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**Revised October 2016**

If a discrepancy exists between this Handbook and any legal mandate, legal mandate will take precedent

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MISSION STATEMENT

To contribute to a bias-free society, to teach children to be world citizens, to build community among families of all cultures and backgrounds coming to UC San Diego, and to utilize all available resources from the campus community that can contribute to the child’s total development.

PROGRAM PHILOSOPHY

Inspired by the Reggio Emilia philosophy, the Mesa Child Development Center is committed to hands-on, child-driven learning in which children are initiators of their own discovery, parents are collaborators, and teachers are facilitators. We seek to bridge family, school and community and create an awareness of global inclusivity by understanding the impact of culture on families. Our program focuses on collaboration between staff, parents, and children.

PROGRAM RATIONALE AND DESCRIPTION

The Mesa Child Development Center serves children 3 months to 5 years and our education goals are:

- To strive to promote the well-being of the child and family by providing high-quality child care in an early childhood education setting.
- To provide a rich, safe and healthy environment that stimulates creative learning and satisfies a child’s natural curiosity.
- To cultivate a lifelong world view by embracing tolerance, respect and appreciation for human diversity and the fair treatment of all people.
- To promote self-esteem by accepting a child’s failures and successes to enable him or her to manage personal feelings.
- To foster a child’s development through interactive pursuits with the physical, social and natural world in which we live.
- To pursue and maintain accreditation from the National Association of Education for Young Children as a high-quality program for young children.
- The ability to initiate learning through purposeful play provides the foundation for lifelong learning skills necessary for personal, academic and professional fulfillment.

The Center operates four programs, each of which will be described separately:

1. Infants (Full Time 3 months to 2 years)
2. Toddlers (Full Time 2-3 years)
3. Preschool (Full Time Mixed Aged 3-5 years)
4. Preschool (Part Time Mixed Aged 2.5-5 years)

INFANT PROGRAM (3 months - 2 years)

Our infant program has been modeled on research and guidelines developed collaboratively by the California Department of Education and West Ed, and is designed to be an extension of the family unit. Social-emotional growth and language development is supported by the low child/teacher ratio which provides opportunity for each young infant to connect with a responsive caregiver and fosters the development of close, caring relationships. Intellectual development has an emphasis on activities that
are naturally interesting to infants and which utilize appropriate play materials. The classroom is divided into two main areas, one provides opportunity for movement, choice and exploration in a safe and comfortable setting and the other is a napping area which provides opportunity for quiet moments and facilitates opportunity for breast feeding. Each area is equipped with an observation window so that the young infants can be viewed in their natural environment without disturbance and entrance into this area requires authorized access to ensure all health and safety standards are fully met.

The MCDC Infant Room is often a child’s first experience outside the home. The program provides individual attention to help infants feel secure as they make this transition. This group care setting offers a rich environment for promoting interpersonal bonding and for providing intellectual stimulation for infant development. The “caregiver-infant ratio” is kept low to provide as much individual attention as possible.

For bottle feedings, bottles will not contain solid foods unless the child’s health care provider supplies written instructions and a medical reason for this practice.

The daily schedule is designed to meet the physical needs of the infants (e.g. morning rest and afternoon nap, morning and afternoon snacks, lunch, and regular diaper changes). An infant’s physical skills are coupled with rapid increases in their cognitive and social skills. The infant program offers a wide range of experiences through art, language, movement, sensory play, and musical activities to meet the needs of rapidly developing infants.

Within certain constraints, infants are encouraged to make choices about their day. Even at this early age, infants are excited about their increasing sense of independence. The infant program helps them use their freedom in ways that promote their development. They can move freely throughout the classroom exploring indoor or outdoor activities that they find of interest. They can work with others on projects, or they can work alone. The Center does not try to suggest that materials should be used in a single or best way. The infants are encouraged to find their own way to do things and to learn from the diversity of the responses of their peers.

During the learning/play periods each day, children can move freely from indoor and outdoor activities such as:

- Finger and easel painting
- Gluing different materials with emphasis on color, shape and texture
- Singing before meals and dramatic play
- Reading and creating stories with flannel board characters
- Puppet play to encourage language expression
- Outside play with sensory materials like sand, water, bubbles, and play dough or climbing, swinging and playing on playground equipment
- Problem solving using puzzles, building with blocks, and other small motor activities

**TODDLER PROGRAM (2 - 3 years)**

Our toddler program provides a loving and secure atmosphere similar to the infant program, but with increasing emphasis on autonomy, self-motivation, and self-selection of activity. The larger program offers the young child a range of different types of experiences. The philosophy of the program is to allow the children to discover for themselves the pleasure of working together in small groups. The teachers create activities that invite children to join together to explore an idea, or experiment with color,
or find a new way to climb. A daily meeting time provides children with a time to develop their language and social skills.

The daily schedule in our toddler program includes a choice of activities in a number of different locations:

♥ A variety of work areas are available indoors and outdoors with a range of teacher-prepared activities and games to stimulate small muscle coordination and development of cognitive processes, language, mathematics, reading, and writing. These include puzzles, clay, cutting and gluing tasks, and scientific experiments. These work areas provide a setting for conversations on a range of topics between the children and their teachers.

♥ A creative play area encourages dramatic play with clothes and equipment to create different settings within a home, a store, or other settings

♥ A block-building area with animals and vehicles to help children think about ways of constructing their own settings and experimenting with inclines and wheels

♥ Students have ready access to drawing and collage materials so that they can choose to express themselves in artistic ways as they wish

♥ Circle time provides an opportunity for movement and music and experiencing cultural diversity through songs and rhyme

A reading corner provides a quiet place for individual children or small adult-led groups to interact with books and ideas. It serves as the location of many quiet discussions on topics like how to handle feelings, what jobs children would like to have as adults, or how animals act.

An active outdoor area contains equipment for large muscle development and motor coordination, and working space for sensory materials like sand, water, clay, or paints and construction materials like wood, blocks, and cardboard. The toddler program takes full advantage of the mild climate, moving many traditional indoor activities outdoors—often resulting in interesting variations.

The teachers usually talk with one or a few children at a time and extend each child’s experience with a positive response, question, suggestion, or explanation. Emphasis is placed on understanding the image a child has of self, and helping the child develop a positive self-image.

**PRESCHOOL PROGRAM (3 - 5 years)**

As children grow, they need more space to explore and a wider set of activities to expand their interests. The preschool program uses the large space of a double classroom and a well-designed outdoor play area to provide young children a rich diversity of challenging activities.

The children usually work with an adult on a learning project in groups of about 4 or 5 students. These intimate working groups allow for important social interaction among children and adults. The adults can listen carefully to what a child offers, encourage the children to ask questions or make observations, direct reflections on actions and outcomes, and help children work cooperatively with their peers.

Through creative use of outdoor as well as indoor learning centers, children in the preschool program have much more space in which to work than is normally available in larger group care settings. During the morning and afternoon learning sessions, children can choose from among 6 to 8 special projects that
are set up each day, either indoors and outdoors. The program curriculum is carefully designed to provide for the many areas of growth in young children and includes the following types of activities:

♥ **Pre-writing and Writing Projects:** Children use scissors and paste, as well as a wide range of writing and printing tools – including computers – to create books, labels, stories, captions, poems, signs, and banners. The focus of these activities is fine motor control, eye/hand coordination, and visual discrimination. The children develop an understanding and appreciation of early literacy skills.

♥ **Listening Center Tasks:** Children listen to stories read to them by adults, participate in flannel board stories, and listen to recorded materials. They develop skills in verbal expression, listening, comprehension, vocabulary, and auditory discrimination of words and rhymes.

♥ **Sensory Experiences:** Children have the opportunity to manipulate, mix, measure and experiment with a range of sensory materials such as clay, sand, flour, mud, salt, and water. Cooking experiences help students understand the need for following directions, and making materials like playdough provides wonderful opportunities for innovative experimentation with materials. As children watch the transformation of materials as they are mixed, heated, or cooled, they are developing important observational and conceptual skills.

♥ **Creative Expression:** Children have access to a rich variety of media for artistic expression. In addition to teacher-prepared art experiences, a child may select materials for self-directed projects in painting, printing and drawing. These activities develop the child’s fine motor skills using a variety of mediums that include threading, gluing and 3-D construction.

♥ **Dramatic Play:** The dramatic play area provides children with props to explore various roles, relationships, and interactive strategies through imaginative play. The area undergoes frequent changes – becoming a fire station, a pediatrician’s office, a restaurant, an office, or an airliner – as children use their own actions to understand their world.

♥ **Cognitive Tasks:** Each day different types of puzzles, memory games, measurement tools, cubes, scales, and other manipulative materials are set up for the children to explore. These tasks are designed to help the children to develop their concepts of size, position, color, shape, time, quantity, and comparison. Adults are available to help children to learn from their observations and to challenge the children to use the material in new ways.

