



SUNSHINE PACKET

Sun Moon and Stars Learning Center

Sunshine I, II & III

Daily schedule for 6months and above

7:00am-7:45/8:30am	Arrival/Breakfast and health checks
9:00am-9:30am	Diaper changing and bottles
9:30am-10:00am	Nap time preparations (Lights off/Music on)
10:00am-11:00am	Nap time (Diaper change for children up)
11:00am-11:30am	Lunch time
12:00pm-12:30pm	Outdoors time/Bottle time (Weather Permitting & Varies with group)
12:45pm-1:00pm	Circle time and story time
1:00pm-1:30pm	Come back in to the classroom/diapering time
2:00pm-3:00pm	Nap time
3:00pm-3:30pm	Snack time (snacks, bottles, and diapering)
3:30pm-4:15pm	Outdoors play time / Free Play
4:15pm-5:00pm	Snack time (snacks, bottles, and diapering)
5:00pm- 6:00pm	Pick up time

Special Notes:

- Diapering will be done as needed throughout the day along with schedule
- Bottles will be given as needed by child along with schedule
- Schedule not to be changed without permission from the Administration
- All babies use outdoor (No exception)
- Music time varies by group (Check with Administration)

Sunshine Program:

Sun, Moon, and Stars recognizes that the first two years of life are an extraordinary time that set the stage for all the years that follow. During these years children need to acquire a pervasive sense of the essential trustworthiness of oneself and others. It is the sense of safety and security that comes from responsive, predictable care from familiar people to whom one is attached. Without this sense, the world is far too scary a place to cope with and learn about.

Each child also needs to develop a sense of autonomy, the sense of being a separate, independent self that comes from being treated as an important individual and being allowed increasing opportunities for independence.

The child's first two years are critical for the development of the brain and language development. During this period, the child's life experience plays a fundamental role in the "hard-wiring" of the brain, laying the foundation for all intellectual and emotional development to follow. From birth, babies are marvelous learners, immediately investigating the sights, sounds, and feel of the world. Long before walking and talking, they are exploring their own bodily powers and what the world has to offer. They need a safe world rich with opportunities to actively explore and enjoy: to see, hear, feel, touch and move. They need a world filled with responsive interactions and language: many "conversations" with others, books (for even the youngest babies), songs, and a great deal of listening and responding to their vocalizations and words. The program includes:

Sunshine Rooms

The first year of life is a critical time for development. It is responsive, language-rich attention that follows the child's lead that is essential to optimize development. At Sun Moon and Stars Learning Center, teachers and parents work together to ensure responsive care is giving for each child. The program provides:

- **Personal Care and Routine Plans:** Parents and the primary caregiver establish a personal care plan that is continually updated to ensure that care routines are personalized "prime times" that fit the child and family. Class routine is also very important, so we request parents to work with the teachers to bring the baby to the class routine, this is achieved gradually.
- **Caregiver to Infant time:** To develop a deep bonding between the child and their caregiver to foster a beneficial, trusting attachment. Very young babies spend time each day "heart to heart" with their primary caregiver. Every sound and movement of the

baby is met with a warm response: a word, a smile, a touch that signals, "You are special."

Parents Prime Time: Teachers understand that the parent-child relationship is primary and parents are encouraged to call anytime with ideas, questions, or concerns.

- **Staff coordination:** Teachers in the home base systematically observe and share observations to ensure that each baby's cues, needs, and strengths are recognized and understood and that care is responsive.
- **Read:** Long before they understand the words and pictures, infants benefit from the joy of sharing a book in the arms of a caring adult. Reading begins with young babies and gains momentum as the child matures. On laps, on the floor, and as they drift off to sleep, infants and toddlers experience the magic and wonder of books.
- **Music:** Children have an affinity for music from birth. They need to be involved in music, not just listen to it. Music can encourage memory, imagination and language.
- **Safe and Natural:** Your child will grow in a place surrounded by natural materials and fibers. We minimize the use of plastic in our environment. We use wood, cotton, jute, paper for the healthy development of children. **Safety comes first at SMS, and the safest place for your baby to nap is a crib.** SMS does not allow blankets (big/small), pacifiers, or musical toys and swaddling is not allowed per licensing requirement. So we really would like you to prepare your baby before he or she starts at SMS to make the transition easier.
- **Homely environment:** The indoor/outdoor setting is calm and homelike. The decor is designed to stimulate and not to over stimulate the infants and toddlers. The windows are opened every morning to let the fresh air in the building. The outdoor environment is all natural with lots of trees, plants, climbers and visitors (birds, squirrels, butterflies).
- ◊ **Schedules:** Teachers follow the schedule of the classroom based upon the individual child's needs. There is flexibility when your baby starts for the first few weeks and after this your child's teacher will gradually work towards getting all babies on the class schedule.

