

## Parent Handbook 2023-24

310 W. 17<sup>th</sup> Street, Little Rock, AR 72206 Phone (501) 588-3659 Fax (501) 372-0416

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## Welcome!

Welcome to the Early Childhood Education Program at Trinity Cathedral. This guide is to answer questions you may have as you and your family become acquainted with our school. Anytime you have questions, please don't hesitate to call. ECEP Administration can be reached during school hours on the ECEP cell number, the office line (501) 588-3659, or by sending a message through the HiMama app.

The Early Childhood Education Program (ECEP) will provide a safe, nurturing environment for your child. Our goal is to cultivate a sense of wonder in your child and provide opportunities to become a successful learner. Your child will be involved in language arts, math, science, social studies, Christian formation, music, art, foreign language, movement, and nature play. Learning centers will make up a big part of the day as your child will learn through active exploration and concrete experiences. These learning centers promote independence and help children become problem solvers. Centers are organized to support our themes, goals in skills and concepts, and will accommodate children with different learning styles.

Teachers and parents form a partnership at The Early Childhood Education Program to provide optimal care, education, and safety of your child. Together we will nurture your child as he or she grows in body, mind, and spirit. We look forward to getting to know all of you and having a successful year!

## Administration

Director- Christy Poindexter Second in Charge- Francis Baggett-Gossett Finance Assistant- Kristine Barbaree

## **Contact Us**

Early Childhood Education Program at Trinity Cathedral 310 W. 17<sup>th</sup> Street Little Rock, AR 72206

(501) 372-0416 – fax <u>ecep@trinitylittlerock.org</u> <u>www.trinitylittlerock.org/ecep</u>

Christy's office number is (501) 588-3659.

Once enrolled, you will receive the ECEP cell number and can communicate directly with teachers through the HiMama app.

For questions about the draft or to request monthly receipts please contact Kristine Barbaree at <u>kristine@trinitylittlerock.org</u> or 501-588-588-3655.

## **School Hours**

The Early Childhood Education Program's regular school hours are from 7:30 a.m. to 5:30 p.m. Should an emergency arise that causes to you to be late, we ask that parents/guardians contact an Administrator on the ECEP cell number. A late charge of \$2 per minute will be assessed if your child is not picked up by 5:30 p.m.

## **Drop Off and Pick Up Process**

Children need to be taken to their assigned drop off location to be

checked in each morning by 9:00 a.m.

Parents are to park on Center or Spring Streets and bring your child to their designated Early Childhood entrance. For the safety of the children, parents **must** walk their child the drop-off location and ensure staff have received the child.

Try your best to arrive on time. The first part of the morning is an important transition time for your child. It is also the most important learning time of the day. Please strive to have your child at school before 9:00 a.m. Specialized activities, instructional activities and circle time generally take place beginning around 9:00 a.m. Children arriving later than 9:00 a.m. should have prior approval from the Administration.

If your child leaves school for an appointment (doctor, etc.) and is returning, please bring your child back to school either before or after their scheduled rest time. Also, please make sure that your child has been fed if they have missed mealtime. Rest time for toddlers and twos generally begins after lunch, around 12:00 p.m., and is over around 2:00 p.m. Threes and fours typically rest 1:00 to 3:00.

If you arrive after closing time to pick up your child, you will be charged a late fee of \$2.00 per minute after 5:30 p.m. This fee is to be paid directly to the staff member overseeing your child's welfare until your arrival, not to ECEP.

For the safety of your child, communicate this information with any caregivers that may be driving your child to or from school. If your child is going home with a friend or relative, please notify your teachers and the office. Students are not allowed to ride home with others without your written permission. Names of those authorized to pick up your child will be kept on file in the office. All persons who do have permission to pick up your child should be prepared to show a photo I.D., such as a driver's license.

## **Backpacks/ Diaper Bags**

Please have backpacks and all personal items clearly labeled with your child's name. Please do not leave medications, lotions, diaper creams, sunscreen, etc. in your child's backpack or diaper bag. DHS considers these a chemical hazard. If you wish to bring these items for your child, please label them with your child's name and hand them to your child's teacher so they may be stored out of reach.

## **Dress Policy**

Because your child will be regularly involved in rich exploratory experiences throughout their day, such as art, science, movement, tactile play, and large motor exercise, please dress your child in comfortable clothes which are easy to play in, take on and off (elastic waist, no belts, etc.), and get messy in.

Also, for your child's safety, we ask that you dress your child in shoes that are closed-toe and closed-heel (<u>no crocs</u>). Comfortable athletic shoes fastened with Velcro are a good choice.

## **Change of Clothes**

Please send a change of clothes (shirt, pants, underwear, and socks) for your child to keep at school. This is in case of accidents, spills, mud, etc. We will keep them in your child's cubby so that they do not have to go back and forth every day.

## **Toilet Training**

Our expectation is that our children will be toilet trained by the time they enter the three-year-old program. We are happy to be partners with you in training the younger children. You will need to send a minimum of two complete sets of extra clothes during this process.

## **Pacifier Policy**

For the health of your child and others in our school, our infants and toddlers can use pacifiers for comfort at naptime or in their crib. However, we put away pacifiers when our mobile infants and toddlers are awake and playing. Pacifiers can become germ-magnets in a group setting and can also interfere with your child's speech development.

## Student Health

Parents are requested to keep children at home when they are ill. This includes fever, vomiting, undiagnosed rashes, conjunctivitis (pink eye), or any other illness, which may be contagious. Please do not send ill children to school. Children must be free of fever without medication, vomiting, and diarrhea for 24 hours before returning to school after an illness. Children with strep or other infections must be on antibiotic treatment for at least 24 hours before returning to school. A doctor's note may be requested if there is a question as to whether the child is infectious. Students who become ill at school will be evaluated by an Administrator. If it is determined that your child is too ill to remain at school, the office will notify the parents. Children with a fever (infants six months or younger-100 degrees; children over six months of age-101 degrees), or who have two episodes of vomiting or diarrhea may not remain at school. Parents are requested to pick up sick children as soon as possible. Children who are too ill to participate in all classroom activities are too ill to attend school and should stay home.