♥ **Science Experiments:** Children participate in activities such as sprouting seeds, growing plants, examining materials with magnification and microscopes, examining and building simple machines and experimenting with wheels and inclines. These tasks promote basic thinking skills and understanding of cause and effect relationships, sequence, and predictions. Children’s curiosity about their physical world provides the direction for construction of these tasks.

In addition to these learning centers that change each day, there are a number of areas that are always available to children. These include a computer center, a block-building area, a dramatic play corner, a library area and shelves of art materials.

Another important part of the daily schedule is the large group meeting time at noon and the smaller meeting at the end of the day. These special times of singing, rhyming, and language development games focus on the child’s importance as a member of the group. It provides a setting for children to learn to speak and listen to one another.
VISITATION AND PRIMARY CARE-GIVING

We know from the science of brain research that positive interactions in nurturing environments support healthy brain development for young children (Bowlby, 1969). Secure attachment provides a base from which your child is able to explore the environment and manage stressful situations. As parents you are the most important care-givers in your child’s life, and the transition from your home to our group care experience can be a most positive one if your child feels that you trust his or her new care-givers. Our teachers become partners in the daily life of your child and are trained to establish and maintain an emotionally warm and physically safe environment so that your child can develop the basic trust necessary to acquire independence. They will help you develop a visitation and gradual separation plan partnering with you so that they can get to know as much as possible about your child, including his or her temperament and cultural background. This parent-accompanied visitation is two weeks for one to two hours for ages 3 months- 3 years and 1 week for the 4 year old age group. This visitation period takes place prior to enrollment.

To support the establishment and building of trusting relationship we practice “primary care-giving.” Each teacher has a small group of families assigned as his or her primary responsibility. That teacher will be the one who is usually responsible for care-giving routines such as feeding and diapering. He or she will coordinate planning, record keeping and documentation of developmental progress for your child and is the main person you will go to for information and conferencing. Because the primary caregiver will not be present the whole time that your child is in the program and because all teachers interact with all children, it is essential that as a family you and your child also establish trusting relationships with other staff members who are part of the classroom team. Love, reassurance and familiarity foster an atmosphere of safety that will enable your child to trust us enough to risk exploration and enjoy new discoveries through play without your presence.

Infant Sleeping Requirements

The American Academy of Pediatrics and American Public Health Association have written guidelines for child care centers called Caring for our Children – National Health and Safety Performance Standards: Guidelines for Out-Of-Home Child Care Programs. They strongly recommend the following rules regarding infant sleep position and surroundings:

♥ Infants under 12 months of age shall be placed on their backs on a firm, tight-fitting mattress for sleep in a crib
♥ Waterbeds, sofas, soft mattresses, pillows, and other soft surfaces shall be prohibited as infant sleep surfaces.
♥ All pillows, quilts, comforters, sheepskins, stuffed toys, and other soft products shall be removed from the crib.
♥ If a blanket is used, the infant shall be covered loosely, the blanket tucked around the crib mattress reaching only as far as the infant’s chest, or the infant will be swaddled.
♥ The infant’s head shall remain uncovered during sleep.
♥ Unless the child has medical reasons, and thus a note from his/her physician specifying otherwise, infants shall be placed on their backs for sleeping to lower the risks of Sudden Infant Death Syndrome (SIDS).
♥ When infants can easily turn over from their back to stomach or side, they shall be put down to sleep on their back, but allowed to adopt whatever position they prefer for sleep.
♥ Unless a doctor specifies the need for a positioning device that restricts movement within the child’s crib, such devices shall not be used.
WATCHING YOUR CHILD GROW: AUTHENTIC ASSESSMENT

Meeting a child’s individual needs in a group care setting requires a partnership between the program and family. It also requires that the teaching staff come to have specific knowledge of each child in their care. This process begins before the child ever enters the classroom, as families share information during the enrollment process and intake conferences, and continues throughout a families’ tenure in the program. On-going communication between families and teachers is critical. In addition, a more formal assessment process has been developed over the years to guide us in daily observation of, reflection about and incorporation into the curriculum of each child’s unique developmental path.

UCSD’s ECEC supports the research that a child’s developmental progress is an essential factor in the planning and adapting of curriculum. We believe the best venue for identifying progress in young children is by using tools that support the staff to authentically assess children in their natural environment. The program is committed to working with families to care for the ‘whole child’ socially, emotionally, creatively, physically and cognitively.

♥ **The Portfolio** - Families often keep a collection of ‘artifacts’ at home that signify their child’s journey and growth such as a list of first words, pictures from the first haircut, a photo of baby’s delight at bath time and that ragged favorite blanket. As a child grows, the collection changes...baby teeth, drawings they wrote their own name on, report cards, the program from the school play...and so it goes. Here at the Center we keep a similar collection known as the ‘Child Portfolio’. Portfolios encourage ‘authentic assessment,’ that is, assessment done over time in the natural environment based on the child’s typical activities.

The portfolio includes:
- photos of the child interacting and playing
- language samples (dictated stories, records of conversations)
- anecdotal notes (written notes highlighting typical or significant events)
- writing and drawing samples

This portfolio, shared during parent conferences, is a visual tool for guiding our thinking about each child while documenting their growth. More formal records such as family conference notes, health documentation and a semi-annual written developmental profile (DRDP) are also included in the child’s file.

The written developmental profile used to assess children is the Desired Results Developmental Profile (DRDP) which has been developed by the California Department of Education (CDE) in conjunction with the Center for Child and Family Studies at West Ed. Desired results are defined as “a condition of well-being for children and families”.

The DRDP system includes two separate age-level DRDP instruments. The age levels are infant/toddler (birth -36 months) and Preschool (36 months-pre kindergarten). Each Desired Result defines an overall outcome. The DR system was developed based on the following six Desired Results:

♥ Desired Results for Children
- DR 1: Children are personally and socially competent.
- DR 2: Children are effective learners.
- DR 3: Children show physical and motor competence.
-DR 4: Children are safe and healthy.

 Desired Results for Families
-DR 5: Families support their child’s learning and development.
-DR 6: Families achieve their goal

These Desired Results as identified by CDE are reflected in the programs more comprehensive Goals and Objectives. ECEC use the DRDP in conjunction with Authentic Assessment, all of which is included in the child’s portfolio. The child’s confidential portfolio is designed to be informed by the unique family culture and the child’s experiences, interests, abilities and challenges. By combining the DRDP with the child’s portfolio the teachers are able to view children’s progress over a period of time providing for an overall outcome that is both meaningful and accurate.

Timeline- The DRDP, used to assist in observing children’s achievements across time, is completed 60 days after the child’s initial enrollment and twice a year thereafter. While the DRDP must be completed within the CDE’s specified timeframe, the staff contributions to the child’s portfolio are on-going.

Conditions for Assessment - All children are assessed in their natural school environment by the teaching staff that they know and with whom they are familiar. Teachers are constantly observing during the course of the day while children are engaged in play and interacting with one another. Because the scales used in the DRDP are based on a progression of typical development, teachers use the one that corresponds to the child’s chronological age and there are no expectations that the child will master all the skills until they reach the top of the age range. If the teacher completing the DRDP is not able to understand the child’s primary language, a translator may be used. The translator should be known by the child and can be the parent, another staff person or a Teacher’s Assistant.

How Do the Teachers use the DRDP in Planning the Curriculum? Curriculum at the Centers is derived from the needs, interests, strengths, and areas of continued development of the children, as a group and individually. A guiding framework is also provided by our Curriculum Statement, Mission and Values statement, and through our Philosophy and Program Goals and Objectives. The Program is committed to meeting children’s needs in a safe and nurturing environment that invites children to wonder, explore and develop through play. Identification of children’s interests and needs, and the curriculum strategies to meet them, are natural outcomes of interpreting authentic assessment and the DRDP. The schedule, routines, environment, materials and activities are all components considered in curriculum planning. Program changes are also informed by assessment and summary results and incorporated into the annual CDE self evaluation and program action plan. The intentionality in activity planning is made visible on the classrooms Weekly Activity Plans for at least one activity representing each of the four ‘Desired Results’ for children. These areas are identified by a coded symbol identified on the activity plan. When adaptations are made for a particular child, the adaptation is noted on child’s summary or is documented in child’s individual portfolio. Additionally, each child has his/her own goals which are indicated on the summary sheet of the DRDP. To ensure that individual needs are being addressed, the teachers refer to the summary sheets when planning the weekly curriculum.

