, or Pre-School programs) based on a review of the documentation, observations, the child's most recent progress report, conversations between the child’s teacher, family, and the Director, or a narrative from the child's family addressing the child's abilities in the areas of mobility, fine and gross motor control, communication, social interactions and cognitive skills.

Whenever a developmental placement is considered the Director consults with the child’s family to seek input on the group assignment decision. We obtain the families’ written permission to make the placement and
offer the reasons why this placement is being considered. Once the placement is made, the teachers and Director meet monthly to review the child’s progress in the group until the child turns the typical chronological age for the group. If the child remains in a group for longer than is typical, monthly review takes place to be sure that the child’s needs are being met. We also put a plan for transition to the next group in place when the time is appropriate.

There are no more than two children outside the chronologically defined age range in any age group.

**Daily Transitions:**

Transitions are a part of daily life in an early childhood program. We work to minimize transitions and look for ways to complete them in a safe, timely, predictable and unhurried manner. We structure daily activities keeping in mind that it can be difficult for children to wait. We let children know when transitions are coming up so they can learn to bring their play or work to closure and anticipate what is coming up. We want transitions to be as smooth and flexible for children as possible. Teachers expect that children will not always move as a group from one activity to another. Visual, verbal and auditory cues help support children’s transitions. We also use other methods to support children’s transitions through creative activities like singing, movement or simple games. These are particularly helpful for children who have to wait for others to join the group.

**Transitioning to Kindergarten:**

The Director serves as the Kindergarten Coordinator and works closely with the Lead preschool teachers to communicate with local Kindergarten teachers about children’s transition into kindergarten. Families sign permissions to share information with the child’s new kindergarten teacher so that our teachers are able to share important information about the child that will help in their transition to the new school.

Pre-School teachers refer to the state [Department of Early Education and Care Pre-School Learning Standards and the Core Standards](#) as they develop their curriculum and prepare children for the next steps in their future learning. Teachers support the children transitioning to Kindergarten by discussing the coming move or doing various activities that help the children think about the anticipated transition. Teachers also celebrate the children moving on to Kindergarten with activities and events for families.

Any families who would like support helping their children make the transition to Kindergarten are welcome to meet with the preschool teachers and/or the director.

**Children Leaving the Program:**

When children leave the program with advance notice (such as when children move away) or unexpectedly for reasons that may relate to the particular situation of the child or family, when possible plans will be put in place to prepare the child to leave the school in a way that the child can understand and that will give the best possible, supportive closure for the child and classmates.
Child Guidance

As we work with children it is our hope that they will become active participants in learning how to make positive, lasting, meaningful, and loving relationships with both children and adults. Putting structures for child guidance in place offers children a reassuring framework to organize their relationships to other people, to care for people and the environment, to respect ideas and people’s work, to internalize an inner sense of discipline, and to build self-knowledge and self-esteem.

A developmental approach to child guidance takes into consideration:

- How each child thinks and learns
- The child’s experience
- The child’s and the group’s strengths and challenges
- The child’s culture
- The child’s ability to understand particular situations
- The child’s ability to communicate
- Behaviors which are acceptable or not acceptable along with how to tell the difference
- That conflict and learning to resolve it are necessary parts of growth

Goals for Children

The child guidance goals of the Center help children to:

- Be safe with themselves and with others
- Feel good about themselves
- Develop self-regulation and good coping skills
- Appropriately express the range of their feelings
- Become increasingly independent
- Balance personal needs and desires with those of others
- Learn collaborative problem-solving skills
- Learn through conversation – how to share and respect the ideas of others as well as how to use equipment, materials, and other resources in caring, appropriate ways

Child Guidance Practice

The Center’s child guidance practices include:

- Arranging the environment – furniture, pathways, and materials in the room to encourage active learning, independent thinking, freedom to move, and independence
- Modifying activities to meet the needs of individual learners and their needs
- Using adult and peer support to encourage desired behaviors and decrease challenging behaviors
- Encouraging children’s autonomy
- Recognizing children’s efforts and accomplishments
• A plan for daily scheduling that engages children with a balance of independent and group activity, active and quiet, stress-free times, and avoids having to wait or be hurried
• Putting systems in place which help children understand and rely upon the structure of their days so that routines are predictable and consistent
• Having ample opportunity for children to select activities and move between them at their own pace, assuring that all children have equal opportunities to take part in all activities and use all materials
• Giving children ample notice of transitions ahead of time
• Having a method to communicate effectively with each child
• Providing children with expectations that are clear, positive, age-appropriate, and applied in a consistent way
• Redirecting children toward positive activities, acceptable choices, or engagement with other children
• Allowing children to participate in the establishment of rules, policies, and procedures where appropriate and feasible
• Working to maximize the growth and self-awareness of each individual child while also assuring the safety of all children
• Reinforcing positive behavior by recognizing children’s positive actions and growth
• Encouraging children to listen to, help, and support each other
• Helping children to understand and respect people different from themselves
• Modeling appropriate behavior by the way adults speak, interact, listen, and problem-solve
• Offering appropriate, real choices
• Listening carefully to children’s concerns
• Encouraging children to independently discuss and resolve their conflicts while offering adult assistance, when necessary - rather than imposing an adult’s solution on them
• Intervening quickly when there is physical aggression
• Helping children learn to respect each other’s possessions and work
• Helping children learn effective ways to deal with bullying, teasing, and other forms of intolerance
• Encouraging children to express their feelings in words and to resolve problems peacefully
• Encouraging children, where developmentally appropriate, to acknowledge the effects of their actions and words on other people and to practice, where appropriate, words or actions that can make reparation
• Ignoring simple inappropriate negative behavior that is unpleasant
• Communicating amongst staff members about the needs or challenges of individual children in relationships and about consistency of child guidance structures
• Modeling or supporting age appropriate expectations:
  o Toddlers do not share easily, thus sharing is modeled but not required
  o Teachers narrate play as it is happening for toddlers, “Oh, I see your friend wants to play with you” or “let’s move so your friend can get around you” – thus supplementing language and building awareness of others
  o State expectations positively: “Look how we can build with these blocks” rather than “Don’t throw the blocks!” or “Touch your friend like this” rather than “Don’t push your friend”
  o Toddlers use and process fewer words when working through conflict so modeling a direct action may be more useful than using lots of words
  o On the other hand older children can benefit more from the time taken to process things verbally
  o Try to redirect toddlers before separating them from a situation since we want the developmental step of separation to be a positive experience
- An older child may benefit from a brief period to “cool down” in order to gain self-control and gather his or her thoughts to further resolve a conflict
- Never would separating a child be defined as humiliation or punishment and there would always be discussion following such a time to help a child process and reintegrate with the group
- Older children can also benefit from reflective structures like drawing about what has happened or dictating words to process solutions

Prohibitions

The Center strictly prohibits the following:

- Spanking or other corporal punishment of children
- Subjecting children to cruel or severe punishment such as humiliation, verbal or physical abuse, neglect, or abusive treatment including any type of physical hitting inflicted in any manner upon the body, shaking, threats, or derogatory remarks
- Depriving children of outdoor time, meals or snacks
- Force feeding children or otherwise making them eat against their will, or in any way using food as a consequence
- 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
- Confining a child to a swing, high chair, crib, playpen or any other piece of equipment for an extended period of time in lieu of supervision
- Excessive time away from the group. Any time away must take place within an educator’s view and is followed up with a conversation between the child and teacher as developmentally appropriate.
- Please also note that EEC does not allow any licensed child care programs to use discipline or child guidance techniques that require the use of any physical restraint

Reward Systems

The Children’s Center does not use formal reward systems for discipline, for either the whole group or for individual children:

- Instead, we help children learn self-awareness and self-management through reflective conversations and collaborative problem-solving
- We base child guidance on intrinsic rewards – in other words, on the satisfaction a child or the group gets from internalizing self-discipline and standards for behavior in the group
- When appropriate, we develop age appropriate tools for helping a child assess their own behavior
- We want to support families and therefore are available for conversations with individual families to keep consistency as much as possible in a child care setting for their child. Our goal is to work together to help support the child in all ways.