At Sun Moon and Stars, we follow the
“Principles of Care Giving” by Magda Gerber.

Principle 1: Involve infants/toddlers/preschoolers in things that concern them.

- For example, ask if a child wants a hug, is finished with certain toys, etc.
- Give advanced warning that you are about to help them.
- Assist, as capable, in self-care tasks.
- Give opportunities to make age appropriate choices.

Principle 2: Invest in quality time Get on child’s level to view room.

- Engage in child directed activities *with* children (play with them).
- Respect when children want to interact or want to play alone.
- Offer comfort when appropriate.
- Create time to be with children, i.e. care giving times.

Principle 3: Learn child’s unique ways of communicating and teach yours.

- Speak normally to children (no baby talk).
- Verbally express what we see the child is doing (expanding vocabulary).
- Provide or model words which pertain to and/or will help them work through situations.

Principle 4: Invest time and energy to build a total person.

Principle 5: Respect children as individuals.

- Acknowledge/label feelings
- Allow children to move at their own pace whenever possible.
- Acknowledge the unique characteristics of each child.

Principle 6: Be honest about your feelings

- Let children and co-teachers know how you feel about any given situation.
- Honor the child's feelings and your own as well.
- It's okay and important to model appropriate expressions of emotions.

Principle 7: Model the behavior you want to teach.

- Modeling is a very important teaching tool. Children learn by watching important figures in their lives.
 - Children exhibit the behaviors that are modeled for them: for example, teachers will model washing hands before eating, talking about problems calmly, cleaning up spills, taking turns with toys, etc.

Principle 8: Let children solve their own problems.

- Children learn best by doing.
- Our goal is to encourage the children to be independent, self-confident, inquisitive learners.
 - When children are learning a new skill, teachers will set up the situation to aid successes. For example, when learning to put on his/her own shirt, a teacher might lay shirt flat on a surface and verbally direct child to grab shirt from bottom and pull over his/ her head.
 - When children encounter a problem, teachers will first ask open-ended questions to help the children solve their own problem rather than solving it for them. Likewise, when children want to gain more information about something, teachers will ask open ended questions to facilitate independent thoughts before offering information.

Principle 9: Build security by teaching trust.

- Respond to children promptly
- Provide clear and consistent guidelines/limits.
- Verbally let them know we are there if they need help.
- Provide a safe environment both physically and emotionally
- Learn each child's individual way of learning

- Provide time for uninterrupted play and freedom to explore and interact with other children.
- Offer activities to foster a well-balanced development.

Principle 10: Be concerned about the quality of development in each stage.

- Make frequent observations of the children and document developmental growth “Anecdotal.”
- Make *Individual Development Plans* (IDPs) for each child.
- Allow the children to develop at their own rate but at the same time provide challenges to encourage further development

MY PLACE TO GROW

The curriculum here at SMS provides infants and toddlers with a rich learning environment having age appropriate learning centers/materials planned and organized to maximize:

- **Gross and Fine Motor Experiences:**

For younger babies: reaching, grasping, kicking, holding, pulling and standing, creeping and crawling in, out, over, under. For toddlers: gripping, throwing, manipulating, walking, climbing, pushing, pulling, etc.

- **Sensory Experiences:**

Explorations of texture, color, patterns, size and shape, smell, taste, weight.

Cognitive Experiences:

Object permanence, spatial relationships, classifying, collecting and dumping, cause and effect experiences, problem-solving.

- **Language and Music:**

Adult-child conversations, reading and language play, explorations in music, rhyming, and sound explorations.