How the DRDP is Used for Children with Special Needs
Children who have either an IFSP or an IEP benefit from family members, specialists and classroom teachers working together. Collaboration is needed when conducting the observation of the child and for planning and implementing the program. Special consideration will be given to ensure that the person completing the DRDP is also the person that knows the child best. This may be the specialist working with the child or the classroom teacher. The DR Access project, developed by Sonoma State University in conjunction with the State Department of Education, offers specific suggestions for teachers using the DRDP to supplement optimal performance for children with disabilities.

How the Components Work to Ensure Reliability and Validity
Each DRDP Indicator provides valid and reliable measurement of that aspect of a child’s developmental progress. The measurements on the entire indicator, taken together, provide a profile of development for the whole child, in terms of progress toward all four Desired Results. Because there are multiple measures within the indicators, a completed DRDP provides enough information to support valid and reliable measurement for individual indicators or a group of indicators. Each measure is defined in terms of the sequence in which a child’s development is expected to progress. These sequences of development are derived from research in child development.

♥ Including Families in the Assessment Process
Including families in the assessment process begins with the in-take conference when the child begins the program and as the child moves through the program. During this conference, the teachers seek information about the family’s values, religious or cultural beliefs, birth and health histories. If the family is not comfortable sharing in English, requests for an interpreter should be made to the Program Coordinator.

Intake conference:
- The appropriate DRDP is shared with the family with a brief explanation of the Center’s assessment plan.
- A family survey is used when children transition to toddler and preschool to update family information and include the families’ goals and expectation as the child moves.
- Teachers use prepared questions designed to include the family in the assessment process at the in-take/parent conference.

Secondly, parents meet with the teacher formally twice a year for a parent conference. At this meeting, the child’s portfolio, including the Child Developmental Progress form is shared with the family.

Teachers encourage the parent to share in the goal writing process by ascertaining what their goals are for their child, by better understanding the culture of the family and by asking families to participate in classroom activities.

Parent Conference
- Families are given the opportunity to answer questions on the DRDP that teachers may not be able to answer.
- Families are given a written summary of the DRDP including the goals that were collaboratively written.
- The Child Developmental Progress form is used as a tool for teachers to share information with families. Families will be given a copy of the summary form (taken from the User’s guide). This information continues with the child as they progress through the program, information is added as it is shared. Thirdly, teachers are available to talk with families at arrival and departure times and a policy of open communication between teachers and families is strongly supported.

♥ Training of Staff in the use of Authentic Observation/Portfolios and DRDP
As a part of the new staff orientation to the Center, key points on authentic assessment and procedures for developing a child’s portfolio are discussed. Staff development includes topics such as: observation skills, discussions on the best ways to communicate with families when there are concerns, how to use the results obtained to plan and implement curriculum and make adaptations to the classroom as needed. Specific training on the procedures and use of the DRDP begins at the administrative level, with administrators and key staff being trained. Locally, trainings are held to continue to build the capacity of the program to train staff members who work directly with children. Additionally, as the teachers use the DRDP, periodic discussions on the best practices in using the tool and how to best communicate the planning and implementation strategies that are generated from the results of the ongoing observations and desired results outcomes.
TOILET LEARNING PROCEDURE

Toilet learning is a normal stage in a child’s development, and should be a positive experience for all children. If children are ready, both physically and emotionally, the toilet learning process takes a relatively short time. Problems in toilet learning arise when adults do not pay attention to, or respect a child’s readiness. When this happens, adults can pressure a child through weeks of unsuccessful experiences, during which they often blame the child for his/her failure, when all that is happening is that the child simply is not ready. We want to help parents understand that the timing for toilet learning is as individual as learning to walk and talk. There is NO “right” age by which all children should be toilet trained.

Sometime during the second year, the Early Childhood Education Center will try toilet learning with our child for 10 days. If your child shows no interest, too many fears, or too many accidents, your child may need to go back into diapers until it is determined by parent and teachers that the child is ready to try again.

It is essential that parents continually encourage their children at home. Here are a few helpful hints in dealing with toilet learning that not only help us, but will also help your child avoid feeling unsuccessful and frustrated.

1. Children should wear loose fitting clothes that are easy to pull up and down without assistance. Elastic waists are the best choice.
2. No overalls, belts, suspenders, or t-shirts with snaps between the legs. When a child begins to learn to use the potty, there is a very small window between knowing when and getting there on time. Clothing that is difficult to manage slows the process down for the child.
3. Determine from the beginning if the child is to sit or stand.
4. No dresses during this time. Children cannot see to pull down their underwear.
5. A bag with 3 sets of extra clothing (including socks) must be brought to school each day. Children who are just learning to use the toilet need to be changed easily and in a matter of fact way. Toilet learners should never be made to feel “wrong” for having an accident. Please label clothing.
6. Please bring an extra pair of shoes.
7. Due to health regulations, staff cannot wash or rinse out soiled clothing.
8. Children must wear thin cotton panties/underwear. “Pull-ups”, terry cloth, or other thick and absorbent undergarments may feel like a diaper, and can confuse children. They are an added expense to parents, and are simply not necessary.
9. Children will be awakened during naptime to use the potty.
10. Children will not wear diapers during naptime.
11. It is important that children wear panties/underwear the weekend prior to beginning toilet learning at school.
12. Plastic pants or underwear may not be used. When children have accidents, they need to feel the wetness to understand the process.
13. Children will go to the bathroom every 45 minutes to 1 hour the first week, and the second week, as necessary.
14. With a positive tone children will be told, “You need to go potty now.”
15. Continue positive reinforcement at home.

It is vital that all parties cooperate for the child’s best interest. If parents are unable or unwilling to assist with this process, or if the child shows no interest, toilet learning will discontinue for another month. This is an easy process if everyone is committed to working together. Remember that the child’s well-being must always remain the priority.
TODDLER DEVELOPMENT

The most apparent characteristic of the toddler years is the child’s growing desire to act independently and to be in control of his or her self. This is obvious from the first defiantly spoken, “No!” to those phrases and gestures that say, “Me do it!” “Mine!” Yet, this growing sense of autonomy is coupled with the still strong need to be nurtured and cared for. Independent exploration and growth must be balanced with a real sense of security and trust in one’s world (relationships, environment, and routines). This precarious balance accounts for the common “one step forward and two steps backward” parents often see when toilet learning begins. During this process, autonomy is respected and fostered by waiting for the child to initiate interest in self-toileting while respect for a sense of security is acknowledged by honoring their individual pace in leaving behind the security of being cared for during the diapering process.

DISCIPLINE PROCEDURE

Based on the nurturing relationship between teacher and child, discipline at the Early Childhood Education Center is considered an opportunity for growth in the sometimes complex business of getting along with others. In order to minimize conflict, much effort is taken to provide appropriate activities, create an inviting environment, and meet the individual needs of children. Still, conflicts are a natural occurrence as children try to relate to one another in a group setting.

From a positive perspective, much can be learned from these conflict situations: Seeking and giving comfort, searching for and generating creative solutions, identifying emotions and finding appropriate responses to them, collaborating with peers, developing self control… Above all we strive to create an environment where children are safe and know they will be cared for and listened to, not just by their teachers, but by one another as well.

Many techniques are used for assisting children through conflict resolution. Although the style (pace, wordiness…) is different depending on the age of the children and severity of the situation, all methods seek to guide children as problem solvers. Children are all competent individuals and bring their own feelings, actions and ideas to conflict situations. Teachers respect and build on these attributes through their language, interaction and example. The intent of these discipline techniques is to encourage the growth of autonomy, and the ability of an individual to make decisions based on their own knowledge of right and wrong derived from intrinsic motivation to do so rather than from a desire to reap rewards or avoid punishment.

The following are discipline techniques used regularly at the Center.

Limit Setting – In order for children to build trusting relationships and feel confident to explore, they must clearly know what is expected of them. Rules are few, basic, clear and concise. Boundaries and expectations expand in keeping with the abilities of the children.

Consistency – So children know what to expect (and from that they can anticipate, predict and change their own behavior accordingly) limits and expectations are consistent throughout the classes. In addition, all adults respond in a consistent manner to conflict situations.
**Tone** – “You are safe; the situation is under control; and we can work it out.” These are the messages a child must receive from the adults intervening. A firm, kind, serious tone with a relaxed demeanor reinforces this message.

**Modeling** – Our actions speak clearly to children. It is imperative that the adults in the Center set an example of compassionate, caring individuals who are able to express their own needs and feelings clearly and calmly, and willingly respond to the needs of others. “I feel angry when you hit me. Let’s sit down so you can tell me, in your own words, what is bothering you.”

**Passive Intervention** – Children are given time to work through their own problems. If a situation does not escalate to destructive or aggressive behavior, a teacher may choose to simply observe as the children seek a solution. The teacher’s presence can also serve as a gentle reminder to use words instead of actions. Teachers trust the children to “figure it out” but are there to help if they should need it. When additional intervention is necessary to facilitate the resolution process it is handled as non-intrusively as possible.