Working with Families

The staff at the Center will work in close partnership with families to address children’s behavior at school and in the home when help is sought. It is important to acknowledge that there can be differences in child
guidance practices between home and school and that there can be diverse cultural approaches. There may also be differences between what works at home in the close context of the family setting and what is possible or appropriate for school and the larger group of children. Teachers consider both the needs of individuals and the needs of the group. In general, staff will observe and document the range of children’s engagement with the group and will communicate on-going social growth and challenges in bi-annual conferences with families. When there are particular concerns, staff and families can regularly be in touch with each other and can develop a shared understanding to foster consistency between home and child care.

Children also learn about behavior from watching other children and watching the reactions of adults to behavior. Families sometimes find that children bring behaviors they have seen at school to try out at home. This can be disconcerting to families yet often occurs because children want to try out behaviors in the safe context of home to see if expectations of behavior are the same as they have always been at home. When families calmly reaffirm expectations and are in communication with teachers, these behaviors can resolve themselves more easily and quickly.

If a child’s behavior at school continues to be harmful or disrupting to themselves or others, the Director and the staff will develop a plan with the families to address the issues. This may include developing behavioral and safety plans for children that require them. In addition, this may at times require referring the child or family, with written permission, to other specialized services that can help address the child’s behavior or underlying learning concerns. Staff will be aware of all behavioral and safety plans for a child. See below.

Plan to Support Children If Behavior Becomes More Challenging

The Lead Teacher and the Director will have been in close communication when a child has behavior difficulties that are hurtful or disruptive to people, property, or the school program. In addition, families will be consulted and when appropriate, with permission, referrals will be made for support of the child in the classroom.

Every effort will be made to help the child be successful in the program. Directors will support the situation by meeting with teachers to discuss behaviors and positive plans to support the child and have the classroom continue to function well. Directors will also be available to observe children or to meet with children to discuss behavior and plans for collaborating on solutions for behavior issues. The school will consider further staff training or consultation. Families and staff can discuss whether a shorter day may aid the situation temporarily or other options to avoid termination. School staff and families will also discuss if this is a matter that requires a plan of action, whether in the school or home, or finally, if suspension or expulsion is recommended.

In matters of serious behavior issues, if a child poses an immediate danger or a significant threat of disrupting the program, and teachers have not been successful in helping the child join the group, one of the Directors will remove the child from the classroom and the family will be notified. Directors, teachers and families will work together to determine the best way to move forward at that time. This could involve families coming to the center to talk with their child, and/or the child leaving for the day. If families cannot be reached, the school will call the emergency contact and the child will remain out of the classroom for the rest of the day. The child will not return to the classroom until a reasonable plan can be made with the teacher, Director, and family for the child to function within the normal classroom structure. At some point in the process after the adults have spoken, every effort will be made to include the child in discussions about the behavior when developmentally appropriate.
If, after every attempt has been made by staff, directors, and families to support the child in the program, plans have not been successful in helping the child, a child may be asked to leave the program and written notification will be given to the families. In addition, plans will be put in place to prepare the child to leave the school in a way that the child can understand and that will give the best possible, supportive closure for the child.

**Suspension or Termination**

Williams College Children’s Center makes every effort to ensure each child’s and family’s needs are well matched with the philosophy of the program. In rare cases a family may be asked to leave or be suspended from the Center. The following examples are reasons a child or family may be suspended or asked to leave the program:

- Non-payment of tuition
- Non-compliance with Health Care Policies
- Inability of program to meet the child’s needs
- Behavior of child threatens safety of other children or staff
- Inappropriate behavior by families on school grounds
- Excessive late pickups after 5:15 pm

**Family Communication and Involvement**

Families are always welcome at the Children’s Center and are free to come unannounced at any time. We hope they will occasionally join their child for lunch as well as other classroom activities and will take an active role in our community. We know that the relationships families and children make during their years in early childhood programs can last a lifetime. We value family’s knowledge about their children, the contributions that they can make to programming, and the thoughts that they can offer as we continue to develop our learning community. We also invite families to join us in our interview process for prospective teachers to offer their unique perspective.

**Family Engagement and Volunteering**

We invite families to be a part of our program through family engagement and volunteering. You are welcome to spend time in the classrooms and share your knowledge and interests. Please feel free to talk with the class teachers to see if your participation could expand their curriculum in some way, or simply spend time in the classroom helping the children during group time, playing a game or reading a story. We value families in our program and find the children gain so much learning and pride from having a new perspective to learn from. For those family members looking to spend regular, scheduled, recurring time in a classroom we do require a background records check process.

Teachers occasionally send home suggestions for small projects that children can do at home which relate to their current studies. We hope you will enthusiastically engage with your child during these times since what children do at home is often shared with the group and helps to support a home/school connection.
Family Advisory Committee

We have a group of family members who help advise directors and offer feedback and input on various topics concerning the center including program priorities, curriculum, and family events. The members of this committee are published on our website and are available as representatives for all families. They welcome families to share ideas and feedback with them to bring forward at future committee meetings.

Community Events

The Children’s Center looks forward to many events where families and staff can gather. Throughout the year classrooms offer family events such as pot luck meals and times when children share their learning from particular projects. In past years we have hosted All School Sings, Music Monday performances, “Lunch and Learn” gatherings on topics of interest to families, “Curl Up and Read”, winter family open house, our annual spring family picnic, and a summer time ice cream social. Please see our annual traditions in the Holidays, Birthday Celebrations, and Traditions section of this handbook. We look forward to your input on these events. Families are welcome to participate as much or as little as they would like. We appreciate your help in making them happen whenever you have the interest or the time!

Daily and Weekly Communication

Each classroom will have individual ways to promote daily communication with families, depending on the age of the children. In general teachers want to hear about information that could affect a child’s day within the classroom - for example, if the child hasn’t slept well, if there is a change in pick up time, if a family member is away on business, etc.

Weekly recaps are emailed to families and monthly in-depth newsletters are also emailed. Teachers may also share summaries of the day’s events, sometimes involving the children in summarizing the day. These communications share your child’s engagement, projects they are working on, and other learning experiences. Infant and toddler classes share daily summaries of caregiving details and information about the child’s day at the end of each day.

Finally, when children or families do not speak English, the school will find ways to communicate with the family and work to support the child’s English language learning.

Family/Teacher Conferences and Child Portfolios

Families are invited to set up a conference with a classroom teacher or the Director at any time regarding the Center or their child’s development. In addition, the Center designates time during both the fall and spring semesters for conferences. Meetings are offered in November and April. We offer conferences to families of infants or of children with disabilities four times per year. Families are strongly encouraged to sign up during these times.

Observing the children, and reflecting on those observations, is an important way for our teachers to learn more about what children are interested in, what skills they may be developing, areas where we could provide more opportunities and support, and paths that could be explored through curriculum. We gather evidence of
these observations, photographs, and pieces of children’s work in child portfolios. These portfolios are stored openly in the classroom and can be reviewed and explored by families at any time. We encourage families to have a look at the portfolios especially before conferences in preparation for the meeting. When a child leaves our program or moves to their next classroom the portfolios are sent home.

If at any time a family, teacher or Director believes it is necessary, an additional conference will be held. It is very important to meet with teachers and/or a director if there are particular or urgent concerns about a child and the staff has requested a conference so that all can work together to support the child.