- **Social Development/ Personal Expression:**

Art, movement, imitation and beginning dramatic play, doll and stuffed animal play, finger play, puppet play

Children of all ages learn through their own experiences, trial and error, repetition, and imitation. Adults can support, guide and encourage children's learning by

ensuring that the environment is emotionally appropriate; invites play and encourages the use of own imaginations, active exploration, and movement by children; and supports a broad array of experiences. A reliable framework of routines, together with a stimulating choice of activities and materials, facilitates children's learning. Thoughtful caregivers recognize that the learning environment includes both people and relationships between people and that attention to the way in which environments are set up and used is an important contribution to the quality of a learning experience.

Young infants begin to learn from their immediate surroundings and daily experiences. The sense of well-being and emotional security conveyed by a loving and skilled caregiver creates a readiness for other experiences. Before infants can creep and crawl, caregivers should provide a variety of sensory experiences and encourage movement and playfulness.

Mobile infants are active, independent, and curious. They are increasingly persistent and purposeful in doing things. They need many opportunities to practice new skills and explore the environment within safe boundaries. Adults can share children's delight in themselves, their skills, and discoveries and gradually add variety to the learning environment.

Goals of our care team for the Sunshine class:

- *to design an environment that promotes children's health and safety at all times.
- *to strongly support children's needs for physical movement and development, sensory experiences, and making sure they are getting plenty of fresh air, rest and nourishment.
- *to organize space and carefully select developmentally appropriate materials designed to stimulate exploration, experimentation and discovery.
- *to provide care to and develop interpersonal relationships with each child by being warm and responsive, attentive, providing consistent comfort in a supportive, culturally sensitive environment.
- *help every child develop socially appropriate behaviors by noticing and responding to their nonverbal cues and by allowing them to interact with children of different ages.

*adhering to an individualized routine of care to help with their self-awareness, language, and social interaction.

*to be available to encourage their interests and curiosities about the world so that they can develop strategies and activities that will enhance their learning experiences and development.

*to use pictures, print-rich environment, language, familiar objects, body language, and physical cues to help them in their early language development.

IMPORTANCE OF OUTDOOR PLAY FOR INFANTS

Outdoor play for infants and toddlers should vary according to their developmental stages. Below are some important reasons for taking infants and toddlers outside. Outdoor Play Promotes Physical Development. As infants and toddlers grow, their physical development increases greatly. Infants need areas where they can crawl and pull themselves up, such as low ramps. Toddlers need areas where they can climb and run (Rivkin, 2000). Providing time outdoors can help the children develop large motor skills. Outdoor Play Promotes Social Development. Although most infants are not interested in and do not have the ability to physically play with others, they are very interested in what others are doing. They often watch people around them. Therefore, outdoor time is a way to allow the children to watch others as a first step in their social development

(Oesterreich, 1995). Toddlers tend to want to play alone but can learn important social skills through outdoor play. Outdoor play offers the children the opportunities to begin to learn about sharing, getting along with others, taking turns with toys and other important social skills.

Outdoor Play Promotes Sensory experiences. Infants and toddlers are in the process of learning about the world around them. Going outdoors with young children provides wonderful opportunities to explore the world through their senses. The sun, wind, grass, sand, birds, chimes, vibrant flowers and all of nature help stimulate a child's senses.

What Parents Need To Know:

- Parents must supply disposable diapers, wipes and diaper rash cream we do not offer the option of cloth diapers at the Center.
 - Pre-made bottles need to be provided each day from home. Extra formula and bottles may also be provided (in the original container) by the parent just in case your baby need extra food.
 - In this case, water must also be provided from home. We do not serve babies tap water. Please take the cup home everyday at pickup time to wash. SMS does not provide dishwasher for dishes. We would like to make sure that the babies are drinking water from a clean cup everyday. This applies to infants who are taking water.
 - Label all items with your child's first name and the first letter of the last name. This includes clothes, diaper bags, diapers, pacifiers, etc.
 - Closed toe shoes must be provided for mobile infants and toddlers to go outside and play.
 - Do not bring valuable or sentimental items to the classroom.
 - Several changes of clothes must be provided for when the children's clothes become soiled and/or the weather changes.
 - Provide a hat for summer time to avoid sun exposure during buggy rides.
 - A box of gallon size ziploc bags for soiled clothes.
 - In order to maintain a healthy environment for the staff and children, soiled clothes will not be cleaned at the center.
 - Any parent using the diaper changing tables at SMS must follow the state licensing procedures for proper sanitization.
 - All infants not yet able to turn over on their own must be placed in a face-up/on back sleeping position, unless the child's parents present written documentation from a health-care professional stating that a different sleeping position is allowed or will not harm the infant.
 - Infant's fingernails and toenails must be trimmed at all times.

