

PLYMOUTH HOUSE
NURSERY SCHOOL



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Health Care Policy

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Injury Prevention and First Aid

Injury Prevention Plan

All staff shall observe their classroom and playground at all times for any hazards which may cause injury. We do not permit smoking on the grounds or in the school. We shall keep all toxic substances out of the reach of children and locked in a separate closet. We do not take any field trips.

If a child is injured and requires first aid or medical attention, an injury report form will be filled out providing information about the child or children involved, the date, time and location of the incident, and how it occurred. It will also indicate steps taken to prevent this injury or incident in the future. The names of staff who administered first aid or medical care will also be included. In addition, the incident will be recorded in a school-wide central log, which shall be monitored periodically to recognize patterns and identify any problem areas.

First Aid

All educators are certified in First Aid and CPR. There is one fully maintained First Aid Kit in the Center located in the hall closet. All staff members will be trained during the orientation period as to where the First Aid kits are located and how to use the contents. A Health Care Policy is located in the hall closet as well. All First Aid will be administered by a First Aid certified staff member. These First Aid kits will include all of the following items: Adhesive tape, band-aids, gauze pads, gauze roller bandage, disposable non-latex gloves, instant cold pack, scissors, tweezers and thermometer. There are smaller kits in each classroom that contain band-aids, gauze pads and disposable non-latex gloves. All kits shall be checked on a monthly basis.

Emergency Procedures and Evacuation

Transportation Plan

Plymouth House Nursery School does not provide any transportation. A Transportation and Authorization Form should be filled out by families for each child attending PHNS. These forms state the pick-up and drop-off arrangements for your child. Your child will be released ONLY to a parent/guardian or to those people you have indicated on your authorized pick-up list. In addition to them being on your authorized list, we need advance written notice of drop-off or pick-up changes.

If your child will be picked up by an unauthorized individual, we require notification *in writing*. A phone call will not be accepted. Adults authorized by you on a particular day who are unfamiliar to the staff should have a picture I.D. with them and stop at the Office for verification. If there is no one in the Office, this identification should be presented to your child's classroom teacher.

Transportation in the Event of an Emergency

In case of medical emergencies, the child or children will be driven to the hospital in an ambulance. The child will be transported with all required medical and emergency information including the contact and phone numbers for parents/guardians. Families will be notified immediately of the emergency; however, we will not wait to transport if a parent/guardian has not arrived by the time the ambulance is ready to leave. The Director will accompany the child or children in the ambulance. In the event the Director is not available, one of the child's educators will accompany. A parent/guardian is required to meet the child and Director/educator at the medical facility.

Medical Emergency Procedures

In the event of a medical emergency, we will take the following steps:

1. First Aid certified teachers will apply necessary First Aid.
2. Ambulance will be called.
3. Parents will be called. If parents cannot be reached, we will contact the emergency contact(s) and the child's doctor. *We will not wait to transport a child if a parent/guardian has not arrived by the time the ambulance is ready to leave.*
4. Director will accompany child to the hospital, bringing the child's file. In the event the Director is not available, one of the child's educators will accompany. A parent/guardian is required to meet the child and the Director/educator at the medical facility.
5. Teachers will complete and ask parents to sign an Accident Report, a copy of which will be added to the child's file.
6. Director will inform Department of Early Education and Care of the incident.

On occasion, it may be necessary for a child to be seen by a doctor, but not necessarily transported in an ambulance. If a parent is unable to pick up their child at that time, they must approve, in writing, an alternative method of transportation.

Emergency Evacuation Plans

School Emergency Evacuation Plan

In case of an emergency whereby the school must be evacuated, the following procedures will be adhered to:

Room 1 –

Exit 1: All children shall exit the room and follow the hallway, turn left and exit through the main doors. Meet in grassy area between the school and the church.

Exit 2: All children shall go through the exit into Room 2, continue to Room 3, and exit out the rear door. Meet in grassy area between the school and the church.

Room 2 –

Exit 1: All children shall exit the room and follow the hallway, turn right and exit through the main doors. Meet in grassy area between the school and the church.

Exit 2: All children shall go through the exit into Room 3, and exit out the rear door. Meet in grassy area between the school and the church.

Exit 3: All children shall go through the exit into Room 1, then exit Room 1, turn left and exit through the playground doors. Meet at far corner of playground.

Room 3 –

Exit 1: All children shall exit the room through the rear classroom door and follow the sidewalk to the grassy area between the school and the church.

Exit 2: All children shall exit through the classroom door, proceed down the hallway, turn right and exit through the main doors. Meet in grassy area between the school and the church.

Room 4 –

Exit 1: All children shall exit the room through the rear classroom door and follow the sidewalk to the grassy area between the school and the church.

Exit 2: All children shall exit through the classroom door, proceed down hallway, turn right and exit through the main doors. Meet in grassy area between the school and the church.

Classroom teachers shall take attendance information with them during an evacuation. We will check attendance outside the building and again upon returning to the building.

The Director shall hold evacuation drills monthly. They will be held on two consecutive days so as to include all children. The times and dates will be noted in the evacuation log book.

Transportation in the Event of an Area Evacuation

If an emergency mandates immediate evacuation per order by the State (flood, hurricane, tornado, war), the City of Framingham will supply a bus and transport everyone to Brophy Elementary School. Parents will be contacted from that location.

Emergency Evacuation Bag

In all emergency situations, PHNS will possess an Emergency Evacuation Bag which contains emergency information for all children, a first aid kit, a limited amount of food, water, and some age-appropriate materials for children in the case of a long wait. Teachers and Director will be sure to comfort the children, give explanations according to ability to understand, and remain calm.

Contingency Plans for Emergency Situations

Natural Disaster or Hazardous Situation

In case of a natural disaster or hazardous situation, such as severe weather, snow and ice storms, tornado, hurricane, earthquake or flooding, chemical illness, bomb threat, etc., the Director will immediately contact the Fire and Police Departments and follow their safety instructions.

If we Evacuate, we will:

1. Follow the same procedure as a Fire Drill.
2. We will bring the children to the Plymouth Church or across Edgell Rd. to the Unitarian Church.
3. We will bring our evacuation bag and the Emergency Evacuation binder containing important information on all children.

If we will Shelter in Place, we will:

1. The Director or person in charge will inform educators where to shelter in place in the building.
2. We will comply with any regulations and directives from the Board of Health, Fire Department, Police Department, Building Inspector, or any other emergency agencies.

Loss of Utilities

In case of a power outage, we will try to ascertain the length of the outage by contacting the Plymouth Church office and a decision will be made whether to remain open. If power cannot be restored in a reasonable amount of time, parents will be contacted to pick up their children. A cellular phone will be available in case of loss of phone lines. The fuse box for the school is located near the doors to the playground, and a second fuse box is located downstairs in the boiler room.

In case of loss of heat, we will attempt to ascertain how long the heat will not function by contacting the Plymouth Church office and a decision will be made whether to remain open. If heat and/or hot water minimum temperature cannot be reached and maintained within a reasonable amount of time, parents will be contacted to pick up their children. School opening may also be delayed if the Director is informed of any outages the night before. The Director keeps class lists at home for the purpose of contacting parents of emergency closings or delays by email and ProCare.

In case of loss of water, we will attempt to ascertain how long running water will be unavailable by contacting the Plymouth Church office and a decision will be made whether to remain open. If the water will not be available for an extended amount of time, parents will be contacted, and the center will be closed.

Missing Child

If a child is discovered missing, one of the educators will immediately inform the Director, and a search of the building will immediately begin, followed by a search of the school grounds. The family will be called to inform them and make sure the child has not been picked up. If the child is not in the center or with a parent/guardian, the Director will call the police or proper authorities and follow their directions as to find the child.