**Family Questions, Concerns and Comments**

Our hope is that the Center will flourish in an atmosphere of open communication and that all who are involved will bring a spirit of trust in our ability to be a strong and generous community. Along with the pieces we put in place for regular communication from the staff, we want families to feel they can communicate with us easily when they have concerns about their children, their child’s participation in the program, or other matters appropriate for family input. It is first of all very helpful for families to communicate with teachers about anything going on at home that might have an effect on their child, whether it is something like interrupted sleep patterns or whether their child has had a particularly happy or difficult morning. It is also very helpful for us to know about more complex matters like changes in family circumstances. We would keep information confidential as requested while still being able to support the child through changing situations. We ask that families be sensitive to the teachers’ needs to be with the children during transition times, so making a call later in the day or arranging a time to speak would be appropriate if greater time were needed.

Each year, usually in May, a family survey is sent out. We appreciate all feedback and use this as a reflection tool each year. The WCCC Advisory Ct., comprised of families and interested members of the community, will serve the function of giving input to the Directors on program and policies. Michael Wagner, Vice President for Finance and Operations, is available to hear concerns after other avenues have been pursued. If you have a concern, please feel welcome to reach out to your child’s teachers, directors, representatives from the Advisory Committee, or others as soon as possible. We hope to create a community where communication is open and flowing, and we can partner together.

**Divorced or Separated Families**

The Children’s Center tries to be aware of and sensitive to the families we serve. If divorced or separated families are sharing custody and there is some way the program can help make this easier, or avoid making the situation more difficult, please let us know. We can include both parents/guardians in all-Center e-mails and other notices. We offer families joint family/teacher conferences or separate conferences if requested. Please note we cannot presume one parent/guardian has more or less rights than the child’s other parent/guardian without a legal document (i.e. copy of custody settlement or restraining order).

**Confidentiality**

The WCCC respects the confidentiality of children and their families. All information contained on a child’s record is confidential. Staff discuss children during in-house professional meetings to further support individual children and the group. Information in a child’s record is not released unless the child’s family provides written consent to do so.
Children’s Records

Children’s records are kept in a locked cabinet at the Center. Only families and professional, full time administrative and teaching staff will have access to a child’s file. Families must be notified if a child’s record is subpoenaed. Each child at the center will have a file that includes:

- The Child’s Enrollment Sheet
- Emergency Contact and Release Form
- Permissions and informed consents
- Contracts for Enrollment
- Physical Examination
- Dental, hearing, and eye exam records when offered by the family
- Developmental History Forms
- Immunization Records
- Copies of referrals and reports from referrals
- Injury reports
- Transportation plan for the child
- Medication consent forms
- Medical condition action plans
- Copies of custody agreements when provided by the family
- Any other relevant information regarding the child
- A log identifying access to and copying of child’s record

Families have the right to add any information or comments to their child’s record. Families also have the right to amend or delete any information in the child’s record.

Families are entitled to access their child’s records at reasonable times on request. The request must be processed within two (2) business days unless a longer time period is agreed upon.

When a child is no longer in care at the Center, the Director or said designee will release the child’s record only with a written request from the family.

Activities Requiring Authorization

Photography, Videography and Other Technology

During the course of the year, students at the Center may be video-taped or photographed inside the classroom for the program, (newsletters, family reports), research, advertising and news reports. Families will always be asked for written permission allowing their child to be photographed as part of our “Informed Consent”. Families will also be asked for written permission for any published photos. Photographs and videos are an essential part of the program as a means to share the life of the classroom with the community of children and families, to observe children’s engagement with the program, and to document the program for licensing and national certification such as NAEYC. Because of the ease of transmitting photos and videos through available technology, we want to be especially cognizant of protecting children’s privacy.
We ask that if families want to photograph or video-tape their own children while in the classroom that they do not photograph or video-tape other children without written permission. We want to protect children’s privacy when they might be having a difficult day, even if the family is not aware of it. On the other hand, when we are gathered for community events and there is no expectation of privacy, families are welcome to photograph or videotape children. Still, we ask that these photos or videotapes not be transmitted electronically to others. The restriction of posting photos and videos over the Internet also applies to staff. The only exception is for staff to send photos of individual children to the child’s own family or for a teacher to send photos of the group or members of the group on to the families as part of classroom news or weekly notes. It is to be understood that such photos are not to be forwarded on to other persons, to be posted on social networking sites such as Facebook, to be posted on photo sharing sites, or in any way modified or published in hard or electronic copies.

Research

The Williams College Children’s Center will provide opportunities for the faculty and students of Williams College to engage in research on issues related to young children and education. The Children’s Center and the College will consider the needs of the children and families while also making scholarly research opportunities available. Students from the College will be under the direct supervision of faculty and their research or projects proposals will be scrutinized by faculty. All research with human subjects is additionally approved by the Institutional Review Board of the College. In addition, the WCCC Directors will have opportunities to comment on and approve research projects done at the Center. Children’s identities will be masked for research purposes.

Families will be asked to sign permission for on-going passive observation for research purposes by Williams College students and members of the faculty as part of the “informed consent” signed by families each year. Observational research is classified as exploration that does not involve direct interaction or contact with the children outside of the child’s daily routine and activities. The researcher may use the observation room, be seated directly in the classroom, or on the playground. The researcher does not remove the child from the classroom. Observational research may also include the use of video and audio tape recorders, event recorders and/or hand-written notes. Children’s names are not used, and all observational material is destroyed at the completion of the project.

All procedures for observational research must be approved by the Director of the Center prior to the beginning of the observation period. Observations which are anonymous and part of class assignments but will not be published or presented at a conference do not need Institutional Review Board (IRB) approval. Observations which will potentially result in publication or professional use must have IRB approval and families must sign a separate consent form.

Occasionally other colleges or universities request permission from the Director to observe for an academic assignment. In this situation, the same research procedures are followed. Letters outlining specific projects or research working directly with children will be given to families and families will then sign permission slips for these projects or research.
Plan for Transportation

The Williams College Children’s Center does not provide transportation. Families are responsible for making arrangements for all transportation to and from the center. Families must arrange to have transportation if their child attends programs or services at WES. All families will fill out a transportation plan for children.

The Center will follow these procedures to reduce the chances of injury during transportation times.

- “Children at Play” signs are posted to warn motorists they are approaching a school zone
- Families can park in our parking lot when picking up or dropping off, and walk up the sidewalk to the building.
- The second half of our circle can be used momentarily to park while families accompany their child into the classroom. The first half is reserved for emergency vehicles.
- For safety, please turn cars off and do not leave children unattended
- Families must accompany children to and from the classroom when they arrive and leave the Center
- Families must sign children in and out in the classroom and notify the teacher when your child arrives and leaves
- Children will not be transported in personal vehicles for school programs
- During trips, teachers will take first aid kits, cell phones, and each child’s emergency information cards
- Field trips will be cancelled if weather is determined to be too dangerous for travel.

Teachers will model pedestrian safety when on walking field trips. Teachers and other staff members of younger classrooms will supervise children in the front and end of the line. Teachers will show children to look both ways before crossing a street, and to cross at the corner, at cross-walks, or when traffic signals show that it is safe to cross.

The WCCC insurance does not cover employees to transport a child or family at any time. Any employees who wish to transport children/families outside of work hours do so at their own risk.

Transporting Children with Disabilities

While the Children’s Center does not offer transportation to any children attending the Center, we will work with families to determine the transportation and safety needs of children with disabilities who have special requirements for travel. The College vans do not have special equipment for special needs. The WCCC will work with agencies or public schools, where possible, when it is appropriate for transportation to be arranged by such organizations either for daily travel or for field trips.