**Physical Intervention** – Children will be physically stopped when hurting each other. The focus will then turn to resolving the conflict at hand.

**Identifying/Interpreting** – “You both want the truck!” Such a simple statement can clarify the problem, diffuse tension and help the problem solving begin. Children also need help to consider others’ emotions or needs, especially when they themselves are upset. For example, “See his tears? It really hurt him when you kicked him.”

**Validating Feelings** – Constructive thinking is virtually impossible when one is overcome by an emotion such as anger, sadness, fear or frustration. Acknowledging the emotion is imperative before any other ‘learning’ can occur. “I will not allow you to hit him, but tell us why you are so angry.” It is essential that all children involved in conflict be honestly listened to. Children are not told to say, “I’m sorry,” but rather to actively comfort or offer help to the child they hurt or upset. Adults may model by saying, “I am sorry you got hurt!” and at some point children will spontaneously do the same.

**Generating Options/Solutions** – “Can you think of a way to use the truck together? … Is there a road for it to drive on? John is crying from that push you gave him. Ask him if he would like you to brush him off. Everyone wants a turn, how can we make it fair?” The teacher places a different toy near two infants who are tugging on one doll. From a list of specific choices to the general questions, “Well, what should we do about it?” children are given tools to settle conflicts (negotiate, make retribution, collaborate).

**Redirection** – A request to stop negative behavior is accompanied by a suggestion for an appropriate behavior with which to replace it. “You may not throw the sand; if you want to throw something here are some bean bags and a bucket to throw them into.”

**Natural Consequences** – “You dumped your milk on the floor. Please get the sponge to clean it up.” “You threw sand after we asked you not to, now you need to leave the sand box and find a different area to play in.” “When you crawl under that table it is hard to sit up. Would you like some help in getting out?” These are just a few examples of the natural consequences that teachers point out and reinforce as they occur. Children see the results of their own behavior and begin to modify it accordingly.
WHEN MORE IS NEEDED: If a child’s behavior is excessively disruptive or harmful to an individual child or the class, or should the teacher and administrative staff concur that additional support and expertise is needed, some or all of the following steps will be required of the family:

- **Additional Parent/Teacher Conferences-** The Director or Center Coordinator may attend to share their observations, professional opinions and offer support to the family and staff. The purpose of this conference is to clearly define the problem, re-examine possible causes, brainstorm any changes that the staff and/or family can make, and reinforce consistency between home and school.

- **Community Resources-** Professional support (for example Infant or Preschool Specialist from the San Diego City Schools, Behavior Specialists from the YMCA) may be contacted. The Program Coordinator facilitates the referral process, which includes working with the parent, Center staff and the specialist.

- **Schedule adjustment-** The Center staff may determine that an adjusted schedule (shortened hours or a different arrival time) is in the best interest of the child and/or class. Typically, this is an interim measure; long term adjustments are determined by resolution of the issues.

- **Counseling-** Families may be requested to seek professional counseling outside the Center. The counselor will be encouraged to visit the Center for observations; MCDC’s staff welcomes the additional insights and suggestions and will request an exchange with the family and counselor. The child's continued enrollment at the Center will be made contingent upon the family's willingness to cooperate in finding a solution, in addition to the child's success in changing the behavior in question. We strive to provide a safe and healthy environment for all children. If the behavior continues after all efforts have been exhausted, or the child is jeopardizing the health and safety of other children in the program, it may be recommended to the parents/legal guardians/authorized representatives that the child may do better in a smaller setting. In this case, MCDC staff could assist in finding other childcare (if requested).

**TOYS FROM HOME**

It is the Center’s general policy to discourage children from bringing toys from home. Because we have such an economically diverse population, we would like to ensure that each child’s time at school reflects “an even playing field” with other children. The Center is not responsible for any lost, broken or stolen toys brought to the Center. The Center is fully equipped with age-appropriate toys and materials and we work to create a sense of community in each classroom by sharing and caring for the Center’s materials. War toys or toys that encourage violent/angry solutions to problems are never permitted at the Center. Items that may be brought to school from home include: a favorite book, a science item (rocks, bones, pods, leaves), or artwork from home. There is also Sharing Time opportunities in the classrooms.

**LUNCH**

Parents must provide a lunch if their child is enrolled for an extended day program, or if their child stays for extended care. Lunches cannot be heated or refrigerated and will be kept in the child’s cubby until lunch, so please include an ice pack in your child’s lunch box to keep it cool. We recommend packing a balanced and nutritious lunch with foods from at least three food groups (i.e. proteins, grains, fruits/vegetables, etc). MCDC & ECEC are nut free zones.

**STAFF**

The classroom is staffed with one Lead Teacher, a Teacher and UC students based on the classroom size and the child to adult ratio required by the State Department of Education contract. The Center
administration is headed by the Director who directly supervises the Site Supervisor, Business Manager, Center Coordinator, Enrollment Coordinator, and office support staff. The staff has been carefully chosen for their outstanding training, ability, and experience with children. The Center follows the Child Development Permit Matrix to determine staff qualifications for hiring purposes and conforms to Title 22 and Title 5 regulations.

Any reference in this document to the Director refers to that person who has been assigned supervisory authority and/or has the responsibility for making decisions at the Center in the Director’s absence. A Site Supervisor is present at all times.

**RESEARCH AT MCDC/ECEC**

ECEC supports the research activities of the UCSD Academic Community. Most research projects conducted in the classroom are strictly observational. No child will be included in a research project without parental consent. The Director and the Human Subject Institutional Review Board review all research.

**UCSD’s HARASSMENT-FREE POLICY**

**Reaffirmation of UCSD’s Policy on Sexual Harassment** – UCSD does not tolerate sexual harassment, and such behavior is prohibited both by law and by UCSD policy. Hard copies of the policy and information regarding UCSD’s policy and resolution procedures are available at:

Office of Sexual Harassment Prevention and Policy (OSHPP)
201 University Center (map)
(858) 534-8298

Supervisors are urged to review their responsibilities under the policy and, in particular, the requirement that complaint resolutions handled at the department level be reported to OSHPP. In addition, all departments are urged to use the resources offered by OSHPP and provide education to their employees on a regular basis. For more information, see *Reaffirmation of UCSD’s Policy on Sexual Harassment.*

**Reaffirmation of UCSD’s Commitment to Be Accessible to Individuals with Disabilities** – UCSD is committed to making each of its programs, services, and activities accessible to and usable by persons with disabilities. We all share the responsibility of safeguarding the civil rights of individuals with disabilities who seek to participate in the full range of UCSD’s programs, activities, and services. UCSD managers and administrators should carefully review PPM 200-9, UCSD’s Disability Access Guidelines, and inform faculty and staff colleagues of their responsibilities.

The guidelines include:

- Reasonable accommodations
- Accommodating people with specific disabilities
- Updated list of resource specialists for problem resolution and grievances

For more information, see *Reaffirmation of UCSD’s Commitment to Be Accessible to Individuals with Disabilities.*

**Reaffirmation of UCSD’s Equal Employment Opportunity/Affirmative Action Policy** – UCSD prohibits discrimination against or harassment of any person employed by or seeking employment with
the University of California, consistent with the provisions of applicable state and federal regulations. In compliance with federal regulations, UCSD prepares and maintains written affirmative action plans. Managers and supervisors have responsibilities to ensure equal opportunity and affirmative action programs are implemented. For more detailed information on staff and academic policies and resources, see Reaffirmation of University of California, San Diego's Equal Employment Opportunity/ Affirmative Action Policy.

COMPLAINT/GRIEVANCE PROCEDURE

MCDC/ECEC reaffirms the UCSD Principles of Community and specifically rejects acts of discrimination based on race, ethnicity, gender, age, disability, sexual orientation, religion, and political beliefs, and, we will confront and appropriately respond to such acts. Whenever there is a need to lodge a complaint or discuss a concern, the personnel below should be addressed in the order they are listed:

Classroom-related Issues
1. Lead Teacher
2. Enrollment Coordinator
3. Director
4. Assistant Vice Chancellor – Auxiliary & Plant Services

Other Issues
1. Maintenance and Grounds: Service Referral Desk – Auxiliary & Plant Services
2. Enrollment/Food Program/Referral: Business Officer – Auxiliary & Plant Services
3. Billing: Business Officer – Auxiliary & Plant Services
4. General Information: Any available administrative staff member

Uniform Complaint Procedures
It is the intent of ECEC’s child development program to fully comply with all applicable state and federal laws and regulations. Individuals, agencies, organizations, students and interested third parties have the right to file a complaint regarding the Early Childhood Education Center’s alleged violation of federal and/or state laws. This includes allegations of unlawful discrimination (Ed Code sections 200 and 220 and Government Code section 11135) in any program or activity funded directly by the State or receiving federal or state financial assistance. Complaints must be signed and filed in writing with the State Department of Education.

Department of Education
Child Development Division
Complaint Coordinator
1430 N Street, Suite 3410
Sacramento, CA 95814

If the complainant is not satisfied with the final written decision of the California Department of Education, remedies may be available in federal or state court. The complainant should seek the advice of an attorney of his/her choosing in this event.

A complainant filing a written complaint alleging violations of prohibited discrimination may also pursue civil law remedies, including, but not limited to, injunctions, restraining orders, or other remedies or orders.
**Reporting of Abuse Procedures**

To report any incident involving a staff member who is suspected of violating the personal rights of any child under the provisions set forth in the California Code of Regulations, Title 22, Section 101223, the appropriate licensing agency to contact to file a complaint is:

Community Care Licensing  
7575 Metropolitan Drive, Suite 110  
San Diego, CA 92108  
(619) 767-2227

The Center is also required to file a complaint with this agency in the event that it suspects any child’s rights have been violated by a parent/legal guardian/authorized representative, or employee, as set forth in the provisions below:

**Personal Rights, California Code of Regulations, Title 22**

The following is a statement of parent/legal guardian/authorized representative’s Personal Rights as contained in the California Code of Regulations, Title 22, Section 101223. All employees are expected to be familiar with this Code and treat parents/guardians/authorized representatives accordingly.

*Personal Rights, See Section 101223 for waiver conditions applicable to Child Care Centers.*

(a) **Child Care Facilities. Each child receiving services from a child care facility shall have rights which include, but are not limited to, the following:**

1. To be accorded dignity in his/her personal relationships with staff and other persons.
2. To be accorded safe, healthful and comfortable accommodations, furnishings and equipment to meet his/her needs.
3. To be free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse, or other actions of a punitive nature, including but not limited to: interference with daily living functions, including eating, sleeping, or toileting; or withholding of shelter, clothing, medication or aids to physical functioning.
4. To be informed, and to have his/her authorized representative, if any, informed by the licensee of the provisions of law regarding complaints including, but not limited to, the address and telephone number of the complaint receiving unit of the licensing agency and of information regarding confidentiality.
5. To be free to attend religious services or activities of his/her choice and to have visits from the spiritual advisor of his/her choice. Attendance at religious services, either in or outside the facility, shall be on a completely voluntary basis. In child care facilities, decisions concerning attendance at religious services or visits from spiritual advisors shall be made by the parent(s) or guardian(s) of the child.
6. Not to be locked in any room, building, or facility premises by day or night.
7. Not to be placed in any restraining device, except a supportive restraint approved in advance by the licensing agency.

The appropriate licensing agency to contact regarding filing a complaint is:

Community Care Licensing  
7575 Metropolitan Drive, Suite 110  
San Diego, CA 92108  
(619) 767-2227
Additionally, if an employee suspects that a child’s Personal Rights have been violated by another employee, then the employee suspecting such abuse should immediately notify Community Care Licensing, as well as the Center Director, so that immediate steps may be taken to protect the welfare of the child(ren). This is accomplished by the employee by completing an Unusual Incident/Injury/Death Report (Lic. 624) (Confidential) form available in each classroom or in the Administrative Office. The original signed copy should be mailed in order to be received at the Department of Social Services, Community Care Licensing office within 36 hours and the Director will also FAX a copy to that office. **Behavior that poses an immediate risk to the physical or emotional health and safety of the children, or any use of corporal punishment with children, will result in immediate suspension and possible dismissal.**

**MCDC OPERATIONAL RULES**

**Enrollment/Orientation**
The UCSD Mesa Child Development Center (MCDC) is a service for University-affiliated persons as well as community members, without regard to race, color, creed, religion, or ancestry. Our program, which recognizes and respects the value of diversity, accepts children of all abilities. The Center welcomes all children, and reasonable accommodations will be developed, based on individual needs, in conformance with ADA requirements and the University’s Principles of Community. An Independent Education Plan is offered for children with special needs. The Center refrains from any religious instruction or worship.

At the time of orientation, when the parent(s) or legal guardian(s) of an enrolled child meets with an Administrative staff member, they will receive copies of the Family Handbook, and a copy of the Emergency Management Plan. Documentation required by the MCDC and the California Department of Education’s contract will be completed and signed by parent(s) or legal guardian(s) at the time of orientation and will be maintained in the Administration Office for audit purposes. Enrollment will be contingent upon the receipt of all enrollment forms including: Communication data; emergency and medical information and health history; affiliation statement; Contract of Association Membership; tuition fee and 30-day withdrawal notice; photo permission; Title acknowledgement(s); Medication Authorization. Specific health and safety information will be collected from families and maintained on file for each child in the Mesa Office. The content of the file is confidential, but is immediately available to administrators or teaching staff or regulatory authorities on request. The Enrollment Coordinator will make arrangements for classroom tours or curriculum review as requested by incoming parent/legal guardian/authorized representative.

Occasionally a child does not adjust to the Center environment or exhibits disruptive behavior. In such cases it is essential for parent(s) or legal guardian(s) to be available for consultation and to work together with the staff to resolve the difficulty. Any decision to move a disruptive child between classrooms will first be addressed between both involved classroom teachers and administration; followed by discussion with the parent(s) or legal guardian(s) before implementation of any move.

If it is determined that the Center is not the most appropriate placement for the child, assistance and referrals will be given to support the family in finding an alternate setting.

**Transferring Children**
The processes for transferring children from one room to another, and that used to fill the spaces in the classrooms, are complicated. Many factors play into the decision as to how a space is filled in a
particular classroom. For this reason, we ask that if you have any concerns regarding transfers or openings in a classroom, please consult the Enrollment Coordinator. The Enrollment Coordinator manages the Center’s enrollment, and always has the most current information regarding classroom openings. Consulting teachers and/or other parents can lead to serious misunderstandings.

Additionally, it is the Administration’s responsibility to provide at least one week’s notice to the Lead Teachers in each classroom involved of any transfer and/or visit from transferring student and parent or legal guardian.

**Switching Rates for Part Time Program**
If space permits, it is possible for parents to increase or decrease the number of hours and days that their child attends the center. Any rate changes must be made **30 days prior to when the change will take place.** Notice must be given to the Enrollment Coordinator so that a formal rate-change form can be given.

**Sign In/Out Procedure**
It is essential that a parent/legal guardian/or authorized representative accompanying a child to a classroom (after turning over the child to a teacher or aide who will confirm that the child is in good health) signs the child in on the daily attendance sheet with a full legal signature. A sign out signature is also required when picking up a child. Punctuality and consistency are important to your child’s sense of security. Should an emergency arise and you cannot pick up your child(ren) we ask that you follow this procedure:

Telephone the ECEC to advise them that the authorized representative whose name is on file in the Administrative Office will be picking up your child. An authorized representative as used in this Handbook refers to any adult person that you have authorized, in writing, to make emergency arrangements for your child. If the adult picking up your child does not have his/her name already on file as that authorized representative, please arrange to fax in your signed permission to the Center identifying the person to whom you are giving that permission (or arrange for the designated person to bring it in when he/she picks up the child). Your emergency contact will also be required to provide photo identification.

When a child has not been picked up at closing time and no parent/legal guardian/authorized representative’s call has been received, the child will automatically be enrolled in the Extended Care program.

**Hours of Operation**
The full-day program begins at 8:00am and ends at 5:30pm.
The half-day program begins at 8:00am and ends at 4:30pm.

**Extended Care for Part Time Program**
The Extended Care option is available from 12:00pm to 4:30pm and is billed according to the regular program length as follows:
The Extended Care hourly rate will be billed for any child left **fifteen minutes** or longer after the regular scheduled program. Families will incur fines if children are not picked up by 4:30pm. Parent(s) or legal guardian(s) of a child left after 4:30pm will be fined at the posted rate for each 15 minute increment past 4:30pm until the child is signed out. Any part of the fifteen minute increment will be assessed at the full 15 minute rate, meaning there will be a **per child** fee assessed whether you are one minute or 15 minutes
late in each 15 minute increment past 4:30 pm. A notice for Extended Care usage will be included in your monthly tuition billing. All payments are due upon receipt.

**Biting Policy**

In the event of any biting incident it is the Lead Teacher’s responsibility to keep the Administration informed at each level of the process by providing a written “Incident Report.”

1. Whenever a biting incident occurs, it is the Lead Teacher’s responsibility to ensure that all parents in that particular room are immediately informed by placing a written notice on the “sign-in” sheet. The names of the children involved will not be mentioned on this notice.

2. The parents of the children involved will be given written notice regarding the time of the bite, the type of first aid administered, and the type of response given by the teacher to both the child doing the biting and the child receiving the bite in an effort to first promote peaceful solutions.

3. The Lead Teacher will observe the biter to make sure the biting does not escalate. If in fact the biting does escalate, an adult may be asked to “shadow” the child doing the biting and provide some redirection.

4. The biter may be provided with a teething ring of some sort to help the biter focus the biting on the teething ring and not his/her peers.

5. If biting appears to be a pattern, the Director or the Center Coordinator will meet with the parent/legal guardian/authorized representative of the child doing the biting and provide additional input and sharing of available Center and community resources that would include but are not limited to psychological counseling.

6. If the child is a chronic biter then he/she may be asked to stay home for a period of two weeks and then reinstated back in his/her classroom and monitored for a period. Often this time away from the group setting helps the child learn other ways to communicate without all the other distractions associated with a larger group of children.

7. If all other efforts fail, the parent/legal guardian/authorized representative may be asked to have the child relocated to a smaller environment that may better serve his/her special needs. The UCSD Mesa Childhood Education Center staff can help with that relocation if parent/legal guardian/authorized representative requests assistance. Because the Center has a home care provider referral service, assistance can also be given to the parent/legal guardian/authorized representative regarding child care homes that might be close to home or University.

**Car Seats**

California Department of Motor Vehicle (DMV) law requires all children to be secured in an appropriate child passenger restraint (safety seat or booster seat) until they are at least 6 years of age OR at least 60 pounds in weight. Administrative office staff will check that each parent driver is in compliance with current California DMV law and has the appropriate number of safety and/or booster seats installed prior to transporting any of the Center’s children on classroom outings and/or field trips.

**Classroom Outings/Field Trips**

All outings/field trips are required to be pre-approved by the Director or Center Coordinator. Classes are encouraged to take advantage of the beautiful and resourceful UCSD campus through frequent nature
walks, outings to the park, and other UCSD sites. Parents should be given at least 48 hours notice of a planned outing whenever possible. The responsible teacher(s) will leave a detailed written notice on the class “sign-in” documenting the date and time of the outing, and listing the children and adults present.

**TUITION PAYMENT**

This program is available to students, staff, faculty, as well as a small percentage of community families. This program is a self-supporting unit through tuition fees and parent fund-raising efforts. The selection for enrollment is based on a first-come, first-served basis (for UCSD students, staff and faculty); however, priority is given to siblings of children currently enrolled in the Center.

**BILLING PROCEDURES**

Tuition is paid monthly, in advance. Auxiliary and Plant Services – Business and Finance Department, will generate a monthly invoice that is payable upon receipt. The remittance copy of the invoice should accompany payment. It may be mailed to MCDC through Campus Mail Code 0962, dropped in the payment box located in the ECEC Administrative Offices, or given to the Enrollment Coordinator. Tuition increases, when required, are generally effective July 1st of each year. If you have any questions regarding the computation or any other aspect of your bill, please contact the ECEC Administrative Office personnel. They will be more than happy to give prompt response.

♥ **First Invoice** – Tuition is due at the beginning of each month, in advance. If you join the program after the first day of the month, your first invoice will include a pro-rated fee for the first month and the full tuition for the next month. The pro-rated fee is the daily fee (the monthly fee divided by an average of 21 days per month) multiplied by the number of days your child is enrolled that month. This applies to the first and last month of enrollment. If a child transfers from one rate to another in the middle of the month, the monthly fee will be determined by multiplying the daily fee by the number of days the child was enrolled in each rate.

♥ **Late Payment** – All tuition is due upon receipt. If after 30 days the invoice remains unpaid, a delinquency notice will be sent out. The delinquency is allowed 10 days for correction before a notice to terminate services is issued. Should services be denied to a family for an unavoidable reason, the Center will make every effort to handle the situation with as much sensitivity as possible, with special emphasis on the child’s perception of departure.

♥ **Leaving the Program** – When you are preparing to leave the Center, please remember to provide notice of your plans to the Administrative Office. Your last invoice will be determined by multiplying the daily fee by the number of days your child was enrolled in that month. Verbally notifying classroom staff does not constitute as “official withdrawal information.”

Audit Guidelines require that a written 30-DAY NOTICE OF WITHDRAWAL (available from the Administrative Office) be delivered to the MCDC Administrative Office indicating the date the withdrawal is effective. The 30 day notice is required so that Wait List families can be contacted to fill your child’s space as soon as it is vacated, thus avoiding any financial loss to MCDC by having a space remain vacant longer than is necessary.
CHILDREN’S ATTIRE

Children are encouraged to fully participate in all daily activities – most of which are messy. Parents are urged to dress their children in simple, washable play clothes. Shoes or sandals must be worn, please no crocs or flip-flops. Please think about your child’s balancing, jumping, climbing, running, pedaling and/or chasing and choose all footwear accordingly. Children should be dressed appropriately for the weather, wearing sweaters or coats on chilly days. A change of clothing for accidents, and a blanket, each marked with the child’s name are to be provided to the Center. Hats are recommended but not required.

BIRTHDAYS

A child’s birthday is a special occasion for both child and parent. In order to satisfy health and safety regulations, as well as nutritional requirements, the Center does not allow snacks from home, hard candy or gum, to be served to the children.

In addition, activities are planned to make their day special. Teachers help the children create birthday signs, hats, and pictures for their friends. The birthday child is center stage for Circle Time.

Parents are welcome to join the child at the Center for this day (or any day). In the afternoon, parents may contribute to the celebration by having older siblings or friends do a puppet show, bring a favorite book to read to the children, or share the child’s favorite activity or game. Some parents give each child a small treat such as stickers, or pencils, in recognition of the birthday child. Grandparents are also welcome to spend the afternoon with the child at the Center. If the birthday falls at a busy time for the parents, the Center has a number of birthday activities they can organize. This way children will feel that the day has been specifically designed for them.

PARENT PARTICIPATION

Each parent or legal guardian of an enrolled child(ren), as a voting member of The Association of UCSD MCDC Parents, is encouraged to participate in both the Parents’ Advisory Board and Annual meetings. The quality of the UCSD MCDC program is dependent upon positive parental involvement. It is expected that all members contribute both time and effort to the success of the Center. The Center supports and welcomes all forms of parent participation, in the view that close parent-staff communication brings forth understanding which enriches the child’s Center experiences and enables parents to share a large part of their child’s daily world.

Although the various work areas (mentioned in the Program Description) are set up by the teachers it is strongly believed that parental input can greatly enrich the basic program. The Center is extremely fortunate to have families of varying cultural backgrounds and emphasizes the need to continually find ways to expand the basic curriculum in new multi-cultural directions. Parents may contribute by sharing cultural traditions and customs, loaning ethnic materials, recording, or re-writing stories in various languages, etc.

Working parents may contribute by supplying materials (i.e. paper, office supplies, glue, crayons, paint, fabric, etc.) from home that can be used by the teachers to make arts and crafts, or games which enrich the child’s experience at the Center. Additionally, the Center welcomes donations of recycled materials/items that can be used for collage construction. Paints, inks and other writing/drawing supplies should be washable and not permanent. Sharing between staff and parents is encouraged. Parent input is extremely vital to the program and has been instrumental in alerting the staff to new needs. All parents
are encouraged and welcomed into our classrooms. If your child has had a difficult time detaching, please consult the teacher in the classroom before visiting.

**CONFIDENTIALITY OF RECORDS**

All personal information regarding a child or a child’s family is confidential; such information should not be discussed with anyone outside the staff; any discussion about a child or a child’s family should take place in a private setting. The use or disclosure of all information pertaining to the child and his/her family shall be restricted to purposes directly connected with the administration of the program. The contractor shall permit the review of the basic data file by the child’s parent/legal guardian/authorized representative at reasonable times and places upon request.

**HEALTH PROCEDURES**

**Health Records**

A medical examination, prescribed immunization, and completion of a health information sheet are **required** before enrollment can be completed. Immunizations are required according to the current schedule recommended by the U.S. Public Health Services and the American Academy of Pediatrics (www.aap.org). An administrator subscribes to the Center for Disease Control website and receives an alert message when there are updates to the recommended immunization schedule. Our state regulations regarding attendance of children who are not immunized due to religious or medical reasons are followed. Unimmunized children are excluded during outbreaks of vaccine preventable illness as directed by the state health department.

**Illness**

The Center has no provisions for care of ill children. Children who are ill must remain away from the Center until they are well enough to safeguard the health of the other children. Parents are expected to call the Center to indicate that the child will be absent and provide the reason for the absence.

**General Illness at the Center**

Staff members greet children at the beginning of the day, being watchful of their appearance as they enter and throughout the day. Children should report to school in good health and ready to participate in school activities.

If a child is brought to the Center and the Teacher/Director feels that the child is ill, the child will not be admitted. If a child becomes ill during the day, the child’s parent or legal guardian will be contacted and the child must be picked up from the Center. If a parent is unavailable, the authorized representative listed on the Emergency Information Record will be contacted. (Also see Guidelines for Excluding Ill or Infected Children from Group Child Care.)

Young children will sometimes experience falls or sustain “bumps” during the course of a day, especially in the outdoor environment. Usually, these situations are handled with simple comfort, a drink of water, or a sympathetic Band-Aid or ice pack. When a child sustains a cut, bruise, or other injury, staff members will provide first aid care appropriate to the injury or illness treatment according to procedures specified in our pediatric first aid training. A parent, guardian or caregiver will be notified following first aid care. An incident report will be completed by staff. Copies of the incident report are kept in an office file, the child’s file, and given to the family.
Medication/Chronic Illness
All medications, both prescription and non-prescription, need parent or legal guardian/authorized representative and/or physician’s authorization to be administered. The prescription label on the container is considered authorization for prescription medications. The classrooms have a medication log form for the parent/legal guardian/authorized representative to sign authorizing staff to administer the substances. The next required dose and time should be indicated on the authorization together with the full signature of the parent/legal guardian/authorized representative. Dosages should be entered in this medication log.

If it is necessary for a child to continue taking prescription medication following an illness, the Center staff will administer it. A note from the physician must accompany the medication indicating that the child is no longer contagious and is able to participate in the program activities. If a child must be on medication in order to be comfortable and symptom-free, he/she should not be at the Center.

All medications must be in their original prescription labeled containers. Prescriptions are required to have the child’s name and dosage information on the label. Other containers cannot be used. Other family member’s prescriptions cannot be used. Prescription medication for one child cannot be used for a sibling.

Non-prescription drugs (Aspirin and/or Tylenol) need parent/legal guardian/authorized representative’s permission to be administered. This is accomplished by the parent/legal guardian/authorized representative completing the Medication Authorization form found in the child’s enrollment packet. These medications may be administered only to reduce fever until the parent/legal guardian/authorized representative can take the child home.

GUIDELINES FOR EXCLUDING ILL OR INFECTED CHILDREN FROM GROUP CHILD CARE


A facility shall not deny admission to or send home a child because of illness unless one or more of the following conditions exists. The parent/legal guardian/authorized representative should be notified immediately when a child has a sign or symptom requiring exclusion from the facility as described below:

A. The illness prevents the child from PARTICIPATING COMFORTABLY in facility activities as determined by the child care provider;

B. The illness results in a greater need for care than the child care staff can provide without compromising the health and safety of the other children as determined by the child care provider; or

C. The child has any one of the following conditions:
   1. Fever – Oral temperatures above 101°F, rectal temperatures above 102°F, or axillary (armpit) temperatures above 100°F; accompanied by behavior changes or other signs and symptoms of illness until the child is fever free, or un-medicated for 24 hours since center detection of illness.
2. **Symptoms and signs of severe illness** – such as unusual lethargy, uncontrolled coughing, irritability, persistent crying, difficulty breathing, wheezing or other unusual signs until medical evaluation indicates inclusion.

3. **Diarrhea** – that is, loose, frequent bowel movements, until diarrhea stops.

4. **Vomiting illness** – (two or more episodes of vomiting within 24 hours) until vomiting resolves or until healthcare provider determines the illness to be non-communicable, and the child is not in danger of dehydration.

5. **Mouth sores with drooling** – Unless a healthcare provider or health official determines the condition is non-infectious.

6. **Rash with fever** – or behavior change, until a healthcare provider determines that these symptoms do not indicate a communicable disease.

7. **Purulent Conjunctivitis** – (defined as “pink” or “red conjunctiva” with white or yellow discharge) until 24 hours after treatment has been initiated.

8. **Scabies, Head Lice, or other infestation** – until 24 hours after treatment has been initiated and all nits have been removed.

9. **Tuberculosis** – until a healthcare provider or health official states that the child can attend child care.

10. **Impetigo** – until 24 hours after treatment is initiated.

11. **Strep Throat or other streptococcal infection** – until 24 hours after antibiotic treatment and cessation of fever as above.

12. **Chicken Pox** – until 6 days after onset of rash or until all sores have dried and crusted and no new ones have appeared.

13. **Pertussis** – until 5 days of appropriate antibiotic treatment (currently erythromycin which is given for 14 consecutive days), to prevent an infection has been completed.

14. **Mumps** – until 9 days after onset of parotid gland swelling.

15. **Hepatitis A Virus** – until 1 week after onset of illness or as directed by the health department when passive immunoprophylaxis (currently immune serum globulin) has been administered to appropriate staff and children.

16. **Measles** – until 6 days after onset of rash.

17. **Rubella** – until 6 days after onset of rash.

18. **Unspecified respiratory illness** – ill children with the common cold, croup, bronchitis, pneumonia, otitis media (middle ear infection) whose symptoms require special staff attention until symptoms subside.

19. **Shingles** – unless the lesions can be adequately covered by clothing or a dressing, or until a recommendation of the healthcare provider is received.

20. **Herpetic Gingivostomatitis** – Herpes simplex, with uncontrollable secretions.

**Additional General Guidelines**

Any communicable disease identified by the Center for Disease Control (CDC), the American Academy of Pediatrics, or the American Public Health Association as a risk to the population if a child is infected, or has been exposed – Child shall not return to the Center until all requirements for quarantine or voluntary isolation are completed.

**Medical Emergencies**

If a medical emergency occurs the parent/legal guardian/authorized representative will be contacted to pick up the child. In extreme emergencies the child will be taken to Thornton Hospital Emergency Intake and the parent/legal guardian/authorized representative will be contacted as soon as possible.
**Emergency/Evacuation Plan**

If there is an earthquake, fire or other natural disaster, children will be cared for at the Center, or in the field east of the Center (the Center’s evacuation area) by the ECEC staff. Evacuation drills are held on a regular basis. Each classroom is equipped with a 3-day emergency kit. Parent/legal guardian/authorized representative will be contacted by the Center staff and encouraged to pick up their child(ren) as soon as possible. Sign-out procedures will be followed. If another adult is picking up your child(ren) then he/she must have written permission and be prepared to show appropriate identification.

An Emergency Management Plan with basic information and instructions on what to do in case of a disaster is distributed at each parent orientation. Please keep this booklet in a safe, easily accessible place in case of an emergency.

**USDA NONDISCRIMINATION STATEMENT**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. **mail**: U.S. Department of Agriculture  
   Office of the Assistant Secretary for Civil Rights  
   1400 Independence Avenue, SW  
   Washington, D.C. 20250-9410;

2. **fax**: (202) 690-7442; or

3. **email**: program.intake@usda.gov.

This institution is an equal opportunity provider.
APPENDIX

STANDING RULES OF ORDER OF
THE ASSOCIATION OF UNIVERSITY OF CALIFORNIA, SAN DIEGO
EARLY CHILDHOOD EDUCATION CENTER/ MESA CHILD DEVELOPMENT
CENTER PARENTS

Adopted December 3, 2003

ARTICLE I
NAME

Section 1: The name of this organization shall be The Association of University of California, San Diego Early Childhood Education Center and Mesa Child Development Center Parents.

ARTICLE II
PURPOSE

Section 1: The purpose of this organization shall be to support the needs of the University of California, San Diego (UCSD) Early Childhood Education Center (ECEC) and Mesa Child Development Center (MCDC) parents and operations of the University of California, San Diego Early Childhood Education Center.

Section 2: To provide guidelines for parents/legal guardians/authorized representatives’ participation in the Center.

Section 3: To support appropriate efforts of other UCSD organizations that will lead to improvement in the quality of the Center.

ARTICLE III
MEMBERSHIP AND VOTING

Section 1: The membership of this organization is open to all members of the University community.

Section 2: All parents/legal guardians/authorized representatives of children enrolled in the Center are voting members of The Association of UCSD ECEC/MCDC Parents and are subject to all the rights and responsibilities of membership. Each parent/legal guardian/authorized representative shall be authorized one vote.

Section 3: Membership is also open to all parents/legal guardians/authorized representatives whose children are on the waiting list for admission to the Center. Those parents/legal guardians/authorized representatives with children on the waiting list have all the privileges and rights, with the exception of voting.
Section 4: Only members present at the meetings will have the right to vote; proxy voting will not be permitted.

ARTICLE IV
ANNUAL MEETING and PARENTS’ ADVISORY BOARD MEETINGS

Section 1: Attendance at the Annual Meeting is expected by at least one member from each family with children enrolled in the Center.

Section 2: The Annual Meeting will be scheduled in the second half of the Fall quarter, with two weeks’ advance notice provided in writing to enrolled families, with a copy of the notice posted in the Administration Office. Controversial items can be discussed and voted upon at any regularly scheduled Annual or Parents’ Advisory Board meeting as long as the item for discussion and vote is included with the written meeting notice as an agenda item.

The Annual Meeting shall include a group meeting of parents from all classrooms, with specific agenda items to include a general business meeting and selection of at least one parent from each classroom to serve as a member of the Parents’ Advisory Board. At the Fall Meeting the Director will report on the significant events of the preceding year and offer projections, challenges and opportunities for the coming year.

Section 3: Those voting members physically in attendance at the Annual or Parents’ Advisory Board meetings will constitute a quorum, with a simple majority required to conduct business.

ARTICLE V
PARENT PARTICIPATION

Section 1: The quality of the UCSD ECEC/MCDC program is dependent upon active parental involvement.

Section 2: All members are expected to make a contribution of their time and effort to the Center on an annual basis. This contribution may take the form of serving on a committee, participating in fund-raising, attending meetings of the Parents’ Advisory Board, joining a work crew, or providing some other acceptable activity or support.

Section 3: Standing committees may be formed by the voting members of The Association of UCSD ECEC/MCDC Parents for fund-raising and/or for the production of a quarterly parent newsletter. Other committees will be formed for increasing public awareness of the need for high quality child care at UCSD and to otherwise promote the interests of the Center. Committees will coordinate all planning with Center representatives and the Director for all fund-raising and public relations activities.
ARTICLE VI
THE PARENTS’ ADVISORY BOARD

Section 1: A Parents’ Advisory Board (PAB), composed of at least one regular member selected from each classroom, will meet monthly when school is in session, at a time and location generally convenient. Any voting member of The Association of UCSD ECEC/MCDC Parents may offer items for discussion by the PAB, and may attend PAB meetings to take part in discussion and voting. At least one PAB meeting during the year must be devoted to having a speaker on a topic related to child-rearing. Two weeks’ advance notice provided in writing to enrolled families, with a copy of the notice posted in the Administration Office, shall be given for all PAB meetings. Unless a controversial item was included with the notice as an agenda item, voting on such an item will be postponed to a subsequent PAB or Annual Meeting in order that all parents/legal guardians/authorized representatives are notified so they may participate in discussion and vote.

Section 2: Those voting members physically in attendance at the Parents’ Advisory Board meeting constitute a quorum, with a simple majority required to conduct business.

Section 3: Each member of the Parents’ Advisory Board will make themselves available, either by phone or in person, to all other parents/legal guardians/authorized representatives who wish to have their views brought by a member of the Parents’ Advisory Board to either the monthly or Annual meetings.

Section 4: The Parents’ Advisory Board member from each classroom will contact any new parent/legal guardian/authorized representative in their classroom, introduce themselves and welcome them into The Association.

ARTICLE VII
CHANGING THE STANDING RULES OF ORDER

Section 1: New Standing Rules of Order may be adopted, or these Rules may be amended or repealed by a two-thirds majority vote of The Association of the UCSD ECEC/MCDC Parents in attendance.

ARTICLE VIII
MEMBERSHIP CONTRACT

Section 1: All members who have children enrolled in the UCSD ECEC/MCDC will be required to sign a contract of membership at the time of the child’s enrollment in the Center. The contract consists of a statement indicating that the member agrees to abide by the terms of the Standing Rules of Order.
ECEC CHILD CARE OVERSIGHT COMMITTEE CHARGE

Purpose

The purpose of the ECEC/MCDC Child Care Oversight Committee (CCOC) is to provide focus for child care concerns within the UCSD community, facilitate the preservation and expansion of high quality child care facilities and services for UCSD, and advise the Vice Chancellor – Business Affairs in matters concerning the UCSD community and its needs for child care, including:

1. Serve as a source and repository for all information, surveys, studies and policies concerning child care needs of the UCSD community;

2. Serve as the main body for the discussion and formulation of policies to be recommended to the Vice Chancellor – Business Affairs concerning child care issues at UCSD.

3. Provide additional recommendations, as needed, in order to facilitate the preservation and expansion of high quality child care facilities for UCSD.

Membership

1. Voting Members
   Two (2) Faculty Representatives
   One (1) Committee on Faculty Welfare Representative
   One (1) Business Affairs Representative
   One (1) Student Affairs Representative
   One (1) School of Medicine Representative
   One (1) Scripps Institution Representative
   One (1) Committee on Status of Women Representative
   One (1) Women’s Center Representative
   One (1) Graduate Student Representative
   One (1) Undergraduate Student Representative
   One (1) Parents’ Advisory Board Representative

2. Ex Officio
   Director, Early Childhood Education Center
   One (1) Pediatrician
   One (1) Educator
   One (1) UCSD Architect

Selection and Appointments

Committee appointments are made by the Vice-Chancellor – Business Affairs from the following nominations:

1. (2) Faculty Representatives and (1) Committee on Faculty Welfare Representative shall be appointed by the Academic Senate Committee on Committees.

2. (1) Business Affairs Representative, (1) Student Affairs Representative, (1) School of Medicine Representative, and (1) Scripps Institution Representative shall be appointed by respective Vice Chancellors/Director/Dean.
3. (1) Committee on the Status of Women Representative shall be appointed by the Committee on the Status of Women.

4. (1) Women’s Center Representative shall be appointed by the Director – Women’s Center.

5. (1) Graduate Student Representative shall be appointed by the Graduate Student Association.

6. (1) Undergraduate Student Representative shall be appointed by the Associated Students.

7. (1) Parents’ Advisory Board Representative shall be appointed by the Director – ECEC/MCDC from the membership of the Parents’ Advisory Board.

8. (1) Pediatrician shall be nominated by either the Director – ECEC/MCDC or Vice-Chancellor – Business Affairs and shall act as consultant to the ECEC/MCDC for an indefinite term to be determined by the Vice-Chancellor – Business Affairs.

9. (1) Educator shall be nominated by either the Director – ECEC/MCDC or Vice-Chancellor – Business Affairs and shall act as a consultant to the ECEC/MCDC for an indefinite term to be determined by the Vice-Chancellor – Business Affairs.

10. (1) UCSD Architect shall continue to serve in a consulting capacity for an indefinite term to be determined by the Vice-Chancellor – Business Affairs.

Terms of Appointments

All appointed members to the ECEC/MCDC Child Care Oversight Committee will serve a one-year term. Appointed members may be re-appointed for a second one-year term if re-nominated. Ex-officio members will serve for terms of indefinite duration. There will be no limit to the number of years a consultant can serve on the ECEC/MCDC Child Care Oversight Committee. Representative membership and term of office is determined by the Vice-Chancellor – Business Affairs and can be modified at his/her discretion.

Meetings

An appointed UCSD staff affiliate will serve as the Chairperson for these meetings and will convene a meeting of the ECEC/MCDC Child Care Oversight Committee no less than semi-annually. All meetings will be open to the public. Minutes of these meetings and recommendations to the Vice-Chancellor – Business Affairs will be distributed to members of the Committee and available to the public at the ECEC/MCDC Director’s Office. The Chairperson will advise Committee members of the status of actions taken in response to the recommendations.
DESCRIPTION OF VARIOUS CHILDCARE PROGRAM COMPONENTS

The following are descriptions of the various advisory boards and committees that are involved with the Mesa Child Development Center program.

Parents’ Advisory Board – A component in the State Department of Education’s contract which allows parent participation in program quality control as it relates to the program philosophy’s goals and objectives and adhering to the funding terms and conditions.

ECEC/MCDC Child Care Oversight Committee – Another component of the State Department of Education’s contract that solicits the expertise of various professionals (Pediatrician, Educator, Architect) in matters relating to program policies.

Building Advisory Committee (BAC) – For facility expansion, specially appointed to deal with all aspects of the facility expansion from planning to completion.

Early Childhood Environment Rating Scale - Revised (ECERS-R) – (1998) is the quality control instrument currently used by the State to maintain and improve the quality of state funded preschool programs. Designed for use in preschool, kindergarten, and child care classrooms serving children 2-1/2 through 5 years of age, the ECERS-R is used by program directors for supervision and program improvement, by teaching staff for self-assessment, by agency staff for monitoring, and in teacher training programs. The established reliability and validity of the scale make it particularly useful for research and program evaluation.

UCSD Friends of Daycare – A fund-raising group composed completely of Center parents interested in organizing methods of raising additional revenue to be used for program needs. They have a private/non-campus account at the Credit Union that is not handled by the UCSD accounting department. Designated individuals in the group have signature authority and UC auditors have recently mandated that this group keep the Center Administration abreast of their activities since they use the Center’s title for fund-raising purposes and seek guidance from the Center’s Administration when necessary. The Center’s personnel are not, however, to assume any of the responsibilities involved in the fund-raising events or collection of funds.