Health Care Procedures

Disinfectant Solution

Plymouth House Nursery School sanitizes and disinfects toys, dishes, surfaces, bathrooms and bodily fluids.

All equipment, items or surfaces will be washed with soap and water and disinfected using 1 part soap to 3 parts water. We shall use a commercially prepared disinfectant that has been registered as a sanitizing solution by the Environmental Protection Agency (EPA) for disinfecting.

Infection Control

All educators are required to wear disposable gloves which are provided by the center to be used for the clean-up of blood or bodily fluids. The affected area shall be disinfected, and used gloves shall be properly disposed of in a lined, covered container. Any contaminated clothing will be placed in a plastic bag, labeled and returned to the parent at the end of the day. All cleaning supplies shall be kept in a locked closet out of the reach of children. All staff shall be trained at staff orientation on the procedures of infection control and sanitation.

The following are reiterated and used for infection control:

- Give children enough space. Crowding leads to the spread of infection. The state requires at least 35 square feet of indoor floor space per child.
- Fresh air is important. Even in very cold weather, the windows and doors should be opened at least once a day and the center thoroughly aired out, when the children are not present. Children should be brought outside at least once a day, if possible, for fresh air.
- Hand washing is very critical. Use germ-free running water. Do not use basins for hand washing for germs will easily move from one child to another. Liquid soap is recommended. Use individual paper towels for drying. Do not share towels. All children and adult hands should be washed:
 - o Before and after eating or handling food
 - o After toileting / changing diapers
 - o After handling body secretions or using a tissue
 - o After cleaning or handling trash or cleaning products
 - o Before and after water play
 - o After playing in the dirt or sand outdoors
 - o Before and after administration of medication (adults)
- The licensee shall ensure that the following specified equipment, items or surfaces are cleaned with disinfectant solution, and/or soap when appropriate, after each use:
 - o Diapering surfaces
 - o Toys mouthed by toddlers
 - o Mops used for cleaning bodily fluids
 - o Thermometers
 - o Water tables and water play equipment
 - o Eating surfaces before and after each use
- The licensee shall ensure that the following specified equipment, items or surfaces are cleaned with disinfectant solution, and/or soap when appropriate, daily:
 - o Toilets and toilet seats

- Diaper pails, including lids
- Sinks and faucets
- Water table and water play equipment
- Play tables
- Smooth surfaced, non-porous floors
- Mops used for cleaning
- Washcloths and towels
- The licensee shall ensure that the following specified equipment, items or surfaces are cleaned at least weekly, or more frequently as needed to maintain cleanliness, when wet or soiled, and before use by another child:
 - Cribs, cots, mats or other sleeping equipment
 - Sheets, blankets or other coverings
 - Machine washable fabric toys
 - Clothes used for dramatic play
- Each child must have his/her own blanket. Mats that are used by more than one child should be disinfected after each use.
- Keep children as clean and dry as possible. Examples include:
 - Change diapers and soiled clothing promptly
 - Wipe wet noses, eyes, and hands with paper tissues, wearing gloves and washing your hands after
 - If a child gets a scrape, cut, insect bite, or scratch, wash it well with soap and water and cover it lightly

Plan for Toileting and Diapering

Toilet training will be based on children's individual emotional and physical abilities, and in accordance with the requests of their parents. Toilet training is not an eligibility requirement for enrollment. Though we hope that all of our students are potty trained when beginning school, we will work with your child towards succeeding in their independence.

Toileting

Toileting will occur at regularly scheduled intervals and children will also be encouraged to use the toilet as needed. Accidents do happen and will be treated with sensitivity. Children will be assisted in cleaning themselves and changing clothes. Soiled garments will be placed in plastic bags and sent home for cleaning. Parents are requested to ensure there is a replacement set of extra clothing available for the next day. Proper sanitary techniques and hand washing are taught to the children and practiced during toileting.