- The center provides a daily written report to the child's parents when the child is picked up from the classroom.

- **SIGN IN/SIGN OUT:** It is a state regulation to sign in/sign out your child.

- Please sign if there is any incident report on your child from the day. We will store the signed copy in your child's folder for our records. If you need a copy please request at the front desk.

- Mobile infants have daily opportunities for outdoor play as weather permits.

- Until a child is twelve months old and able to eat table food, parent must bring in food and formula (pre-made bottles), and review and update the feeding instructions with the classroom teacher every thirty days.

- ◊ Young infants starting a new food for the first time must try the food at home for at least three days before we can introduce that food at the center.

- * Send an extra premade bottle and extra food just in case your baby needs more than usual.

- ◊ • Pacifier use will be very limited and the babies will not be offered pacifiers in the cribs during nap time.

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- ◊ Hair bows/bands, clips are not allowed in the infant room as these can be a safety hazard to your baby and others. The teachers will remove them and save in your child's cubby/backpack.

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- ◊ Infants must never walk around and or sleep in their cribs with a bottle.

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Label every item with your child's name in permanent ink!

Please note that due to limited space, we cannot accommodate storage for car seats. Please plan accordingly. Thank you for your understanding.

SMS is a CELL FREE ZONE. Please hold all cell phone conversations for before and after pickup/drop off. Thank you!

Tips for Dropping Off, Visitors & Family:

- Please enter the room quietly and slowly. Some of the children may be sleeping or playing behind the door.
- When entering the Infant class take off shoes or slip into the shoe covers by the door. This helps to keep floors clean for your child. Shoe covers may cause you to slip/trip, so please be extra cautious.
- Please close the classroom door or gate door behind you. This is a very important safety issue. Infants are quick and eager to explore different areas.
- Please wash your hands when you enter the Infant Center.
- For the safety of your children and others, please keep your child and sibling close by at drop off/pickup; they must come into the classroom with you. Do not leave your child unattended even for a second.
- Siblings must also wash their hands when entering the room. In the infant's room, siblings must not touch any of the infant toys.
- Older siblings must always *use walking feet*. Running and jumping are natural for 2 to 5-year-old children, but very dangerous in an environment where several infants do not move, move very slowly or trip and fall easily.
- Personal toys are best left at home. If they must come to school they need to be stored in your child's cubby.

- Please do not sit on the shelves or tables. We as adults are important role models to children. If they see adults sitting on the furniture the children get the idea that this is an appropriate behavior.

- ◊ In the Infant Center the children must always be seated when they are eating or drinking. This is a safety precaution we take to prevent choking.

- ◊ Please watch out for the toys or any spills on the floor for any tripping or slipping hazard.

- If you have any questions or comments, the staff of the Infant Class will gladly discuss them with you. We have your family's best interest at heart and hope to serve you in all areas.

Preparing and Serving Bottles and Food

Breast Milk Bottles

- * Breast milk (liquid and frozen) needs to be labeled with the child's full name and expressed date.

- * Fresh breast milk can be stored in the refrigerator for 2 days.

- * Frozen breast milk can be stored in the refrigerator (no freezer use at SMS) and to be offered the same day.

- * Unused breast milk (frozen or liquid) must be sent home at the end of every day. Parents are required and responsible for monitoring/stocking the fridge basket.

- * Previously frozen breast milk can be stored for only 24 hours after defrosting.

