



Tobacco and Drug-Free Policy

Smoking or drug use is not permitted in any area of this facility at any time. Tobacco/drug use is prohibited when transporting children in vehicles for the childcare and preschool activities. It is a state law that smoking is prohibited a minimum of 50 feet from any entrance into the building.

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____



TO: PARENTS OF PRIDE ACADEMY

RE: Disciplinary Model Notification

Effective immediately, we have implemented our disciplinary model which consists of the following:

- “Peace Table” – the “peace table” instills conflict resolution with our children. If your child is in a disagreement with another student, the children will go to the ‘peace’ table and learn to resolve the issue. If the issue is not resolved within 2-3 minutes, the teacher will help the children to understand the importance of sportsmanship, personal space and respecting their classmates.
- “Stop Sign” Reward System – the “Stop Sign” will consist of green, red and yellow lights. Each child will be given a color for the day (i.e., green, yellow, red).
 - Green = great day
 - Yellow = caution and spoke to about behavior on three separate occasions.
 - Red = disruptive and interrupted class more than three times on one day.

At the end of each week, every student that has all “Green” buttons on the rewards calendar will receive a prize out of the treasure box.

- “Parent Contact” – each week, we strive to provide an array of opportunities for our children. If a teacher speaks to our children more than three times in one day, a parent will be contacted. If the problem persists for two consecutive days, the child will be expelled for one day from Pride Academy.

We are striving to be #1 in teaching, loving, nurturing and empowering our children. Please help us to be an even greater blessing to the children of Pride Academy.

If you have any questions, please contact me at 317.375.1553 or 317.373.5183 or see me at your earliest convenience.

Sincerely,

PRIDE ACADEMY

Parent Signature

Date

Child(ren’s) Name(s)

Date

Child(ren’s) Name(s)

Date

Parent Directive for Infant Sleep Position

Pride Academy recommends back sleeping for babies. Pride Academy must place an infant in a crib to sleep, directly on a firm mattress, and must position the infant on his/her back for sleep unless the provider has a signed directive from a parent or legal guardian for an alternate sleep position. Car seats, swings, couches, the floor on a blanket, etc. are not acceptable as an alternative sleep position.

Pride Academy uses a fitted crib sheet that fits tightly on the mattress and overlaps the mattress so it cannot be dislodged by pulling on the corner of the sheet, and Pride Academy must use only cribs that meet specific crib requirements specified in statute and must check cribs monthly to assure they are safe. These requirements apply to license holders serving infants up to and including 12 months of age.

Because babies sleep safest on their backs.

One of the easiest ways to lower a baby's risk of Sudden Infant Death Syndrome (SIDS) is to put him or her on the back to sleep for naps and at night. Since the recommendation to place a baby on his/her back for sleep began, the SIDS rate in the United States has dropped by more than 50 percent. Placing babies on their back to sleep is the No. 1 way to reduce the risk of SIDS.

The following are recommended for Safe Sleep for Your Baby:

1. Your baby should always be put on his or her back to sleep, for naps and at night. The back sleep position is safest and every sleep time counts.
 2. Your baby should be put to sleep on a firm sleep surface, such as on a safety-approved crib mattress, covered by a fitted sheet. Never place a baby to sleep on a pillow, quilts, sheepskins or other soft surfaces.
 3. Keep soft objects, toys and loose bedding out of the baby's sleep area. Don't use pillows, blankets, quilts, sheepskins and pillowlike crib bumpers in baby's sleep area, and keep any other items away from baby's face.
- By signing this form I am acknowledging that I have read the above information regarding Pride Academy's recommendations for sleeping babies,
 - By signing this form I am acknowledging that I am aware that placing a baby on her/his back for sleep has been recommended by health experts to be the safest way to place baby for sleep.
 - By signing this form I am acknowledging that I am aware that since the recommendation to place babies on their back for sleep began, the SIDS rate in the United States has dropped by more than 50 percent.
 - By signing this form I am acknowledging that I am aware that placing a baby on the tummy, or other alternate position other than on the back for sleep, places the baby at greater risk for dying from Sudden Infant Death Syndrome (SIDS).