Field Trip Transportation

Field trips are an important portion of the program, further enhancing the children’s experiences and learning. On the occasion a field trip is planned, families are given written notice in advance. Blanket field trip permission slips will have been signed for commonly taken trips including walks on campus and through nearby neighborhoods as part of the “Informed Consent.” Families will be given the opportunity to sign permission for all other trips. They will be notified in writing on daily message boards, by email, in weekly lesson plans, or in blogs when field trips are planned. Teachers will use classroom communication boards in the morning when children will leave the building for impromptu walks.
Families are very welcome to come along on field trips and can join the group in the van if there is sufficient room. Please let the teacher know if you plan to go along on a trip. Occasionally families could be asked to come along on a field trip in order to support their individual children.

The Children’s Center uses insured and properly maintained vans from the College for field trips. Only certified teachers or directors with driver’s licenses will drive the vans. Families do not drive vans and cannot take other children from the Center in their cars for field trips. Families must bring appropriate car seats for children to participate in trips for which William’s College Children’s Center provides transportation. Families will secure their child’s individual car seat into the designated College van. In addition every teacher must be securely fastened into seatbelts. Teachers carry valid driver’s licenses and bring all necessary first aid, cell phones, and emergency contact information. Radios are silent and teachers pull over to speak on cell phones only when necessary to the safety of the trip.

Additional protocols are in place for tracking attendance, supervising the groups, swimming protocols, dealing with emergencies and supporting children in disciplinary situations. A copy of the plan is available upon request.

**Operating Schedule**

The Center is open at 8:00 AM. Children should be picked no later than **5:15 PM** to allow teachers to complete their end of day tasks and close the building on time. All families are expected to pick-up their children by 5:15. If you have an emergency and are going to be late, please contact the center right away so we can arrange for care of your child. The morning hours for children who attend the Pre-school program half time are 8:00 AM to 12:30 PM. The PM schedule for half day Pre-School children is from 12:30 to 5:15 PM.

**Calendar and Holidays**

The Williams College Children’s Center is closed for:

- 9 holidays
- The college’s winter shutdown period between Christmas and New Year’s
- 5 professional development days
- The Children’s Center closes one hour early (pick-up by 4:15) one day per month for the monthly staff meeting, as announced in the annual calendar

Please refer to current Center Calendar on our website.

**Snow Days, Inclement Weather and Other Emergencies**

As a residential college, Williams must continue to support its students regardless of inclement weather or other emergency situations. The College, therefore, does not usually close. In situations where the college closes offices due to weather or other emergencies; the Children’s Center will also be closed. In the case of a delayed opening of college offices, the Children’s Center will normally open one half hour earlier than administrative offices.
When we remain open in bad weather conditions we ask that families and staff each use individual discretion as to whether or not they come to the Center. Families should be sure to notify us when their children will not attend during bad weather so that we can plan for staffing needs.

In the event the College delays or closes the administrative offices and the Children’s Center, efforts are made to make announcements as soon as possible. Announcements are made on the college’s home page; the college’s weather line 413-597-ICEY, college mail, and local television stations. In addition, we would send out an email to staff and families.

**Financial Topics**

**Fee Schedule – Also please see Fee Schedule on our website.**

Fees are charged for annual enrollment in the program and are not based on attendance, vacations, holidays, the campus winter shut-down, or weather-related closures. Children who miss a day will not be able to make it up on another day that week.

**Prompt Payment Policy**

Williams College Children’s Center expects families to be timely with tuition payments. Invoices are emailed bi-weekly and payments are due before service is rendered. In other words, bi-weekly payments are due on Friday of the week preceding service and so forth. Williams College faculty and staff have the option to use payroll deduction for bi-weekly payments for childcare. Please see the Assistant Director for a form.

In the event non-payment of tuition occurs, the director will be in contact with families to arrange a payment plan to bring their account up-to-date. Failure to comply with the agreement may result in dismissal from the Center.

In general, keeping the Children’s Center abreast of plans for payment will go a long way toward establishing that payment issues will be resolved.

**Health and Safety**

**Health Consultant**

Dr. Childsy Art is the health care consultant for Williams College Children’s Center. She has reviewed the Center’s Health Policies, which reflect State mandated standards.

**Required Medical Examinations for Children**

A child shall be admitted to the Center only if provided with a written statement from a physician that indicates that the child has had a complete physical examination within one year prior to admission, or obtains
one within one month of admission. The physical examination required upon enrollment shall be valid for one year from the date the child was examined and shall be repeated annually. Written verification of each child’s annual physical examination, updated immunizations and lead screening need to be submitted to the Center.

Pursuant to Department of Public Health regulations, all children, regardless of risk, shall be screened for lead poisoning at least once between the ages of nine and 12 months and annually thereafter until the age of 36 months unless families live in a city designated as higher risk for lead poisoning. In that case children need to be screened to the age of 48 months. The Center will obtain within one month of admission of the child, a statement signed by a physician or an employee of a health care agency stating that the child has been screened for lead poisoning.

A physician’s certificate is required for all children, at admission, noting that the child has been successfully immunized in accordance with the current Department of Public Health’s recommended schedules against diphtheria, tetanus, pertussis (whooping cough), poliomyelitis, measles, hepatitis B, Haemophilus Influenza Type B (HIB), varicella (chicken pox), and such other communicable diseases as may be specified from time to time by the state. No child shall be required to have any such immunization if his family objects thereto, in writing, on the grounds that it conflicts with their sincere religious beliefs or if the child’s physician submits documentation that such a procedure is contraindicated. However, if there are outbreaks of infectious diseases for which a child has not been immunized, then the non-immunized child will need to be excluded from the program during the outbreak.

**When a Child Becomes Sick**

When illness occurs, it is important for the child to stay home. We ask that families be sensitive to this as our program is an active one and a sick child is likely to be uncomfortable. The health of other children and the teachers also needs to be considered. If your child stays out for any reason, sickness or otherwise, please call your child’s teacher.

Children who are mildly ill, such as a slight cough, runny nose, or congestion, may remain at the center as long as they are not contagious and they are able to fully participate in all aspects of our program, including outdoor play. If illness worsens or occurs at the Center, the family or other designated emergency contact will be notified to pick up the child promptly at that time. The child will be kept comfortable while awaiting pickup. Pick-up is expected to be within 30 minutes.

**Illness Exclusions from Care**

Children who exhibit symptoms of the following types of illness, such as gastro-intestinal, respiratory and skin or direct contact infections, will be excluded from the Center if it is determined that any of the following exist:

1. The illness prevents the child from participating in the program activities or from resting comfortably;

2. The illness results in greater care need than the child care staff can provide without compromising the health and safety of the other children

3. The child has any of the following conditions: fever, unusual lethargy, irritability, persistent crying, difficult breathing, or other signs of serious illness.

   - Fever equal to or greater than 101 degrees * taken by ear or 100 degrees under armpit. Child
excluded at least through the following full day and thereafter may return when symptom free for 24 hours without fever reducing medication and showing no other signs of illness for which they would otherwise be restricted.

- **Diarrhea case-by-case with consideration given to known normal habits of the child, frequency, odor, consistency, child’s ability to participate in their day, and current classroom viruses and illnesses.** Child may return the next day if symptom free without medication and showing no other signs of illness.

- **Vomiting case-by-case with consideration given to frequency, volume, events leading up to vomiting, child’s ability to participate in their day, and current classroom viruses and illnesses.** Child may return the next day if symptom free and showing no other signs of illness.