- * **Freezer section not to be used at SMS to store baby food or milk.**

- * Once a baby begins drinking breast milk, the bottle can only be offered again up to one hour later. If the baby does not want the remaining breast milk past one hour, then the remainder must be discarded.

Formula Bottles

- * All formula bottles need to be mixed at home and premade from home.
- * Once a baby begins drinking formula, the bottle can only be re-offered up to one hour later. If the baby does not want the remaining formula, then the remainder must be thrown away.
- * Formula can be stored for only 24 hours. After 24 hours, the formula must be discarded.

All unused bottles must be sent home at the end of the day. Breast Milk and Formula Bottles

- * Breast milk/Formula must be heated in water no more than **90°**, for no more than **5 minutes**.
- * Breast milk/Formula needs to be gently mixed and not shaken.
- * Always check the temperature using a food thermometer, breast milk/formula before serving. It should be less than 90 degrees f .
- * Children under 6 months must be held while taking a bottle.
- * Bottles must not be propped. If the child cannot hold the bottle, the caregiver needs to hold the bottle for the child.
- * Bottles must not contain solid foods unless prescribed in writing by the child's doctor for medical reasons.
- * Bottles must always be capped if not in use. Baby Food need to have a lid after its being offered.
- ◇ Each child will have a tray in the refrigerator for storing perishable food and a cubby for non-perishables. We encourage a daily supply of food due to storage shortage.

◇ SMS requires one extra serving of bottle (Breast milk/ formula) and an extra serving of food, just in case your baby requires extra food. Unused food/milk can be taken home at pick up time.

Baby Food/Snacks

*Homemade infant food needs to be provided in individual servings that can be warmed in water at no more than 90°.

◇ Infant food must not be warmed in the microwave.

◇ **No Microwave use in the infant rooms.**

* Unless a child will eat a whole jar of food, it must be placed in a bowl. Any food that has not been eaten must be discarded.

* Baby food can be stored for 24 hours after being opened.

* We will not offer food if the teacher/directors thinks can lead to choking. Parents need to slice up the food into tiny baby size bites and should be tender enough to be mashed.

* Home-prepared fruits (which can be mashed after peeling if ripe and soft) such as: apricots, avocado, bananas, cantaloupe, mango, melon, nectarines, papaya, peaches, pears, and plums.

*** Warning About Vegetables and Fruits That May Cause Choking**

Due to the risk of choking, do not feed babies the following vegetables and fruits:

- Raw vegetables (including green peas, string beans, celery, carrot, etc.);
- Cooked or raw whole corn kernels;
- Whole pieces of canned fruit (pineapple, pear, apple);
- Hard pieces of raw fruit such as apple, pear, melon;

- Whole grapes, berries, cherries, melon balls, and grape tomatoes (cut these foods into quarters, with pits removed, before feeding to older babies);
- Uncooked dried fruit (including raisins).

AVOID/ do not feed babies these foods, which present a choking risk:

- Snack potato or corn chips, pretzels, or cheese twists, popcorn and corn puffs (which does not dissolve in the mouth).
- Cookies or granola bars,
- Crackers or breads with seeds, or whole grain kernels such as wheat berries, and
- Whole kernels of cooked rice, barley, or wheat; these should be finely ground or mashed before feeding to babies.
- Eggs cannot to be offered in the infant classrooms. Do not introduce egg whites and whole egg (it contains egg white) at the center to children younger than 1 year. Egg whites contain substances that may cause allergic reactions in babies.
- Nut related foods are not allowed in the sunshine classrooms as they can cause allergic reactions to certain babies.
- Honey should never be fed to babies less than 1 year of age. Honey may contain substances that can cause “infant botulism,” a serious type of food-related illness that can make a baby very sick.
- Teachers do not offer cow’s milk to children less than 12 months of age.

NO HOT LIQUIDS OR FOOD ALLOWED IN THE INFANT ROOM

Keep hot liquids (coffee/tea) or foods out of the infant rooms (staff and parents). Please make sure that parents/staff do not consume hot liquids near babies or children. Babies and children can be burned from hot liquids or foods tipped over.

INFANT CENTER HEALTH PRECAUTIONS:

This summary will inform you about the precautionary measures we take, and those that you can take, to minimize illness and ensure a healthy environment for all the children in the classroom.