Parent Directive for Alternative Infant Sleep Position

By signing this form I am acknowledging that I have read the information on Page 1 about Safe Sleep for Your Baby and that I am directing my provider to always place my baby in an approved crib and to always:

Place my baby on his/her tummy for sleep periods; OR

(not recommended)

Place my baby in another alternate position for sleep periods.

(not recommended)

(List alternate position). _____

Parent Signature: _____

Child(ren)s Names: _____





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SERIOUS ILLNESS NOTIFICATION

If your child has any of the following, they are not able to return until the specified timeframe:

- A. The illness prevents the child from participating comfortably in facility activities;
- B. The illness results in a greater care need than the child care staff can provide without compromising the health and safety of the other children; or
- C. The child has any of the following conditions:
 1. **Temperature:** Oral temperature of 101° or greater; rectal temperature of 102° or greater; axillary (armpit) temperature of 100° or greater; accompanied by behavior changes or other signs and symptoms of illness until medical evaluation indicates inclusion.
 2. **Symptoms and signs of severe illness** such as unusual lethargy, uncontrolled coughing, irritability, persistent crying, difficult breathing, wheezing or other unusual signs until medical evaluation indicates inclusion.
 3. **Uncontrolled diarrhea**, that is, increased number of stools, increased liquid, or decreased form that is not contained in the diaper, until diarrhea stops.
 4. **Vomiting illness** (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health provider determines the illness to be non-communicable, and the child is not in danger of dehydration.
 5. **Mouth sores with drooling** unless a health care provider or health official determines the condition is noninfectious.
 6. **Rash with fever or behavior change**, until a health care 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.
 9. **Tuberculosis**, until a health care provider or health official states that the child can attend child care.
 10. **Impetigo**, until 24 hours after treatment has been initiated.
 11. **Strep throat or other streptococcal infection**, until 24 hours after antibiotic treatment of fever.
 12. **Chicken pox**, until six days after the onset of rash or until all of the scabs have dried and crusted.
 13. **Pertussis**, until 5 days of appropriate antibiotic treatment.
 14. **Mumps**, until 9 days after the onset of parotid gland swelling.
 15. **Hepatitis A virus**, until 1 week after the onset of illness or as directed by the health department when passive immunoprophylaxis (currently immune serum globulin) has been administered to the appropriate children and staff.
 16. **Measles**, until 6 days after onset of rash.
 17. **Rubella**, until 6 days after onset of rash.
 18. **Unspecified respiratory illness**, severely ill children with the common cold, croup, bronchitis, pneumonia, otitis media (ear infection).
 19. **Shingles**, unless the lesions can be adequately covered by clothing or a dressing, until the recommendation of a health care provider.
 20. **Herpetic gingivostomatitis**, Herpes simplex, for children who cannot control their secretions.

Parent Signature

Date

Child(ren's) Name(s)

Date

Child(ren's) Name(s)

Date

Child(ren's) Name(s)

Date



Pride Academy

“EMERGENCY PLAN”

POLICIES AND PROCEDURES

- All parents will be notified immediately in the event of illness of a staff member(s) that may be contagious to others, or any emergency that prevents children from being cared for in the facility.
- Our back-up plan for care that the facility has arranged in the event of an emergency is that all children will be relocated to Pride Academy’s west or east location.
- The parent must have a back-up plan for care in place, in the event of their child’s illness or the facility’s inability to care for children. (reference – “Registration form and Child Information form”)
- Exclusion policies pertaining to a child’s health. (reference – “Serious Illness Policy and Reducing SIDS in the Childcare”)
- Alternative contacts and medical care authorization available in case parents can not be reached in the event of an emergency. (reference – “Child Information form” in each classroom).
- A list, provided by the parent(s), or people authorized to pick up a child. (reference – “Child Information form” in student file).
- A plan for fire evacuation or any other type of evacuation. (reference – each room’s evacuation plan).
- A plan for safe shelter during a tornado warning or any other threatening weather emergency. (reference – “Evacuation plan”).

Parent Signature _____

Director Signature _____

Witness _____

Date _____