Diapering

All children will be kept clean and dry through regular diaper changes throughout the day. A changing table, disposable gloves, water and paper towels will be provided and used in our diapering procedures. Disposable diapers will be provided by parents. Wipes will be provided by the school, unless you would like a specific brand for your child. Soiled or wet diapers will be disposed of in a separate covered container labeled for diapers.

Educators will follow the procedures below for diapering at PHNS:

1. Place disposable changing paper on changing table or mat
2. Put on disposable gloves
3. Place child on changing table or mat, keeping one hand on the child when diapering on an elevated surface
4. Remove soiled diaper

5. Put soiled diaper in diaper pail
6. Clean child thoroughly with disposable wipes
7. Diaper child with new diaper
8. Throw away changing paper
9. Throw away gloves
10. Remove child from changing table or mat
11. Wash changing table or mat with soap and water
12. Disinfect changing table or mat with disinfectant
13. Wash educators' and children's hands

Administration of Medication

Plymouth House Nursery School can administer medication to children with written consent from a parent or guardian. To administer prescription medication, the following conditions must be met:

- A written doctor's authorization or prescription for the medication
- A written, dated note from parents providing permission to dispense the medication and specifying the medication, its dosage and frequency, what symptoms warrant giving the medication, as well as its potential side effects, if any
- All prescription medication must be in the original packaging with a current prescription label with the child's name, the doctor's name, the purpose of the medication, the dosage, and an expiration date
- **PHNS staff are not allowed to administer the first dosage of any medication**

We will not administer any medication contrary to the prescription unless a written order or a Plan of Action is given by the child's physician. All medication will be kept in a safe location out of reach of the children.

If a child must take medicine during school hours, an Authorization for Medication form must be filled out and signed by the child's parent or guardian. The medication should be left in the Director's office or placed in the refrigerator in the original packaging. Under no circumstances can medications be left in the child's belongings. The medicine will be given at the appropriate time by a teacher or the Director, and each dose will be noted on the authorization form including the time, date, dosage and signature of the person administering the medication. The form will be placed in the child's file when the child no longer requires the medication. If a child is prescribed medication for longer than one week, a new form is required at the start of each week. All unused medication shall be properly disposed of or returned to the parent or guardian when no longer needed.

Topical medications (i.e., diaper creams and sunscreens) in original containers with expiration dates within one year may be administered to children provided written parental authorization has been received.

Individualized Health Care Plans

Whenever a child has been diagnosed by a licensed health care practitioner with a chronic medical condition, parents must provide PHNS with a written plan that describes the nature of the condition, symptoms, any medical treatment that may be necessary while the child is in PHNS's care, the potential side effects of that treatment, and the potential consequences to the child's health if the treatment is not administered.

With written parental consent and licensed health care practitioner authorization, teachers may administer routine, scheduled medication or treatment to the child with a chronic medical condition. The teacher must successfully complete training given by the child's health care practitioner or with his/her written consent, given by the child's parent or program's health care consultant, that specifically addresses the child's medical condition, medication, and other treatment needs. Whenever an individual health care plan provides for a child to carry his or her own medication, parent(s) must provide, on site, a back-up supply of the medication as needed.

Allergies

Upon enrollment in our program, parents shall fill out a medical history form indicating if your child has allergies or a chronic illness. Our staff is extremely sensitive to children's allergies and food preferences. If any child has an allergy or food preference, the information will be confidentially posted in each classroom and in the main office. Allergies or chronic illnesses require an Individualized Health Plan (IHP). This plan describes the condition, its symptoms, any medical treatment that may be necessary while the child is in care, the potential side effects of that treatment and the potential consequences to the child's health if the treatment is not administered. All medications related to an allergy are required to be on-site; we cannot provide care to a child without necessary life-saving medications.

Health Care Policies

Health Care Policies

Our policy is preventative health care. This policy, along with your cooperation, can minimize the spread of illness among children. We encourage you to give your child time to rest and recuperate so that he/she may regain resistance to other illnesses.

Health Requirements

A physical examination and immunization record from your child's physician is required at enrollment and must be updated annually. When your child has their physical, please bring a copy of the updated form to the office. We also require lead screening. Pursuant to the Department of Public Health regulations, all children, regardless of risk, shall be screened for lead poisoning at least once between the ages of 9 and 12 months, and annually thereafter until the age of 4.

Tooth Brushing

All children who are in our care for more than four hours are offered supervised tooth brushing in accordance with 606 CMR 7.11(11)(d). If you need your child to brush his/her teeth while attending PHNS, please bring in a tooth brush labeled with your child's name. If you do not need your child to brush their teeth at PHNS, a tooth brushing waiver will be signed and added to your child's file.

Illness

Teachers will continually observe the children in their care for signs of illness.

If, upon arrival, any of the following symptoms of illness are noted, you will be requested to take your child home:

- Temperature of 100 or higher
- Conjunctivitis (inflammation of eyes)
- Rash indicative of Measles, Roseola, etc.
- Signs of severe cold or sore throat
- Wheezing
- Severe vomiting or diarrhea

If any of these symptoms develop during school hours, we will call you to pick up your child. During the time that it takes you to arrive at the school, your child will be isolated away from the other children in the Director's office. Parents should make a concerted effort to arrive at the school promptly after being notified that their child is sick.

Care for Mildly Ill Children

If a child becomes ill during the time they are in our care we shall bring the child to the office away from other children in a quiet, supervised space. We will provide a mat for resting and offer something to drink and eat, when appropriate. The child will be offered toys and books until a parent or guardian arrives. The staff person that is in charge of the child shall be trained in CPR and first aid, which includes knowledge of recognition of symptoms, proper documentation of illness or injuries, and proper steps to take a child's temperature.

Returning to School After an Illness

When your child has experienced any of the above symptoms within the previous 24-hour period, you will be expected to make other child care arrangements for the comfort of your child and the health of the other families and staff who are at the Center. The Center is not licensed for the care of ill children. All contagious diseases **MUST** be reported immediately, even if occurring on a child's "home day," so that parents may be notified.

Your child may return to school under the following conditions:

- **Fever** – Fever-free for 24 hours, without the use of fever-reducing medications
- **Vomiting / Diarrhea** – 24 hours from time of last incident
- **Antibiotics** – 24 hours after first administration of medication

Your child may return to school under the following conditions, **only with a physician's release**:

- After the symptoms of impetigo, contagious rashes or parasitic disease have completely cleared
- After the period of contagion is over for the following diseases (not an exhaustive list):
 - **Chicken Pox** – All spots have cleared
 - **Measles** – Five days after rash begins
 - **German Measles** – After rash disappears
 - **Hepatitis** – Three weeks after onset of jaundice
 - **Mumps** – Nine days after onset of swelling
 - **Lice & Scabies** – After treatment is complete, no nits policy

In the event that your child is taking medication at home that is not required to be given at the school, the teacher and/or Director still must be made aware. Children can have reactions to medication that alter their behavior and routine.

Management of Infectious Disease

Plymouth House Nursery School shall not allow any child to attend school if they have a contagious disease, serious illness, or a reportable disease. If a child enters the building and is later determined to have a communicable disease, all families within the school shall be notified by either telephone or a written notice. Our health care consultant will be informed, and we will follow his or her instructions as to the steps to ensure that other students are not infected and that the center is free of communicable disease.

If a staff member believes that a child may possibly have an infectious disease, the child shall be brought to the office and kept isolated from other children until the child's parent or guardian picks them up. The child may not return to the Center until a physician has given them a clean bill of health.

COVID-19

Coronavirus Disease 2019 (COVID-19) is a respiratory disease caused by the SARS-CoV-2 virus. The rapid spread of COVID-19 has been classified as a global pandemic. PHNS will develop policies related to COVID-19 management at the start of each school year and will reevaluate should there be any changes to guidance from the Massachusetts Department of Early Education and Care. Given the nature of the COVID-19 pandemic, we are unable to guarantee an environment free from COVID-19 or any other virus or disease. Please see Page 15 for the COVID-19 Addendum for the 2023-2024 school year.

Prevention of Abuse and Neglect

Child Protection Mandate

Plymouth House Nursery School staff shall protect all children in their care from abuse or neglect while in our care and custody. All staff are mandated reporters and shall report suspected child abuse or neglect to the Department of Children and Families in the form of a 51A. The Director shall inform the Department of Early Education and Care (DEEC) immediately after filing a report or learning that a 51A has been filed, alleging abuse or neglect of a child while in the care of Plymouth House Nursery School.

Plymouth House Nursery School shall cooperate in all investigations of abuse and neglect, including identifying parents of children currently or previously enrolled in the program, providing consent for disclosure to the DEEC of information from, and allowing the DEEC to disclose information to, any person and/or agency the DEEC may specify as necessary to prompt investigation of allegations and protection of children. Failure to cooperate may be grounds for suspension, revocation, or refusal to issue or renew a license.

The Plymouth House Nursery School shall document any concerns that we may have with any staff member addressing any suspected incident of child abuse or neglect, which includes, but is not limited to, ensuring that the allegedly abusive or neglectful staff member does not work directly with children until the Department of Children and Families has completed an investigation and for such further time as the Department of Early Education and Care requires.

COVID-19 Addendum

COVID-19 Policies for 2023-2024

PHNS will follow all policies based on the guidance from the Department of Early Education and Care, in consultation with CDC, DPH and DESE. As COVID-19 information can evolve and change, we will always refer to the most recent guidance. If Plymouth House Nursery School and/or the local community should find themselves with a heightened number of cases or greatly increased risk, we reserve the right to increase our policies for a period of time.

Vaccination

Vaccination is now available for children 6 months and older. We are not requiring vaccination, however if you do choose to vaccinate your child, please send a copy of your child's vaccination records to be kept in their file in the Office, as we do with all immunizations.

Masks

We are mask-optional for all children and staff (please see the exception below for returning after a positive test). All choices will be respected and supported. If you would like your child to wear a mask, please send them in the morning wearing one. If your child arrives to school wearing a mask, we will continue to encourage mask usage during the day. We do not have any children wear masks while eating, drinking, resting/napping, or while playing outside. Each classroom has individual mask storage pockets to be used during these times.

COVID-19 Exposure

It is no longer recommended for schools to engage in contact tracing or test-to-stay testing. If there is a COVID-19 positive exposure within school, we will send home a notification to families. This will be informational and no action will need to be taken due to exposure. No asymptomatic individual should be excluded from school as a result of a single exposure, regardless of vaccination status or exposure setting. We consider household exposures on a case-by-case basis and guidance will be given based on isolation factors.

Symptomatic Testing

Any child or staff member who exhibits ANY symptoms of COVID-19 will be required to take an at-home rapid antigen test prior to attending school, and on each day that their symptoms continue. Children can attend school if the test is negative, and if symptoms are mild. If the symptoms include fever, shortness of breath, or vomiting/diarrhea, these are considered exclusionary symptoms and your child should stay home and follow our health care policies. There are rapid antigen tests available, until our supply is gone.

Positive Test

If a child or staff member tests positive for COVID-19, a strict 5-day quarantine is required. Day 0 is considered the first day of clear symptoms or the date of the positive test, whichever comes first. If they are asymptomatic or symptoms are resolving and they have been fever free without the use of fever-reducing medicine for 24 hours, they may return to school on Day 6, provided that a mask is worn through Day 10. If you would prefer that your child does not mask, they will be able to return on Day 11 with no mask.

Disclaimer

This document has been reviewed as of 6/2023, and we reserve the right to update and revise (such as in the scenarios of testing and mask usage). Any revisions will be communicated.