Hand washing plays a crucial role in our environment. We wash our hands literally dozens of times each day:

When entering and leaving the room

- After each diaper change and clothing change
- After wiping a runny nose
- Before and after checking a child for illness
- After cleaning a child who has spit up
- Before feeding or preparing food
- Before and after giving medication

* We use several disposable items to help eliminate transmission of germs, including: disposable vinyl gloves, disposable paper squares, which are placed on the changing pad for each diaper change, and the plastic changing mat surface is disinfected after each use.

* The children's hands are washed before and after eating, diaper changes and other times as needed.

* Toys are rotated regularly and are cleaned with disinfectant daily.

* The refrigerator is cleaned out and disinfected at the end of each week. The microwave oven is cleaned and disinfected at the end of each day, while the sinks and faucet are treated four or five times daily. Carpeted floor areas are vacuumed nightly, We take rugs out to wash and air/sun dry occasionally to keep them free of any odors and germs.

*Tile floors are mopped completely each night and are spot cleaned as needed throughout the day. The bed linens are laundered here at the center once a week or more often if soiled.

* Soiled diapers are placed in a plastic bag before disposing of them in a container with a tightly closing lid. Children's soiled clothing is likewise placed into plastic bags to be sent home. Parents are required to provide gallon size ziplock box.

THANK YOU FOR FOLLOWING OUR ILLNESS EXCLUSION POLICY

If your child becomes ILL at school:

- ◇ **The sick child is separated from other children within the class or outside the class (office) depending on the severity of illness.**
- ◇ ***The child is kept in a comfortable and cared by a familiar caregiver or office staff.**
- ◇ **Parents are immediately called and informed. Parents are required to pick up the sick child within one hour as SMS does not offer care to sick children.**
- ◇ **If neither parent can be reached, contacts listed on the authorized to pickup list will be contacted. It is very important that all telephone numbers be kept current.**

Children should remain at home (or will be sent home) with:

Underarm temperature of 99.4 or higher, in the past 24 hours.

- **Conjunctivitis** “Pink eye”, redness of the eye and/or lids, usually with secretion of yellowish discharge and crusting.
- **Bronchitis**, which usually begins with hoarseness, cough, and a slight elevation in temperature. The cough may be dry and painful but gradually becomes productive.
- A **rash** you cannot identify which has not been diagnosed.

- **Impetigo**; red pimples which become small vesicles surrounded by a reddened area. When blisters break, the surface is raw and weeping. Look for signs in neck creases, groin, underarms, face, hands, or edge of diaper.
- **Diarrhea** two or more times within 24 hours (watery BM's that look different and are more frequent than usual.)
- ◊ **Vomiting** within 24 hours (more than usual "spitting up").
- **Head Lice**; live contagious insects or their nits (egg sacs) that infest hair. Children will not be readmitted without being free of live lice and nits, or must have a written note from a physician, local health authority, advance practice nurse, or physician's assistant stating that they are no longer contagious and may return to school.
- Some **unknown illness** without obvious symptoms other than unusual paleness, irritability, tiredness, or lack of interest.
- Any **contagious disease**, including Measles, Chicken Pox, Mumps, Rosella, Strep Throat infection, Head Lice, until the child has been diagnosed by a physician and the established Center readmission criteria for individual illnesses has been met.
 - Children may be brought into the Center if they have a mild cold or allergy, an allergic rash, diaper rash, prickly heat, a loose bowel movement, dietary or medication diarrhea, and can cope successfully with the program. Staff should be alerted to anything out of the ordinary.
 - Children's exclusion and readmission to the program is subject to review by their receiving classroom staff and / or the Director.
 - If your child has a chronic illness or disability, please discuss a plan for reasonable admission/exclusion criteria with the Director.
 - By helping us to observe good health standards, you will be protecting your child and the others in the Center.

Please call us in case your child is sick with something which is contagious. For the health and safety of all children, SMS would like to inform other parents of anything that is contagious. No names will be used to protect your privacy.

Your child may return to the school when they have been symptom free without the benefit of medication for 24hrs or a note from the doctor's office that the child can return to school with certain exceptions like Hand Foot and Mouth, Thrush.