- **Rash with a fever or behavior change until the physician has determined that the illness is one for which the child does not need to be excluded and the child is fever free for 24 hours without medication.**

- **Tuberculosis,** until the child is non-infectious

- **Impetigo,** until 24 hours after treatment has started or all the sores are covered

- **Strep infection,** until 24 hours after treatment and the child has been without fever for 24 hours without fever reducing medication

- **Many types of hepatitis are caused by viruses.** The symptoms are so alike that blood tests are needed to tell them apart. In the U.S. the most common types of hepatitis are A, B, and C. Types B and C are spread through blood and other body fluids. Type A is spread through contaminated food and water or stool (feces). Fact sheets are available from the state Department of Public health. [www.state.ma.us/dph](http://www.state.ma.us/dph)

- **Chicken pox,** until last blister has healed over.

If a child has already been admitted to the Center and shows signs of illness (i.e., a fever equal to or greater than 101 degrees* by ear or 100 degrees under the armpit, a rash, reduced activity level, diarrhea, etc.), or if the child manifests any of the other symptoms requiring exclusion listed above, they will be offered their mat, cot, or other comfortable spot in which to lie down and the family or emergency contact person will be called to collect the child very promptly (within 30 minutes).

If a child is running a fever equal to or greater than 105 degrees, we likely will already have reached out to you to come unless this is a very sudden onset of fever. We will contact the family again for immediate pick up. We may also have contacted your child’s doctor or our own health care consultant. If we are unable to contact the family or the emergency contact person, or an immediate pick up cannot occur, we will then call 911 to transport the child to the hospital.

If free of fever and other symptoms after being diagnosed with a highly contagious illnesses such as tuberculosis, chicken pox, or hepatitis, a child who has been excluded from child care may return after being evaluated by a physician, physician’s assistant or nurse practitioner, and it has been determined that they are considered to pose no serious health risk to themselves or to the other children. Nevertheless, the Williams College Children’s Center may make the final decision concerning the inclusion or exclusion of ill or recovering children.

*Due to COVID protocols our current fever threshold is 100.4 degrees*
COVID Policies

Masking
- Masks are optional for all people over 2 years old indoors and outdoors
- Children under 2 are not able to wear a mask
- Anyone who needs or chooses to wear a mask will be supported in doing so
- Masks are not required while an individual is eating, drinking, sleeping, or outside.

Person is COVID+
- Isolate at least 5 days
- Day 0 is date of symptom onset OR date of positive test, whichever is earlier
- OVER 2 years old
  - Return on Day 6 if asymptomatic or symptoms resolving and fever-free without fever reducing medication for 24 hours
  - Mask must be worn Days 6 – 10 (indoors and outdoors)
    - If you have a negative antigen test result on Day 5 or later you do not need to mask from that point
- UNDER 2 years old
  - Return with a negative antigen test result on Day 6 or later
  - Return no later than Day 11 as long as fever-free without fever reducing medication for 24 hours and symptoms resolving

Exposed to COVID+ Individual and Asymptomatic
- Able to remain at the center
- Test before returning to center and 48 hours later
- Mask through day 10 (children under 2 years cannot mask)
- Day 0 is the date of exposure
- Antigen test on Day 6

Exposed to COVID+ Individual and Symptomatic
- Must remain out of care until symptoms improve and they are fever-free for 24 hours without fever reducing medication
- Must have a negative antigen test on the morning before returning
- Must antigen test again 48 hours later
- Must wear a mask through day 10 (if over 2 years old)
- Must antigen test on Day 6

Symptomatic Child (sent home from school, or out sick at home)
- Must remain out of care until symptoms improve and they are fever-free for 24 hours without fever reducing medication
- Must have a negative antigen test on the morning before returning
- Must antigen test again 48 hours later
Head Lice

In the case of head lice, children will be allowed to stay in the classroom until the end of the day and then must be chemically treated before returning to school. Please talk to your physician for the best treatment. Families should try to remove all nits. However, nits that are more than ¼” from the scalp are empty egg casings and not considered a reason for further exclusion.

When a communicable disease has been introduced into the Center, families will be notified immediately, and in writing by the Assistant Director. When required, information regarding the communicable disease shall be made available to families. Program Directors shall consult the Child Care Health Manual for such information. The Department of Health must be contacted when there is a reportable communicable disease in the program.

When Children Have Surgery

When children have had surgery we ask that we receive a note from the child’s doctor saying that it is safe to be at school as well as noting any restrictions. Please be sure your doctor is aware that a child’s day is very active and that the child would need to be part of everyday activity that may include classroom routines like playing in the sand, normal movement, and bumping with other children. Please also have your doctor include any instructions for us to follow with regard to caring for the wound if necessary during the school day.

Emergency Procedure

When an accident occurs or a child becomes ill, the Center will first determine the severity of the situation, call 911 if deemed appropriate by staff trained in First Aid and/or CPR, and then contact the family. If the family cannot be reached, the Center will contact the designated emergency contact in the child’s records. Either a teacher or a Director will take the child’s records and go with the child to the hospital. Once the family arrives, the staff member may leave the hospital.

Incident/Accident Reports

No matter how minor they may appear, all accidents are to be reported to the Director with the appropriate accident report. This report will be filed by the end of the day and a copy will be given to the family or sent home with the pick-up person. Families should sign the form and return it, preferably at the moment it is handed to them.

Emergency Evacuation

Emergency Evacuation Plans will be posted at all exits. During an emergency evacuation, the teachers will be responsible for leading the children out of the building. All staff will assist in the evacuation.

Infants and non-mobile toddlers may be placed in the evacuation crib and/or carried by staff. Other available staff will assist with the evacuation of the rooms as well as children with special needs if applicable.
The Director of the Center (or designated representative) will make a visual inspection of each classroom before exiting the building.

All classrooms, once evacuated, will meet at the playground gate which exits from the field where a teacher will take a head count and wait for the go ahead by the Director before re-entering the building.

Were there to be an actual fire, the Director or person in charge would call 911. If it is determined that the building is dangerous to enter, the group will proceed to the ‘62 Center Theatre. Re-entry to the Center will be made only when official notification has been given by fire personnel/security that it is safe to return.

Emergency evacuation drills are conducted every month at different times of the program day as determined by the Assistant Director. Children and staff practice using different evacuation routes so that the children and staff will be familiar with them.

The Assistant Director will maintain a record of all fire exit drills documenting the date, time, weather conditions and effectiveness of each drill. These records shall be kept on the premises.

Procedures are in place for Lockdowns and other emergency contingencies.

- At the first safe moment the Director, Assistant Director or person in charge will begin the notification of families using an email or phone message
- Parents/guardians who are Williams employees may otherwise hear about the emergency at the Children’s Center through emergency communication notices
- Families are asked to stay away from the Center during the lockdown for their own protection
- Any children and staff who have escaped the building will make their way to the ‘62 Theater where they can reunite with their families
- Otherwise, families must wait until the “all clear” email from the Director or Campus Safety to safely come to the Center

**Medications/Permission Forms**

Teachers must follow these rules when giving medication:
- Non-prescription and prescription drugs will only be given with the written consent of a parent/guardian and physician.
- The physician will include directions for administering the medication in the permission for the OTC medications and as part of the prescription label for prescription medications
- Non-prescription topical ointments (sunscreen, petroleum jelly, etc.) will only be applied with the written consent of a parent/guardian.
- Prescription medication must arrive in the original prescription container with date, dosage, and the doctor’s name.
- Medication may NOT be left in lunch boxes, school bags or children’s clothing. It must ALWAYS be handed to a teacher directly.
- Medication will not be given in any amount other than what is indicated on the prescription label.
- All medications that are administered are logged into Medication Logs. Each classroom has its own log.
Plan for Special Health Care Medical Conditions/Allergies

During intake, families will be asked to record any known allergies on the face sheet and asked to have the physician fill out a medical condition or food allergy action plan when appropriate. The face sheet will be updated at least annually. All allergies or other important medical information will be posted in each classroom with a “Confidential” cover sheet. Allergy and medical condition lists will be updated as necessary – when new children enroll or when unknown allergies or conditions become known. All staff members are made aware of this list.