## **Medication Policy for Students**

The ECEP needs to be aware of any daily medications your child is taking. It is the policy of The Early Childhood Education Program that no drug or medicinal preparation will be administered to students on any school premises unless the student requires the medication to attend

school. If possible, please time the dosing of your child's medications to be given at home, rather than at school. No student may have medicine in his/her possession at any time. A current valid doctor's prescription and instructions as well as a written request from the child's parents must be received by the school so that staff may administer medication. Records of the student's medication requirements are kept confidential by school staff. Please be aware of the following policies regarding medications:

- 1. Parents and/or guardians must bring the medication to the ECEP office. Medications must not be sent to school in backpacks or diaper bags.
- 2. A written consent and instruction form must be completed and signed by the parent/guardian before the medication can be given. The form will specify the name of the student, the name of the medication, the name of the physician, and a statement releasing the school from responsibility should undesired reactions occur from the medication.
- 3. Parents of children with allergies/seizures disorders should submit a copy of their child's medical care plan and update the ECEP Office of any changes in allergy status or plan.
- 4. All medications must be stored in and administered through the ECEP Office.
- 5. The medication must be taken in the presence of a designated person approved to administer medications.
- 6. The medication must be in the original container with the prescription label noting the name of the student, name of medication, dosages, and directions for administration; (e.g. "four times daily" does not provide adequate information for the school to know when the next dosage is due). This includes emergency medications such as: Inhalers, Epinephrine, and rectal Valium.
- 7. All unused medication must be picked up from the ECEP Office by a parent or guardian.

## The Pediatrician is Our Friend

Having the ability to seek the advice of a quality pediatrician is priceless to you as a parent. Everything from immunizations to illnesses will mean you spend a great deal of time during the early years with your child's pediatrician. Using the same pediatrician, or clinic, each time is known as having a medical home. When a person has a medical home, the result is typically a higher quality of care. We encourage any of our families who do not have medical insurance for their child to visit the AR Kids First website (www.arkidsfirst.com) to see if you qualify for their services. Additional information regarding medical homes can be found in the appendix.

## **Behavior Expectations**

ECEP's commitment to an age-appropriate and play-based curriculum ensures that activities are child centered and promote positive social interactions. Teachers carefully craft the environment to foster success. We tailor our expectations to fit the developmental levels of the children to minimize frustrations and inappropriate behavior. We use positive approaches to discipline and discuss strategies to use with behavior that could prove unsafe to the child or others.

Some behaviors experienced in group settings are considered developmentally normal but are not necessarily behaviors we want to continue. Some of the more common behaviors we want to redirect include, but are not limited to; biting, physical aggressiveness, talking back to an adult, ignoring an adult, lying/exaggerating, and body curiosity demonstrated by touching of self or others.

When a child exhibits a behavior that is not acceptable for a group setting, the school will make reasonable efforts to work with the child and his/her family to resolve behavioral concerns. The school may

remove a child from the classroom and/or call the parent to take the child home for a period to be determined by the director as the school and family work toward behavior resolution.

The underlying goal of all discipline is to help children develop inner self controls and to replace adult-maintained external controls. We promote the development of self-control and empathy within each individual child. Teachers set clear, consistent limits and strive to develop close, nurturing relationships with all children. Instructive and individually appropriate consequences help to strengthen the child's self-control and self-esteem. We facilitate children coming up with their own solutions when conflicts arise.

## Curriculum

The Early Childhood Education Program focuses on what matters most to children – family, community, and the natural world. Children enrolled in The ECEP thrive in an engaged community where teachers observe and ask questions to discover the children's ideas, hypotheses, and theories. They enjoy a well-planned "yes" environment where they have the world at their fingertips. Children are allowed to develop at their own pace in an atmosphere of support and encouragement.

The curricula at The Early Childhood Education Program is designed according to the foundations of the most recent brain developmental research and revolves around the Arkansas Child Development and Early Learning Standards. Our teachers use materials from the Adventures for Toddlers curriculum, Adventures in Learning curriculum, and curriculum from the Mississippi State Early Childhood Institute, all approved by State and National accreditation agencies.

Early Childhood Teachers use the CDELS Developmental Rating Scales, work samples, and anecdotal records to make note of children's responses as they teach new skills to children in the program. Parents

are given regular reporting of each child's progress through the developmental milestones.

The Three- and Four-Year-Old Curriculum uses a balance of oral
instruction, kinesthetic instruction, and visual instruction as it gives the
children opportunities to do the following to demonstrate growth toward
school-ready behaviors:
☐ Show ability to learn new words and talk with others on a variety of
topics.
☐ Use language to solve problems.
☐ Listen to books and stories. Talk about the stories to recall details and
events.
☐ Tell a story as they look at pictures in a book.
☐ Show an interest in writing, understanding that writing documents
spoken word.
☐ Recognize signs and labels in the environment.
☐ Sort and group objects that go together and put objects in order by
size.
☐ Complete puzzles with nine or more pieces, stack rings on a peg in
order of size.
☐ Speak using adjectives and adverbs and recount the events of the day.
☐ Say name, gender, and age.
☐ Learn to take turns when the wait is not very long.
☐ Express a wide range of emotions.
☐ Run easily, and use large muscles for walking, climbing, hopping, and
pedaling a tricycle.
☐ Turn pages one at a time, screw and unscrew lids, string large beads.
☐ Keep their environment clean and take care of their personal needs
such as washing hands.
☐ Begin to understand how to keep themselves and others safe.
☐ Explore and learn by touching, tasting, seeing, hearing, and smelling.