Hand Foot and Mouth:

SMS policy: If your child has hand, foot, and mouth disease, keep him or her away from the center during the first week of the illness or until the blisters/rashes resolve. Doctor's note will not be accepted to return back if either of the above conditions are not met.

People with hand, foot, and mouth disease are most likely to spread the infection during the first week of their illness. But the virus can live in their body for weeks or even months after the symptoms have gone away.

- Is there a test for hand, foot, and mouth disease? — Yes, but it is not usually necessary. The doctor or nurse should be able to tell if your child has it by learning about your child's symptoms and doing an exam.
- Should I call my child's doctor or nurse? — You should call your child's doctor or nurse if your child is drinking less than usual and hasn't had a wet diaper for 4 to 6 hours (for babies and young children) or hasn't needed to urinate in the past 6 to 8 hours (for older children). You should also call your

child's doctor or nurse if your child seems to be getting worse or isn't getting better after a few days.

- How is hand, foot, and mouth disease treated? — The infection itself is not treated. It usually goes away on its own within a few days. But children who are in pain can take nonprescription medicines such as acetaminophen (sample brand name: Tylenol) or ibuprofen (sample brand names: Advil, Motrin) to relieve pain. Never give aspirin to a child younger than 18 years. In children, aspirin can cause a serious problem called Reye syndrome.

- ◊ The sores in the mouth can make swallowing painful, so some children might not want to eat or drink. It is important to make sure that children get enough fluids so that they don't get dehydrated.

- ◊ Cold foods, like popsicles and ice cream, can help to numb the pain. Soft foods, like pudding and gelatin, might be easier to swallow.

- Can hand, foot, and mouth disease be prevented? — Yes. The most important thing you can do to prevent the spread of this infection is to wash your hands often with soap and water, even after your child is feeling better. You should teach your children to wash often, especially after using the bathroom. It's also important to keep your home clean and to disinfect tabletops, toys, and other things that a child might touch.

*Please make sure you fill out an authorization form and leave the medicine in a labeled Ziploc bag at the front desk. The medication is required to be in its original container. We will not accept medication in syringes/cups.

***Do not leave any medicine in your child's cubby or in the infant classroom.** We store all medication out of children reach at the front desk.

Suggestion: Parents are requested to take late afternoon appointments for immunizations so that the baby can be monitored closely at home for any aftereffects or reactions.

Parent Communication:

Teachers will verbally inform parents of information relating to the child. A Daily Sheet is located on the bulletin board inside the classroom. Written reports are given in the case that a child is hurt or if he/ she harms another child. Notices are posted on a bulletin board outside the classroom. Emails are sent regularly and important information is posted on the website.

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Weekly updates:

SMS will send out weekly updates to our families on Fridays. This may include pictures from the class group.

Newsletter/lesson plans:

A monthly newsletter/lesson plan will be posted on the class wall as well as posted on the website. The newsletter contains information about curriculum and instruction. It also includes policy changes or reminders, a list of upcoming events and other helpful information.

Sun, Moon and Stars Learning Center
Sunshine Daily Activity Sheet

Date: _____

Name: _____

arrival time: _____

Woke up at: _____

pick up time _____

Parent's comments:

Diaper changing log:

Time							
Wet/BM							

Nap: _____

Bottle Log:

Time							
Quantity							

Meals:

Meal	Breakfast	AM Snack	Lunch	PM Snack
Time				
Food Offered				
How much did I eat				

Book or Songs: _____

Activities:

Spanish:

Sign Language:

Your baby needs: Diapers Wipes Formula Food Other:

Note from the teacher: _____



OPERATIONAL POLICY ON INFANT SAFE SLEEP

Purpose: This form provides the required information per minimum standards §746.501(9) and §747.501(6) for the safe sleep policy.