The names of children with allergies or medical conditions that may be life threatening (i.e., bee stings) will be posted in conspicuous locations with specific instructions if an occurrence were to happen. The Director will be responsible for making sure that staff receives appropriate training to handle emergency situations such as allergic reactions.

Sleep Safety

Families will be notified of SUID risk reduction practices, sleep positioning policies, and arrangements for sleeping all infants on their backs.

To reduce the risk of Sudden Unexpected Infant Death (SUID) including Sudden Infant Death Syndrome (SIDS):

- Every infant twelve months of age or younger will be placed on their back for sleeping, unless the child’s health care professional orders otherwise in writing
- When a child’s doctor determines the need for the child to be put to sleep on the child’s stomach, that child’s crib will be labeled stating that permission is granted for stomach sleeping by the doctor
- Children can sleep in any other comfortable sleep position once they are easily able to turn themselves from the back position, but will first be placed on their backs for napping.
- Infants younger than 6 months at the time of enrollment will be under direct visual supervision at all times, including when napping, for the first six weeks of being in care. Young infants will be placed in the front cribs to monitor sleepers. Teachers will keep children in direct view and check them every five minutes for breathing signs by watching the chest raise and lower. Teachers will position themselves to allow for crib monitoring.
- No children under 12 months of age shall be put down for sleep in a crib, bassinet, port-a-crib or playpen containing pillows, comforters, stuffed animals, or other soft, padded materials
- SleepSacks are provided for all children. We do not use blankets in cribs.
- An infant’s head must remain uncovered during sleep

If an infant falls asleep outside, in a stroller or backpack, teachers will monitor the child to be sure they are not over bundled in cold weather, becoming overheated in warm weather, and that nothing interferes with breathing (stroller straps secure but not too tight; no blankets or soft objects with infant; baby is positioned so they can breathe freely).

If an infant falls asleep in a swing or is dropped off in a car seat asleep, the child will be moved into a crib and any outdoor clothing will be loosened to prevent overheating.

Swaddling will not be done in our program since no children are below the age of six weeks.
When older infants between the ages of 12 and 15 months are preparing for their transition to the toddler room we can help them prepare by giving them the opportunity to sleep on a cot in the infant room. Families are included in this decision as well as consideration for any medical reasons that might conflict with the cot sleeping, the developmental readiness of the infant and the ability to safely evacuate infants sleeping on cots. If an infant is sleeping on a cot and there is an increase in injuries involving the older infants sleeping on cots this procedure will stop and the infant will go back to sleeping in a crib while in the infant room.

**Bottle Warming Safety**

The Department of Early Education and Care recommends the safest solution to serving bottles is to serve them cold or at room temperature. We understand however, that families may wish for their infant’s bottles to be warmed before feeding. Our teachers can do this only by holding the bottle under warm, running water or placing the bottle in a container of warm tap water for no longer than 5 minutes. After warming, bottles will be gently mixed and the temperature of the milk tested before feeding to be sure it feels warm, but not hot.

**Diapering**

Diapering of young children happens throughout the day and is a nice one-on-one time for teachers to talk to children, to further develop relationships with care givers and further extend language with singing and narrating the diaper routine.

Teachers check diapers frequently during the day to ensure the continued comfort and cleanliness of each child. Each diaper is changed in a sanitized, designated area. Each child is fully supervised by a teacher and encouraged to participate in the diapering process (i.e., holding the clean diaper or clean wipe, helping take off pants, naming body parts and/or happily chatting).

Families are asked to provide diapers and wipes. Teachers will remind families to replenish supplies, but should check supplies regularly. Both disposable and cloth diapers are accepted.

**Toilet Training**

Beginning to use the toilet can be both an exciting and challenging time for your child. The goal of the Center is to begin toilet training at the lead of the child and family. Children usually begin indicating signs of readiness, which both parents/guardians and teachers should look for. Each child is a unique individual and toilet training will following according to each child’s developmental readiness. Toilet training is not a requirement for enrollment. The process of toilet training is outlined below:

- The initiation of toilet training should always be based on the child’s developmental level rather than on the child’s age. Initiating toilet learning before the child is developmentally ready can create stress for the child and the family, and increase the length of time it takes
- It is important for the child to begin toilet training when he/she exhibits signs of interest and readiness. Ignoring these signs may cause the child’s interest to wane and can delay the toilet learning process
- Therefore, readiness is viewed as a valuable window of opportunity that staff and families identify and respond to
- Staff will work with the family as to how the family would like toilet training to proceed
• Once children have embarked on the toilet training process teachers provide access to the toilet throughout the day as well as gentle reminders inviting the children to try using the toilet
• Any reluctance to try the toilet is responded to with a calm, matter-of-fact manner and children are encouraged to try again next time
• Similarly when children have success at using or trying the toilet teachers also respond in a low-key, matter-of-fact manner
• Readiness cues include the following:

1. The child imitates their parents'/guardian’s behavior  
2. The child begins to put things where they belong  
3. The child demonstrates independence by saying "no"  
4. The child expresses interest in toilet learning  
5. The child walks and is ready to sit down  
6. The child communicates their need to eliminate (urinate/pass bowels)  
7. The child is able to pull clothes up and down (on and off)  
8. The temperament of the child, which includes motor activity, intensity of reactions, mood, regularity (especially behavioral), initial approach/withdrawal response, adaptability to new situations, attention span/persistence, distractibility, and sensory threshold/frustration level, needs to be considered when determining the child's readiness and the staff and family’s strategy for toilet learning

Staff assist children in the later stages of using the toilet but encourage growing independence with wiping and using the bathroom without an accompanying adult as appropriate. Staff leave the door open when helping a child with toileting. Both children and staff wash and dry hands thoroughly when toileting is completed. It is understood and accepted that children may have accidents throughout their time in the Center. Accidents are met matter-of-factly. Independence for changing and washing up are encouraged as age appropriate. Children who are toilet trained will be reminded throughout the day to use the toilet. Please provide at least one change of clothes to be kept in your child’s cubby.

We understand families may have toileting practices that require additional attention or planning and we are committed to partnering as much as possible within a child care setting to support family’s wishes.

**Food and Nutrition**

The Center encourages healthy eating at the Center. We believe that sound nutrition is a basic need of children. We offer children age appropriate nutritious snacks in the morning and afternoon. Snack and meal times are warm and relaxing. This is time for conversation, self-expression and enjoyment.

The Center respects different diets based on culture, health, and personal beliefs by supporting the child’s choice to eat foods their family prefers.

Please pack lunches with cold packs as necessary to maintain the food’s proper temperatures. Infant lunches can be kept in the refrigerators. Toddler and Pre-school classrooms do not have refrigeration space so lunches for older children need to come with cold packs. Please cut, prepare and pack your child’s lunch in the way they are able to eat it on their own. Please use a thermos for foods you’d like served warm. Our teachers focus on the engagement with the children during meal times rather than preparing food for the children. Please label all containers sent in, including bottles.
While the teachers offer encouraging comments about trying the foods the family has sent in for the child’s lunch they do not preference the order in which foods should be eaten. We believe this helps children to listen to their body’s signals for hunger and fullness and to form a healthy relationship to all food choices.

To encourage a healthy decision-making process, the Center offers the following suggestions for the families when considering lunch options for their children and/or special events in the Center.

- Tuna salad and crackers
- Fresh fruit (peeled apples, strawberries, orange segments, banana, blueberries when age appropriate and when cut small for very young children)
- Yogurt
- Cottage cheese and fruit
- Veggie pieces and hummus
- Sunflower butter (this is a nut and peanut free school) & whole wheat bread
- Hard boiled eggs
- Milk and/or 100% juices
- A variety of foods from family dinners

For younger toddlers, please avoid hot dogs, popcorn, grapes or other very small berries, raw celery, carrots, nuts or fruit with the peel on because of choking hazards. While your child may be able to manage these foods at home, in a setting with more children and lively conversations, your child may not be able to manage these foods as safely at school.

*Soda, gum, and candy* are also not allowed in the Center. Please send your child in with alternative treats.

**No Peanut Policy**

Because of the increasing numbers of children with severe peanut allergies this Center will enforce a *NO PEANUT and TREE NUT, NO PEANUT and TREE NUT BUTTER, AND NO PEANUT or TREE NUT PRODUCT* policy. Families should be aware of things like peanut and nut oils in prepared foods or foods produced in factories where other peanut products are produced. There are some children who are so allergic that if another child ate a peanut or tree nut product and then touched the toys of an allergic child, it could have a deadly consequence. We ask families to respect the needs of individual members of the community. Staff will replace foods containing peanuts in a child’s lunch with other nutritious foods if children bring nut or peanut products as part of their lunch.

**Oral Care**

Teachers assist children in brushing their teeth when children are in care for more than four hours. Teachers wipe an infant’s gums with a clean, damp cloth after feeding or use infant tooth brushes. Families supply toothbrushes which are labeled with the child’s name and date of issue, and distribute toothpaste in a manner that does not spread germs. Brushes are rinsed and stored in an open container without touching other brushes. Teachers sanitize sinks upon completion of tooth brushing.
School and Classroom Policies

Wash Hands on Arrival to School

We ask families to wash their children’s hands upon arriving at school. This practice goes a long way toward keeping everyone healthy and we appreciate your help each day!

Choke Free Clothing

In an effort to eliminate choking hazards our regulations state that children cannot wear scarves, necklaces, or strings on their clothing or hats at the neck. This includes items worn by all ages for indoor and outdoor play. This also includes any teething or amber necklaces worn around the neck on children of any age. Please be sure that any strings on your child’s clothing are taken out, that they do not wear any kind of neck decorations or necklaces and that you replace scarves with neck warmers. We still want to have warm necks for outdoor play!

Please Leave Outdoor Shoes at the Door in the Infant Rooms

Infants and young toddlers spend most of their time on the floor. In an effort to keep their environment clean we ask all grown-ups to remove their shoes before entering the infant classrooms. Teachers will be wearing indoor shoes. Children who can walk should have indoor shoes or slippers as well.

Toys from Home

We ask that children leave all of their own toys at home. Children have a harder time sharing their own toys in a classroom situation, and toys from home can become broken or lost. If a child carries a toy into school, it is up to the family to take it back home right away. Children are welcome to bring cuddle items for nap time. These will generally stay in the cubby until rest time.

Teachers of older groups may also make plans for sharing items from home on specific share days. Your child’s teacher will be in touch with you about whether toys can be a part of this tradition, but again, if toys are a part of share days, they will only be taken out of the cubby for share time.

Food from Home

We also ask that all food, other than lunch food, be left at home. When one child has extra food or treats from home in a pocket or backpack, it is confusing to other children about why they can’t have it. Children should finish breakfast before arriving. A nutritious snack will be served within the second hour after school starts.

Use of the Playground

We understand that the playground is a wonderful place for families to gather. We ask that families do not use the playground during our school hours and pay careful attention to children on the yard so that equipment is used safely. The Williams College Children’s Center will not be responsible for children in a family’s or caretaker’s care on the playground.
Holidays, Birthday Celebrations, and Traditions

Holidays

Our plans for recognizing holidays stem from the core values of our school and are designed to emphasize our school-wide community, while also minimizing the commercial aspects of holidays. Like in our classrooms, we seek to reduce the presence of commercialism in the program. We emphasize natural and open-ended materials and experiences and encourage in-depth, extended projects. We do not celebrate religious or commercial holidays and the teachers do not plan curriculum to recognize holidays. However, we value family traditions and cultures and encourage families to share their traditions with their child’s classroom. We also value celebrating together and have built specific traditions throughout the year that allow us to celebrate together and that emphasize our school-wide community. We hope that our holiday traditions minimize stress for families and children, avoid the commercialism associated with the holidays, and engage children in a fun and meaningful experience.

We value and respect the fact that families often have different holiday traditions, and we wholeheartedly welcome and encourage families to come into the classroom and share these celebrations. Aware of children’s excitement surrounding such celebrations, we allow time for group discussion of their individual experiences without emphasizing holidays in the curriculum.

October
In October, Halloween is not emphasized at school. We ask families to refrain from sending children to school in costumes and to avoid sending Halloween candy in lunches. Individual classrooms may discuss some of the aspects of Halloween that children think about if children initiate these conversations. We host a Fall Family Mingle to welcome in our new school year.

November
In November, classrooms plan Potluck Gatherings to celebrate with families. Children can help to prepare the menus and families are invited in to celebrate together.

December
Teachers do not plan any special celebrations for the December holidays. Parents are welcome to plan time to join the classroom and share their family’s traditions with the group.

February
The teachers do not plan time for children to exchange valentines in the classrooms. If you would like to exchange valentines, please do so outside of school - please do not bring valentines to school. Instead, each classroom holds a "Stuffed Animal Party." Children will be invited to bring in a favorite stuffed animal and each classroom plans a special activity for their stuffed animal friends.

May and June
We do not plan special events for Mother’s Day or Father’s Day.
Birthday Celebrations

Birthdays are honored with small celebrations to mark growth and change and reaffirm the importance of each individual. Please discuss with the teachers what kind of celebration would be appropriate and fit into the classroom’s routine. Examples of ways to celebrate could be bringing in a special book or game to share with the class, or a small project that could be done in class. Individually wrapped non-candy treats (popsicles, yogurt drinks, fruit squeeze-pouches, goldfish crackers, etc.) or store-bought baked goods in un-opened containers listing ingredients are also allowed if families wish to send them in. Please talk with your child’s teachers to learn of allergies or other considerations before making your plans.

If you are having a birthday party for your child, we ask that invitations be sent through the mail unless every child in the class is invited. Invitations found in cubbies cause great excitement, and we wish to avoid unnecessarily hurt feelings for those children not invited. We encourage children not to discuss their out-of-school parties for this reason.

Traditions

We have a variety of traditions at the Children’s Center. Some of these events occur during school hours and some are after hours. Our traditions include:

• Fall Family Mingle (October)
• Classroom Potluck/Event Gathering (November)
• Donation effort for local organizations (fall and winter)
• Curl up and Read and Pajama Party (January)
• Stuffed Animal Party and Pajama Day (February)
• Special Persons Day (March)
• Children’s Art Show (April)
• Week of the Young Child (April)
• Family Picnic (May)
• Bike Day (June)
• Anniversary Ice Cream Social (July)

Reporting Child Abuse & Neglect

Mandated Reporting

“As professionals in contact with young children and their families, teachers are required by law to help the Department of Children and Families (DCF) become aware of children who may be abused or neglected. According to the law, public or private school teachers, educational administrators, guidance or family counselors, as well as day care/child care workers, are mandated reporters.” Therefore, it is the policy of the Williams College Children’s Center (WCCC) to report any and all suspected cases of child abuse and/or neglect.
to the DCF and the Early Education and Care (EEC) immediately by telephone and to follow up in writing within 24 hours of the telephone report. The Center will offer full cooperation of its staff during the investigation of the reported incident. Staff members go through background records checks and fingerprinting every three years.

*Williams College Children’s Center Staff* include administrators, teachers and all others paid directly by the Center. A copy of the Center’s Child Abuse and Neglect Policy is available to families upon request.

**Referrals, Social Service, and Community Resources Plan**

In the event a teacher has concern for a child’s emotional, social, cognitive and or physical well-being or development, the teacher will consult with a Director. If a Director, through observations and consultation with the teachers, determines that a child or family is in need of additional support services (educational, medical, mental, social or other family support services), the Director and teacher will discuss the situation with the family. Alternatively, families may also address their concerns about their child with the teacher or a Director as part of ongoing communication and join in the process of seeking a referral. The Director(s) will meet with the family and the child’s Lead Teacher to address concerns.

When necessary, and with the written permission of families, the Director will make a referral to an appropriate agency or the Director will give contact information to the family if family inquiry is required by the agency. A Director will assist with making the contact at a family’s request.

Written permission from families will address the nature and duration of evaluations or services to be obtained, when and where services would take place, and who is to provide the services. All concerns are documented by the Lead Teacher in writing and placed in the child’s folder, whether a referral is made or not. The Lead Teacher will also write a statement of the reasons for the referral, a summary of concerns or observations, and effort to accommodate the child’s needs and review the statement with a Director.

Once a referral is made, a Director will meet with the Lead Teacher in regular supervision times to follow-up on the referral. If no services are provided at the time, a Director will meet with the Lead Teacher every three months to review the child’s progress in order to determine if another referral is necessary. Referrals for children in the Infant/Toddler program will be led by the Assistant Director. Referrals in the Pre-School Program will be led by the Director. The designated Directors have the responsibility for placing documentation in the child’s file regarding the concerns and actions taken on behalf of the child including the family conference, signed and dated authorizations, and results of the referral, including follow-up. Such documentation will be written by the child’s Lead Teacher.

We ask that families inform us if their child ever receives services from an agency since we want to know who is coming to our door and so that we can all work together. We have forms for families to sign so that we can have permission to speak to the people who serve your child. This helps us support your child.

And lastly, if ever families have concerns about their child’s development or progress, please share your concerns with your child’s teacher. Additionally, directors are always available to speak with you. Your child’s teacher can always make a conference time even if it is not the typical time of year for conferences.
For Children from Williamstown:

Children who are over 3 years old and who live in Williamstown can be referred for a developmental screening at Williamstown Elementary School. The WES staff includes a speech/language therapist, an occupational therapist and a physical therapist. The Pre-K programs at WES have teachers who are certified in general as well as special education. Children who qualify for services after being screened can continue to attend the Williams College Children’s Center and have needed services at WES. In order to attend the Pre-K Program for special needs at WES, the child would need to qualify for services through an academic educational screening tool.

Families should contact the office of Special Education at 413-458-5707, ext. 419 to have their child screened or for further questions. Once the Special Education office receives signed paperwork from the family, the school has 30 school days to set up the evaluation. Within 45 days of receiving the paperwork the school will bring the results of the screening to a team meeting for action. When families take their child to WES to be screened they can expect the testing to be 45 minutes to an hour, depending on the needs and age of the child. Additional testing may take place a second day if testing needs to be done in more than one area.

For Children from North Adams:

The North Adams Office of Pupil Services encompasses services for students who have handicapping conditions, are homeless, require tutoring for medical conditions and/or require transportation due to their handicapping condition. The administrative staff oversee a variety of programs at each level including programs for students requiring behavioral interventions, daily living skills, academic remediation and specialized programming until age 22. Health services for all students are also overseen through the Health Administrator within the Office of Pupil Services. Diagnostic services including testing and screening for suspected disabilities, pre-k screening and related services fall within pupil services. The Office also works closely with Northern Berkshire Community Partnerships to assist with special education referrals and services for pre-school students living in the North Adams district. Student services conduct outreach to community agencies and local private schools on a yearly basis for possible identification of students that may have a need for special education or related services.

United Cerebral Palsy of Berkshire County

United Cerebral Palsy of Berkshire County is the agency now handling early intervention for children from birth to three. They offer developmental screenings for children under three at no cost to families. Family’s insurance will be billed (of if you don’t have insurance, the Department of Public Health will be billed) and any co-pay will be covered by the Department of Public Health. The screenings take about 1 hour and are fun for children to participate in. Families would need to make appointments on their own. Please call Mary in the Early Intervention office at 664-9345.

Community Agencies:

The following is a partial list of some resources in the community to which a family might be referred, but referrals will not be limited to this list.

Early Intervention and Child Abuse & Neglect
United Cerebral Palsy of Berkshire County (Early intervention) 413-664-9345
<table>
<thead>
<tr>
<th>Department of Children &amp; Families (Child abuse &amp; neglect)</th>
<th>1-800-292-5022</th>
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<tbody>
<tr>
<td><strong>Counseling and Child &amp; Adolescent Services</strong></td>
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<tr>
<td>The Brien Center – North Adams</td>
<td>413-664-4541</td>
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<tr>
<td>The Brien Center – Pittsfield</td>
<td>413-499-0412</td>
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<tr>
<td>Behavior Health Network – Springfield</td>
<td>413-747-0705</td>
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<td><strong>Education and Health Services</strong></td>
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<tr>
<td>Mass. College of Liberal Arts (MCLA)</td>
<td>413-662-5000</td>
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<tr>
<td>Berkshire Community College – Pittsfield</td>
<td>413-499-4660</td>
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<tr>
<td>Berkshire Community College – Great Barrington</td>
<td>413-528-4521</td>
</tr>
<tr>
<td>Healthy Families – North Adams</td>
<td>413-664-6104</td>
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<tr>
<td>Healthy Families – Pittsfield</td>
<td>413-445-4324</td>
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<tr>
<td>Visiting Nurses Association – North Adams</td>
<td>413-664-4536</td>
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<tr>
<td>Visiting Nurses Association – Pittsfield</td>
<td>413-447-2862</td>
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<td><strong>Financial Assistance and Legal Aid</strong></td>
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<tr>
<td>Dept. of Transitional Assistance</td>
<td>413-236-2000</td>
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<tr>
<td>Vermont Dept. for Children &amp; Families</td>
<td>1-800-479-6151</td>
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<td>Northern Berkshire YMCA</td>
<td>413-663-6529</td>
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<tr>
<td>Family Life Support Center (Housing support)</td>
<td>413-743-7957</td>
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<td>Berkshire Housing Services – Pittsfield</td>
<td>413-499-1630</td>
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<tr>
<td>New England Farm Workers’ Council (Child care info/referral</td>
<td>866-573-4684</td>
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<td>services/voucher information)</td>
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<td>Community Legal Aid</td>
<td>413-499-1950</td>
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<tr>
<td><strong>Other</strong></td>
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<tr>
<td>Elizabeth Freeman Center (Domestic violence)</td>
<td>413-499-2425</td>
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<tr>
<td>Berkshire Works - Pittsfield (Employment/training)</td>
<td>413-499-2220</td>
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<tr>
<td>The Brien Center – North Adams (Alcoholism and addiction)</td>
<td>413-664-4541</td>
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<td>The Brien Center – Pittsfield (Alcoholism and addiction)</td>
<td>413-499-0412</td>
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<td>The Brien Center – 24-hour hotline</td>
<td>1-800-252-0227</td>
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<td>The Salvation Army – North Adams</td>
<td>413-663-7987</td>
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<td>The Salvation Army – Pittsfield</td>
<td>413-442-0624</td>
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<tr>
<td>Woman and Infants Feeding Program (WIC) – North Adams</td>
<td>413-663-3012</td>
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<tr>
<td>Woman and Infants Feeding Program (WIC) – Pittsfield</td>
<td>413-445-9429</td>
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<tr>
<td>Woman and Infants Feeding Program (WIC) – Great Barrington</td>
<td>413-528-0457</td>
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