<u>The Two-Year-Old Curriculum</u> focuses on a variety of teaching activities which allow the teacher to direct development on many levels. Observations and assessments allow the teacher to recognize skills

acquisitions as well as any developmental delays. The curriculum for Two-Year-Old children guides them to do the following:     Connect language to concepts.  Apply knowledge to new situations.
☐ Develop strategies for problem solving.
☐ Begin to make-believe play.
☐ Show enjoyment of books and stories.
☐ Begin to sort objects by color and shape.
☐ Understand verbal commands.
☐ Point to objects when named.
☐ Say several single words and simple phrases.
☐ Repeat overheard phrases or words.
☐ Begin to use "me" and "I" and "you."
☐ Recognize self in photos or mirror.
☐ Express wide range of feelings and emotions through gestures,
sounds and words.
☐ Walk alone, walk backward, climb stairs, and walk on a balance
beam.
☐ Push and pull objects.
☐ Stand on tiptoe.
☐ Build towers of more than three blocks.
☐ Demonstrate an increasing sense of competence and confidence.
☐ Develop trusting relationships with nurturing adults.
☐ Show interest in peers.
☐ Demonstrate caring and cooperation.
☐ Coordinate eye and hand movements.
☐ Develop self-help skills.
The Infant and Toddler Curriculum follows nationally recognized
Child Development strands which focus on goals for a very young
child's cognitive, language, physical, self-concept, emotional, and social
development. All these developmental strands form pieces of the
foundation for successful learning in school ready children. Teachers
provide opportunities for the following learning to take place:
☐ Understand basic concepts and relationships: reflexive behavior,

gamering information unough senses, turns head toward sound,
focus on face of person who is talking, plays with toys in
demonstrated and new ways.
Recognize familiar objects.
Apply knowledge to new situations.
Develop strategies for solving problems (reaches for objects, etc.).
Valued feelings about self and others.
Awareness of self as a unique individual.
Demonstrate increasing sense of competence, confidence, and
independence.
Express feelings and emotions through gestures, sounds and
(eventually) words.
Develop trusting relationships with nurturing adults.
Show interest in peers.
Express needs and thoughts without using words.
Respond to verbal and nonverbal communication.
Develop gross motor skills: roll over, sit with and without support,
begin creeping and crawling and eventually walking.
Develop fine motor skills: grasping objects, transfer objects from
hand to hand.
Coordinate eye and hand movements.
Develop self-help skills: sucking, swallowing, begin to feed finger
foods, self-comfort, using cup and spoon, remove loose clothing.

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## **Specialized Instructional Activities**

We believe children best grow physically, socially, emotionally, cognitively, and spiritually when they are surrounded by skilled teachers who love them and who know how to watch for and celebrate developmental milestones. In addition to our teachers, our curriculum incorporates weekly visits from the Chaplain, from specialists in art, music, foreign language, and Mini-Mite gymnastics classes by Huff'n'Puff Gym. We schedule visitors who add depth to our curriculum. Visitors include, but are not limited to, the Fire Department, the Police Department, doctors, post office workers, and animals from

the Little Rock Zoo.

Every child does not learn and develop in the same way. We make every effort to meet a child where they are and support their growth in all ways possible. As we observe and interact with your child, we will share concerns we have with parents and hope parents will do the same. When it is decided that a child will be evaluated, our staff will cooperate with the process and support any outcomes. This includes providing space for specialized therapies, attending conferences with parents and therapists as requested and staffing allows, and reinforcing techniques of learning suggested by therapists.

## **Outdoor Play**

Outdoor play time is an important part of your child's day, and provides your child with abundant experiences in exploration, imagination, and physical exercise. In fact, outside time is so important that the Department of Human Services guidelines state that there must be at least a total of one hour each day of outdoor play during normal weather conditions. Infants shall have at least 20 minutes of outdoor time each day. Therefore, it is important that your child be dressed appropriately for the weather, for both a morning and afternoon period of play. Children will not be outdoors on days there is a heat advisory, the wind chill is below freezing, or it is raining. If outdoor play is not possible, large/gross motor play activities will be available in the Gym. Children who are too ill to go outside are too ill to attend school.

## **Rest Time**

All children at the ECEP will have a rest time each day. Please see the supply list for items you will need to provide for your child during rest time. For our toddlers, twos, threes, and fours, we will send sheets and blankets home on Fridays to be washed and you will return them on Mondays. For our infants, crib sheets will be provided and laundered

here daily. Remember, all your child's items should be clearly labeled with permanent marker.

Crib Contents – Mobiles, crib bumpers, stuffed animals, and any other loose items are no longer allowed to be used in infant cribs, according to DHS regulations. This is for the safety of your child, and to protect against potential hazards while your child is in their crib.

Infant Swaddling – Swaddling is no longer an acceptable practice for infant classes under DHS regulations. Also, sleep sacks can no longer be used in infant cribs. You may bring a light blanket for your child to sleep with. Our teachers will not cover your child any higher than the waist area with a blanket. These rules are in place to protect your child from the risk of SIDS and hip dysplasia.

## **Lunches and Snacks at School**

At ECEP, we provide a nutritious morning snack, afternoon snack, and whole milk twice a day for children over 12 months. Whole milk is offered every day at lunch and at one of the snack times. We have a set rotating snack menu posted in each classroom.

Lunches are brought from home for your child and should meet the requirements outlined by the U.S. Department of Agriculture. The USDA Childcare Guidelines are included in this handbook for your convenience. Lunch from take-out restaurants should not be brought to students. Also, children may not bring carbonated beverages or glass containers in their lunches.

\*Food products containing NUTS are not served at the Early Childhood Education Program. Please do not bring nut food items from home for your child. This is an extremely important safety issue, as there may be children in our program who have serious nut allergies.

## **Daily Reports**

ECEP uses a communication app called HiMama to record daily activities, lesson plans, and developmental milestones. Himama also functions as a message board to enable parents to touch base with administrators or teachers during the day. At enrollment, parents will receive an invitation to set-up a HiMama account. Parents can then access their account through a web browser or the free HiMama app. Each evening a record of your child's day will be sent to you.

## **Folders**

Please check your child's folder regularly. Folders will contain artwork, fine motor projects, and information from your child's teacher.

## **Monthly Calendars and Updates**

Monthly calendars and updates will come to you through HiMama. You are welcome to request a printed copy if that is more convenient.

## **Parent Conferences**

There will be two regularly scheduled conferences during the school year to discuss your child's progress, in September and again in May. These conferences will be scheduled by your child's teacher. If you feel the need to have a conference at any time, you are welcome to request a conference with the teacher.

## **Incident Reports**

All injuries to a child (including falls, bites, hitting by another child, etc.) shall be recorded by the witnessing staff member on an incident report and the Director notified. Parents will receive a copy of any incident report through HiMama. When you arrive to pick-up your child at the end of the day, you will be asked to sign the original copy for your

child's hard file. Parents can request a paper copy of an incident report in addition to the electronic copy.

## **Birthdays**

We love to celebrate birthdays at school! If you like, you may send simple birthday treats for the class in honor of your child's big day. Let his/her teacher know what day you want to provide the snack. We are glad to provide the drink. Please do not send balloons. A list of food allergies is posted in each classroom; please make sure you check with your child's teacher for any food allergies before bringing snacks.

If you would like to pass out invitations to an off-campus birthday party, please bring enough invitations for everyone in your child's class.

**Siblings**- Siblings are welcome to come to class birthday parties. Please understand, however, that our staff cannot be responsible for monitoring a sibling who is not in our care, and a sibling who is brought to a class party must be under the supervision of the parent.

## **Privacy Policy**

The Early Childhood Education Program does not release information regarding a child enrolled in our program to anyone other than a parent or legal guardian without written consent.

## **Photos and Social Media**

When your child enrolls in our program, we give every family a photo consent form. This allows us to use photos in an official school capacity. We do not EVER post photos of children on social internet sites, and our teachers are not permitted to take photos of your children for personal use. For the safety of all children on campus, please do not post photos of classmates on social media unless you have permission from that child's parent.

## **Visitors on The ECEP Campus**

We have several measures in place to provide a secure environment for your child. Please ask visitors to check in at the ECEP office anytime they come to the school. Visitors should enter ECEP via the church office on Spring Street. The office staff will have visitors sign-in and will request photo identification. This is important for the safety of our community.

## **Emergency Drills**

Emergency drills are held monthly to acquaint your child with evacuation procedures. This may make quite an impression on your child the first time a drill is held, but your child will soon become accustomed to it and know just what to do. An emergency evacuation route is posted in each room.

## **Inclement Weather**

Unless otherwise specified, the ECEP will follow the Little Rock School District's openings and closings for inclement weather. Please watch your local television station and look for the Little Rock School District's listings. You will also receive a message through HiMama notifying you of school closures. If you are unsure, please call the ECEP cell phone, or email ecep@trinitylittlerock.org.

## **Suspected Abuse**

According to Act 397 of the Arkansas Law, among persons required to report suspected child abuse are: teachers, school officials and day care center workers.

### **Fund Raisers**

ECEP occasionally use fund raisers to complete special projects. Two events used to raise funds are ECEP Easels and Trinity Treasures. ECEP

is a non-profit and will gladly accept any monetary or 'wish-list' items. Receipts of donations will be provided for tax purposes.

## Volunteering/OPT (Organization for Parents and Teachers)

Parents are always welcome at our school, and there are many opportunities to get involved. Being a member of OPT will help you become involved with school activities. You are also welcome to check with your teacher or email the ECEP office for volunteer opportunities. We look forward to your participation!

## **Tuition and Fees**

The Early Childhood Education Program is a year-round educational program, with our school year beginning every August. A schedule of current Tuition and Fees is included with this Handbook, along with a calendar showing projected dates when the ECEP will be closed for holidays, etc. All tuition and fees are non-refundable. Tuition is payable by bank draft. In the event a draft is returned unpaid, or an account is otherwise in arrears, the child/children may not return to school until the child's/children's account is paid in full.

## **Withdrawal Procedure**

Tuition is drafted by the half month. Written notification of withdrawal must be received by the Director a half month in advance. For example, if your child's last day will be between the 1<sup>st</sup> and 14<sup>th</sup> of the month, then notice must be received by 15<sup>th</sup> of the month prior. If your child's last day will fall between the 15<sup>th</sup> and the end of the month, then notice must be received by the end of the month prior.

## **Addendum**

**Supply Lists** 

**USDA Food Guidelines** 

**Child Care Immunization Schedule** 

**Shaken Baby Syndrome Pamphlet** 

**Medical Home Information** 

**Kindergarten Readiness Indicators** 

**Tuition and Fee Schedule** 

**School Calendar** 

## **Early Childhood Supply List**

## **Infants**

<u>Daily:</u> Diaper bag/backpack, diapers (may bring entire pkg.), food and/or formula, bottles, change of clothes, wipes.

**Optional:** Photos for the end of your child's bed.

## **Toddlers**

**Daily:** Diaper bag/backpack, disposable diapers, lunch with cup, standard size crib sheet and small blanket for nap time, a special soft toy to sleep with if needed.

## **Twos**

<u>Daily:</u> 2 changes of clothes, diapers, and wipes if applicable, lunch, standard size crib sheet and small blanket for nap time, a special soft toy to sleep with if needed.

## **Threes**

<u>Daily:</u> Backpack, change of clothes, lunch, standard size crib sheet and small blanket for nap time, a special soft toy to sleep with if needed.

## **Fours**

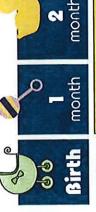
**<u>Daily:</u>** Backpack, change of clothes, lunch, standard size crib sheet and a small blanket for nap time, a special soft toy to sleep with if needed.

## Meal Patterns for Children in Child Care Programs

The Child Care Commission approved the use of the United States Department of Agriculture (USDA) meal patterns as the minimum amount of food which can be served to comply with the licensing standards for adequate nutrition. The Recommended Dietary Allowance is based on the age, sex, weight, and height of an individual.

		Child Meal Patt	ern
Breakfast	1-2 year olds	3-5 year olds	6-12 year olds
Milk—must be fluid milk	1/2 cup	3/4 cup	1 cup
Vegetable or fruit or 100% fruit juice	1/4 cup	1/2 cup	1/2 cup
Grains/Breads—must be enriched or whole grain  Bread	1/2 slice 1/2 serving	1/2 slice 1/2 serving	1 slice 1 serving
OR, Cornbread or biscuit or roll or muffin OR, Cold dry cereal OR, Hot cooked cereal OR, Cooked pasta or noodles or grains	1/2 serving 1/4 cup 1/4 cup 1/4 cup	1/2 serving 1/3 cup 1/4 cup 1/4 cup	3/4 cup 1/2 cup 1/2 cup
Lunch or Supper	1-2 year olds	3-5 year olds	6-12 year olds
Milk—must be fluid milk	1/2 cup	3/4 cup	1 cup
Meat/Meat alternate  Lean meat, poultry, or fish without bone OR, Alternate protein product OR, Cheese OR, Egg (large) OR, Cooked dry beans or peas OR, Peanut butter or other nut or seed butters OR, Nuts and/or seeds OR, Yogurt, plain or sweetened	1 oz 1 oz 1 oz 1/2 egg 1/4 cup 2 tbsp 1/2 oz 4 oz	1 1/2 oz 1 1/2 oz 1 1/2 oz 3/4 egg 3/8 cup 3 tbsp 3/4 oz 6 oz	2 oz 2 oz 2 oz 1 egg 1/2 cup 4 tbsp 1 oz 8 oz
Vegetable or fruit or 100% fruit juice—serve two different vegetables and/or fruits to equal	1/4 cup	1/2 cup	3/4 cup
Grains/Breads—must be enriched or whole grain  Bread  OR, Cornbread or biscuit or roll or muffin  OR, Cold dry cereal  OR, Hot cooked cereal  OR, Cooked pasta or noodles or grains	1/2 slice 1/2 serving 1/4 cup 1/4 cup 1/4 cup	1/2 slice 1/2 serving 1/3 cup 1/4 cup 1/4 cup	1 slice 1 serving 3/4 cup 1/2 cup 1/2 cup
Snack—select 2 of the 4 components	1-2 year olds	3-5 year olds	6-12 year olds
Milk—must be fluid milk	1/2 cup	1/2 cup	1 cup
Vegetable or fruit or 100% fruit juice	1/2 cup	1/2 cup	3/4 cup
Grains/Breads—must be enriched or whole grain  Bread  OR, Combread or biscuit or roll or muffin  OR, Cold dry cereal  OR, Hot cooked cereal  OR, Pasta or noodles or grains	1/2 slice 1/2 serving 1/4 cup 1/4 cup 1/4 cup	1/2 slice 1/2 serving 1/3 cup 1/4 cup 1/4 cup	1 slice 1 serving 3/4 cup 1/2 cup 1/2 cup
Meat/Meat alternate  Lean meat, poultry, or fish OR, Alternate protein product OR, Cheese OR, Egg OR, Cooked dry beans or peas OR, Peanut or other nut or seed butters OR, Nuts and/or seeds Or, Yogurt, plain or sweetened	1/2 oz 1/2 oz 1/2 oz 1/2 egg 1/8 cup 1 tbsp 1/2 oz 2 oz	1/2 oz 1/2 oz 1/2 oz 1/2 egg 1/8 cup 1 tbsp 1/2 oz 2 oz	1 oz 1 oz 1 oz 1/2 egg 1/4 cup 2 tbsp 1 oz 4 oz

# 2018 Recommended Immunizations for Children from Birth Through 6 Years Old























HepB

HepB

months

months





**2–3** years

months

HepB

DTaP R

DTaP E

DTaP

R

E

P **PCV13** 

PCV13

PCV13

High

IPV

IPV

yourself against whooping

growing? To protect

your new baby and

is your family

cough, get a Tdap vaccine. The recommended time is the 27" through 36" week

of pregnancy. Talk to your

doctor for more details.

PCV13 P

P

DTaP

DTaP

MMK

Varicella

MMR

Influenza (Yearly)\*

Varicella

HepA§

you don't need to start over, just go Talk with your child's doctor If your child misses a shot, doctor for the next shot. if you have questions back to your child's about vaccines.

vaccine can be given during

shown age range.

Shaded boxes indicate the

- \* Two doses given at least four weeks apart are recommended for children aged 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.
- Two doses of HepA vaccine are needed for lasting protection. The first dose of HepA vaccine should be given between 12 months and 23 months of age. The second dose should be given 6 to 18 months later. HepA vaccination may be given to any child 12 months and older to protect against HepA. Children and adolescents who did not receive the HepA vaccine and are at high-risk, should be vaccinated against HepA.

If your child has any medical conditions that put him at risk for infection or is traveling outside the United States, talk to your child's doctor about additional vaccines that he may need.



INFORMATION ON

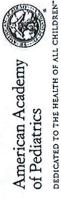
SEE BACK PAGE

1-800-CDC-INFO (1-800-232-4636) For more information, call toll free or visit www.cdc.gov/vaccines/parents











THE RESERVE OF THE PARTY OF THE				
Disease	Vaccine	Disease spread by	Disease symptoms	Disease complications
Chickenpox	Varicella vaccine protects against chickenpox.	Air, direct contact	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs)
Diphtheria	DTaP* vaccine protects against diphtheria.	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Hib	Hib vaccine protects against Haemophilus influenzae type b.	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Hepatitis A	HepA vaccine protects against hepatitis A.	Direct contact, contaminated food or water	May be no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice (yellowing of skin and eyes), dark urine	Liver failure, arthralgia (joint pain), kidney, pancreatic, and blood disorders
Hepatitis B	HepB vaccine protects against hepatitis B.	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer
Influenza (Flu)	Flu vaccine protects against influenza.	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs)
Measles	MMR** vaccine protects against measles.	Air, direct contact	Rash, fever, cough, runny nose, pinkeye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR**vaccine protects against mumps.	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness
Pertussis	DTaP* vaccine protects against pertussis (whooping cough).	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Polio	IPV vaccine protects against polio.	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Pneumococcal	PCV13 vaccine protects against pneumococcus.	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Rotavirus	RV vaccine protects against rotavirus.	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration
Rubella	MMR** vaccine protects against rubella.	Air, direct contact	Children infected with rubella virus sometimes have a rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Tetanus	DTaP* vaccine protects against tetanus.	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death

<sup>\*</sup> DTaP combines protection against diphtheria, tetanus, and pertussis.
\*\* MMR combines protection against measles, mumps, and rubella.

## Baby Syndrome. Prevent Shaken

- Babies need attention most of the
- Babies cry because they can't talk.
- Some babies cry more than others.
- It is all right to feel frustrated when a baby won't stop crying.
- It is NOT all right to shake a baby to stop the crying.
- Babies cry. Have a plan.

Create your own crying plan at: www.cryingplan.com

Other helpful resources:

www.arkansasctf.org www.dontshake.org www.kidshealth.org





Arkansas Department of Health Keeping Your Hometown Healthy

www.healthy.arkansas.gov Little Rock, AR 72205 4815 West Markham

## Special thanks to:

**UAMS** Center for Children at Risk Arkansas Children's Trust Fund















# What is Shaken Baby Syndrome?

- It is a serious brain injury.
- It often occurs when a baby is forcefully shaken, causing the brain to move about inside the skull.
- Shaking is often done out of anger or frustration with a baby who won't stop crying and can't be soothed.
- It is a form of child abuse that can be prevented.

# Symptoms of Shaken Baby Syndrome

- Limpness or lethargy
  - Trouble breathing
- Poor sucking or swallowing
  - Irritability
- Seizures or trembling
  - Vomiting
- Pale or bluish skin
- Unresponsive/will not wake up

All babies cry. Some cry more than others. Babies cry because they can't talk and need to say they are hungry, wet, sick, or hurting. Babies sometimes keep crying

even when we try to comfort them. Shaking a baby won't stop the crying and may cause brain damage or death.





## How to Cope with Your Crying Baby

It's important to have a CRYING PLAN that you (or anyone watching your baby) can follow when the crying starts.

# Check your baby's basic needs:

- 1. Is it fime to eat?
- Does he/she need to burp after eating?
  - . Is it time for a diaper change?
- Is the baby too hot? Too cold? Overdressed?
- Are there any signs your baby is sick? (fever, vomiting) Seek medical care if you have any concerns about your baby's health.

## Try soothing your baby:

- Hold your baby close and rock, walk or sway side to side while standing.
  - Offer a pacifier (don't force).
- Swaddle him/her with a blanket.
- Play soft music or a quiet sound.
- Take your baby for a walk in a stroller or a ride in a car seat.

If your baby is not sick or hurt, but continues to cry, remember:

# IT IS NEVER OK TO SHAKE A

BABY. IT IS OK to put your baby in a safe place (crib, infant seat) and let him cry while you take a break, or call a friend or family member for help.

It is more important to stay calm than to stop the crying.

# Calm yourself, so you can calm your baby safely:

- Go outside for fresh air.
- Take several deep breaths.
  - Count to 100.
- Wash your face or take a shower.
- Exercise. Do sit ups or walk up and down the stairs a few times.

# Choose your baby's caregivers wisely:

Before leaving your baby with anyone, ask yourself these questions:

- Does this person want to watch my baby?
- Is this person good with babies?
- Will my baby be in a safe place with this person?
- Have I gone over my CRYING PLAN with this person?

# Do NOT leave your baby with anyone who:

- Is impatient or annoyed when your baby cries.
- Says your baby cries too much.
- Will become angry if your baby cries or bothers them.
- Might treat your baby roughly because they are angry with you.
  - Has a history of violence.
- Has lost custody of their own children because they could not care for them.
  - Uses drugs or alcohol.

- The doctor and nurse believe that you know the most about your child.
- You are as important as the doctor and nurse when it comes to your child's health.
- You respect and trust the doctor, and the doctor respects and trusts you.
- The doctor respects your culture and beliefs. If you want a certain kind of treatment or care, the doctor agrees if he or she can. Увестальниканай били помента помента применто применто применто в применти помента применти помента помента пом В применти помента помента
  - Your doctor asks you about what your child needs, and works with you and others to meet those needs.

- Your child gets his or her shots, check-ups and urgent care.
- your child needs a specialist or other services. Someone at your doctor's office helps you if
- The doctor makes sure everyone who helps take care of your child has the information they need.
- They help you learn about the problem and The people at your doctor's office help you if your child gets sick or has a special need. may help you find other resources.
- choices are when your child needs treatment. The doctor makes sure you know what your

# <sup>2</sup>/минарионую порядили на принципальний принципальной принципал

(ARKids First and Medicaid)

1-800-275-1131

# www.arbetterbeginnings.com

(Division of Child Care and

Early Childhood Education / Better Beginnings

1-800-445-3316





contact with the Arkansas Department of Human Services, Division of Medical Services. The contents presented do not necessarily reflect Arkansas DHS policy. The Arkansas Department of Human Services is in compliance with Titles VI and VII of the Civil Rights Act. MB2-MH.BR0,1-2/10 prepared by the Arkansas Foundation for Medical Care Inc. (AFMQ) under



under contract with the Arkansas Department of Human Services, A publication of the Arkansas Foundation for Medical Care,

Division of Medical Services

# What is a medical home?

It may sound like a building, but a medical home isn't an actual place. It's a doctor you or your child go to for check-ups or when you get sick. This doctor is called a "primary care physician," or PCP.

## Why should you have a medical home?

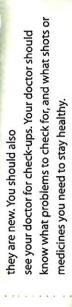
It may seem easier to see any doctor you can when you or your child is sick. But having a medical home—one doctor or clinic you call every time—means you are more likely to get the best care possible. If you see the same doctor every time, that doctor will know what sicknesses and health care you have had. You and the doctor will also get to know each other.

## When should you go to the doctor?

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If something is wrong with your health or your child's health, you should see your doctor. Health problems are easier to treat or manage when





# What is "well-child care"?

Medicaid and most other insurance programs pay for children to see the doctor even when they're not sick. At these visits, the doctor will make sure your child gets all the shots he or she needs. These shots protect your child from sicknesses like measles, tetanus and chicken pox. The doctor will also check for health problems and

make sure your child is growing and developing as expected. If problems are found early, they are easier to treat or manage.

## What should I do for help when my doctor's office is closed?

Most doctors have a number you can call after hours or on weekends or holidays. If you feel like you need to get care for a health problem that is not life-threatening, call your doctor first. Your doctor can tell you if you need care right away, or if you can wait until the clinic opens again.



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The Patient-Centered Medical Home in Arkansas is an approach to providing comprehensive primary care for children, youth, and adults. The Patient-Centered Medical Home in Arkansas is a health care setting that facilitates partnerships between individual patients and their personal physicians and, when appropriate, the patient's family.

— American Academy of Pediatrics (AAP) and American Academy of Family Physicians (AAFP)



# Kindergarten Readiness Indicator Checklist for Parents



## **EMERGENT LITERACY**

- Listens, tells and engages in story being read
- Participates in singing songs and saying rhymes
- Retells stories from favorite books and personal experiences
- Decides if two words rhyme for example, cat and bat
- Holds books right side up, turns pages one at a time from front-to-back
- (for example, stop signs and logos for Wal-Mart Recognizes print they see in their everyday life and McDonald's)
- Recognizes and names some letters of the alphabet, especially in their own name
- Produces the correct sounds for some of the letters of the alphabet
- Writes some letters correctly, especially those in own name

## **MATHEMATICAL THINKING**

- Counts in sequence up to 20
- Understands and uses terms such as first, second and last
- Counts objects using one number for each O

Recognizes four objects in a group without 

Knows own first and last name, age, and knows

SOCIAL STUDIES

names of family members

Understands and talks about today, yesterday,

tomorrow, after lunch, day and night

- Recognizes numerals 1-10
- Sorts objects by color, shape and size 000
- Recognizes and repeats patterns such as triangle, square, triangle, square
- Measures and compares height of objects 00

in the community such as home, school, grocery Is aware of familiar buildings and special places

- example, shoe sizes or different lengths of yarn) Recognizes and names familiar shapes such as Arranges objects from shortest to longest (for
- square, triangle, circle and rectangle
  - Understands and uses words such as inside, outside, up, down, over and under O

Enjoys pretend play (for example, rocking a baby

Explores drawing with crayons and markers

Enjoys singing and moving to the beat and

speed of music

**CREATIVITY & AESTHETICS** 

store and park

doll, driving a truck or pretending to talk on a

## **SCIENCE & TECHNOLOGY**

- (for example, "What do plants need to grow?") Asks questions about the world around them
  - Recognizes that living things change over time (for example, babies grow and become adults and seeds grow and become plants.)
- Recognizes and names these five colors: red, blue, yellow, green and black
- Uses simple technology devices such as touch screen, e-book reader or digital camera



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Adopted by the Arkansas Early Childhood Commission

Division of Child Care and Early Childhood Education



# Kindergarten Readiness Indicator Checklist for Parents



lifelong learning. School readiness occurs when families, schools and communities support and serve ALL children, so they are successful in school and in life. Arkansas's Definition of School Readiness: School ready children have the social and academic knowledge, skills and behaviors for school success and

This list of indicators identifies skills, knowledge and behaviors that will help your child be prepared for that special day – going to kindergarten. The checklist is NOT a test. It is a tool that you can use to help your child make the transition to kindergarten.

# SOCIAL & EMOTIONAL DEVELOPMENT

- Separates from caregiver to another trusted
- Shares, takes turns and plays cooperatively with other children
- Expresses basic emotions such as happy, sad, mad or scared
- Responds sympathetically to others' distress with words and actions
- Recognizes similarities and differences in self and others (for example, boy or girl, hair and skin color)

## **COGNITIVE DEVELOPMENT**

- Is curious, interested and willing to try new things
- Completes a task such as working a puzzle 000
  - Adapts to new situations
- Focuses and pays attention during an activity such as story time
- "What's Missing" and simple memory matching Engages in memory games such as card games

Uses number- and letter-like forms and/or drawings to represent ideas or feelings

# PHYSICAL DEVELOPMENT & HEALTH

- Gallops, slides, hops, leaps and skips O
- Steers a tricycle, balances on beam or sandbox
- Catches a ball with both hands
- Tosses or throws balls
- Kicks moving ball while running
- Pours liquids without spilling and builds with Legos<sup>®</sup> or blocks
- Uses a 3-point finger grip on pencil, crayon or paintbrush
- Makes a variety of lines and shapes such as
- Uses scissors correctly to cut simple shapes and  $\triangle$  +, $\square$  and  $\triangle$
- Buttons, zips, laces and buckles

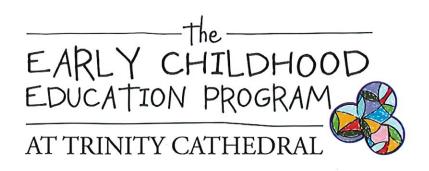


- Names a variety of foods and begins to classify food items as either fruits or vegetables
- Is aware of safe behavior and follows basic safety rules and routines
- routines such as hand washing, brushing teeth, Takes responsibility for personal self-care dressing and toileting
- Can express own health needs such as, "I'm hungry", "My head hurts", and "I'm tired" O

## LANGUAGE DEVELOPMENT

- of words for objects, for actions, and to describe Understands an increasing number and variety
- Comprehends who, what, why and where questions O
- Performs up to three-step directions 00
  - Uses four- to six-word sentences
- Tells increasingly detailed stories or ideas
- Communicates clearly enough to be understood by most people 00
- Takes turns in conversation with others
  - Responds to the English language 00
- Speaks and expresses self in English





## **Tuition & Fee Schedule**

2023-2024 Academic Year Effective August 14, 2023

Daily serving Children Ages Six Weeks through Pre-K

Summer and holiday care available for school-age children

## **Enrollment Fees**

**Application Fee** 

\$25.00

-paid at the time of application

Placement Fee

\$125.00

-paid upon notification of availability of placement

**Annual Supply Fee** 

\$150.00

-paid in Fall (starting Fall '24)

Fees are non-refundable

## **Preschool Tuition**

## Tuition is paid in advance by bank draft on the 1st and 15th of each month.

Full-Time Tuition (Monday through Friday)

\$412.50 semi-monthly draft

-\$825 per month with an average weekly rate of \$190.39

Three Day Tuition (Monday-Wednesday-Friday)

\$300.00 semi-monthly draft

-\$600 per month with an average weekly rate of \$138.47

Two Day Tuition (Tuesday-Thursday)

\$250.00 semi-monthly draft

-\$500 per month with an average weekly rate of \$115.39

**Drop-In Rate** (preapproved and paid via check)

\$38.00 per day

## **School Age Enrollment Fee and Tuition**

ECEP offers a limited number of spots to children who are in Kindergarten and up during elementary school breaks and holidays.

School Age Enrollment Fee \$50.00

-fee is for new enrollees, not ECEP graduates

Drop-In Rate \$30.00

-rate applies to days during the school year

Summer Weekly Rate \$150.00

<sup>\*</sup>Part-time positions are limited and not guaranteed. Families wanting full-time care receive highest priority.



### 2023-24

### **August**

			•				
S	M	Т	W	T	F	S	8/13 ECEP Sunday
		1	2	3	4	5	8/14 First Day of School
6	7	8	9	10	11	12	
13	14	15	16	17	18	19	
20	21	22	23	24	25	26	
27	28	29	30	31		T	

## **February**

S	M	Т	W	Т	F	S	2/7 Koinonia
Y-M				1	2	3	2/13 Mardi Gras
4	5	6	7	8	9	10	2/14 Ashes to Go
11	12	13	14	15	16	17	Valentines Day Party
18	19	20	21	22	23	24	2/21 Koinonia
25	26	27	28	29			2/29 Leap Day
35						1	

## September

S	M	Т	W	T	F	S	9/4 CLOSED Labor Day
					1	2	9/6 OPT meeting
3	4	5	6	7	8	9	9/16 Pancake Breakfast/
10	11	12	13	14	15	16	Book Fair
17	18	19	20	21	22	23	9/20 Koinonia
24	25	26	27	28	29	30	

## March

S	M	T	W	T	F	S	3/6- Koinonia
					1	2	3/7-3/8 School Pictures
3	4	5	6	7	8	9	3/20 Koinonia
10	11	12	13	14	15	16	3/27 Easter Egg Hunts
17	18	19	20	21	22	23	3/28-3/29 CLOSED
24	25	26	27	28	29	30	Easter Holiday
31							

### October

S	M	Т	W	T	F	S	10/4 Blessing of the Stuffed
1	2	3	4	5	6	7	Animals (Day)
8	9	10	11	12	13	14	10/4 Koinonia (Bless Animals)
15	16	17	18	19	20	21	10/18 Koinonia
22	23	24	25	26	27	28	10/23 Canvas Dinner
29	30	31					10/29 Trunk or Treat
							10/30-11/3 Fall Fun Week

## April

S	M	Т	W	T	F	S	4/3 Koinonia
	1	2	3	4	5	6	4/17 Koinonia
7	8	9	10	11	12	13	4/20 Earth Day
14	15	16	17	18	19	20	4/22 Canvas Dinner
21	22	23	24	25	26	27	
28	29	30				00 %	

## November

S	M	Т	W	Т	F	S	11/1 Koinonia
E.,			1	2	3	4	11/15 Koinonia
5	6	7	8	9	10	11	11/22-11/24 CLOSED
12	13	14	15	16	17	18	Thanksgiving Break
19	20	21	22	23	24	25	
26	27	28	29	30			

## May

S	M	Т	W	Т	F	S	5/1 Koinonia	
			1	2	3	4	5/10 Muffins for Moms	
5	6	7	8	9	10	11	5/15 Koinonia	
12	13	14	15	16	17	18	5/27 CLOSED	
19	20	21	22	23	24	25	Memorial Day	
26	27	28	29	30	31	583		
1.854								

### December

S	M	T.	W	Т	F	S	12/6 Koinonia
					1	2	12/20 Koinonia/
3	4	5	6	7	8	9	Christmas Pageant
10	11	12	13	14	15	16	12/25-12/26 CLOSED
17	18	19	20	21	22	23	Christmas Holiday
24	25	26	27	28	29	30	
31							

## June

S	М	T	W	T	F	S	1 6/19 CLOSED
						.1	6/19 CLOSED
2	3	4	5	6	7	8	Juneteenth
9	10	11	12	13	14	15	
16	17	18	19	20	21	22	
23	24	25	26	27	28	29	
30							

## January

S	M	Т	W	Т	F	S	1/1 CLOSED
	1	2	3	4	5	6	New Year's Day
7	8	9	10	11	12	13	1/3 Koinonia
14	15	16	17	18	19	20	1/15 CLOSED
21	22	23	24	25	26	27	MLK Jr Day
28	29	30	31				1/17 Koinonia
3.5							1/22 Canvas Dinner

1/31 Koinonia

## July

S	M	T	W	Т	F	S	7/3 Parade and Popsicles
	1	2	3	4	5	6	7/4-7/5 CLOSED
7	8	9	10	11	12	13	Independence Holiday
14	15	16	17	18	19	20	7/22 Canvas Dinner
21	22	23	24	25	26	27	
28	29	30	31			1	