Directions: Parents will review this policy upon enrolling their infant at

and a copy of the policy is provided in the parent handbook. Parents can review information on safe sleep and reducing the risk of Sudden Infant Death Syndrome/Sudden Unexpected Infant Death Syndrome (SIDS/SUIDS) at: <http://www.healthychildren.org/English/ages-stages/baby/sleep/Pages/A-Parents-Guide-to-Safe-Sleep.aspx>

SAFE SLEEP POLICY

All staff, substitute staff, and volunteers at

will follow these safe sleep recommendations of the American Academy of Pediatrics (AAP) and the Consumer Product Safety Commission (CPSC) for infants to reduce the risk of Sudden Infant Death Syndrome/Sudden Unexpected Infant Death Syndrome (SIDS/SUIDS):

- Always put infants to sleep on their backs unless you provide an Infant Sleep Exception form 2710 signed by the infant's health care professional [§746.2427 and §747.2327].
- Place infants on a firm mattress, with a tight fitting sheet, in a crib that meets the CPSC federal requirements for full size cribs and for non-full size cribs [§746.2409 and §747.2309].
- For infants who are younger than 12 months of age, cribs should be bare except for a tight fitting sheet and a mattress cover or protector. Items that should not be placed in a crib include: soft or loose bedding, such as blankets, quilts, or comforters; pillows; stuffed toys/animals; soft objects; bumper pads; liners; or sleep positioning devices [§746.2415 and §747.2315]. Also, infants must not have their heads, faces, or cribs covered at any time by items such as blankets, liners, or clothing [§746.2429 and §747.2329].
- Do not use sleep positioning devices, such as wedges or infant positioners. The AAP has found no evidence that these devices are safe. Their use may increase the risk of suffocation [§746.2415 and §747.2315].
- Ensure that sleeping areas are ventilated and at a temperature that is comfortable for a lightly clothed adult [§746.3407(10) and §747.3203(10)].
- If an infant needs extra warmth, use sleep clothing

(insert type of sleep clothing that will be used, such as sleepers or footed pajamas) as an alternative to blankets [§746.2415 and §747.2315].

- Place only one infant in a crib to sleep [§746.2405 and §747.2305].
- Infants may use a pacifier during sleep. But the pacifier must *not be attached* to a stuffed animal or the infant's clothing by a string, cord, or other attaching mechanism that might be a suffocation or strangulation risk [§746.2415 and §747.2315].
- If the infant falls asleep in a restrictive device other than a crib (such as a bouncy chair or swing, or arrives to care asleep in a car seat), move the infant to a crib immediately, unless you provide an Infant Sleep Exception form 2710 signed by the infant's health care professional [§746.2426 and §747.2326].
- Our child care program is smoke-free. Smoking is not allowed in Texas child care operations (this includes e-cigarettes and any type of vaporizers) [§746.3703(d) and §747.3503(d)].
- Actively observe sleeping infants by sight and sound [§746.2403 and §747.2303].
- If an infant is able to roll back and forth from front to back, place the infant on the infant's back for sleep and allow the infant to assume a preferred sleep position [§746.2427 and §747.2327].
- Awake infants will have supervised "tummy time" several times daily. This will help them strengthen their muscles and develop normally [§746.2427 and §747.2327].
- Do not swaddle an infant for sleep or rest unless you provide an Infant Sleep Exception form 2710 signed by the infant's health care professional [§746.2428 and §747.2328].

Sun, Moon, and Stars Learning Center
Infant Information Sheet
Monthly Update

-

Name _____

Updated on _____ For Month of _____

Nap Routine: _____

Feeding Routine: _____

Bottle: _____

Formula or Breast Milk _____

If Formula – Brand Name _____

Solid Foods: How Much _____

How many meals a day? _____

Temperature of Food _____

Any allergies or dietary restrictions _____

Diapering Routine: _____

Wipes, ointments or lotions _____

Drinks from sipping cup? _____ Uses a Pacifier? _____

Special Needs during eating or sleeping times? _____

Difficulty with pregnancy or Delivery? _____

Other Concerns or Infant information _____

Parent Signature: _____

PRIVACY STATEMENT

DFPS values your privacy. For more information, read our privacy policy at:
<http://www.dfps.state.tx.us/policies/privacy.asp>.

SIGNATURES

This policy is effective on: _____ (date)

Child's name:

Signed by:

X

Director/Owner

Date signed:

Signed by:

X

Staff member

Date signed:

Signed by:

X

Parent

Date signed: