

FOR YOUTH DEVELOPMENT FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

# BRIGHTER FUTURES START HERE

CANTON SCHOOL AGE CARE Parent Handbook

Canton Family YMCA 1325 E. Ash Canton, IL 61520

## HEPA AND THE YMCA

The Canton Family YMCA has implemented a series of Healthy Eating Physical Activity (HEPA) Standards in our afterschool program as part of the Y's National commitment to combat childhood obesity and ensure that all those who participate in YMCA programs live a healthier, balanced life.

#### The New HEPA Standards:

#### PHYSICAL ACTIVITY

Staff will lead and participate in physical activities ensuring all children in our after school program participate in a minimum of 30 minutes of moderate to vigorous play daily, that increases your heart rate and makes you breathe harder and promotes bone and muscle strengthening and 60 minutes during all day programs. Examples: Dancing, Relay Races, Jump Rope, Hopscotch, Jogging, and Walking. Children will play outdoors every day weather permitting.

#### SCREEN TIME

Screen time is limited to usage for our Child Care Program.

#### SNACKS, MEALS AND BEVERAGES

Snacks will be served with children learning about appropriate portions with help from staff. Sugar sweetened beverages or fried foods are not allowed to be consumed at all in the program by children or staff. Water will be available and accessible for the children at all times.

All foods meet USDA Guidelines.

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#### PARENT ENGAGEMENT

Staff will educate parents and caregivers on nutrition and physical activity through informational materials, newsletters, and social media.





The Y's School Age Child Care provides a safe, nurturing, active, fun environment for kids in **Kindergarten - 6th Grade**.

Children participate in a balanced program of open play and structured activities, while being supervised by well trained & caring staff who teach, model & reinforce the values of Caring, Respect, Responsibility & Honesty. Our staff members will provide assistance in daily e-learning activities and provide homework assistance, and lead students in extra enrichment activities in math and reading, STEM, arts & crafts and technology to give children what they need to succeed at school.

#### Hours

Mon. - Fri. After School until 6 p.m.

Children must be picked up by 6 p.m.

If you do not pick up your child by 6 p.m., staff will try calling you or the emergency numbers you have listed on your child's enrollment form. If contacted your child may be released to those listed on your emergency list. A latefee of \$5.00 for every 10 minutes past the site's closing will be charged to your account.

#### Registration

The attached registration form must be completed and returned to the YMCA along with the non-refundable registration fee and completed bank draft form. Your child may not attend until fees are paid and registration forms are turned in.

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Firearms are prohibited on our premises. "No Firearms" signs are posted at the main entrance.

#### **Attendance & Absenteeism**

For your child's safety and accountability we must know when they are attending and when they will be absent.

#### Children's weekly attendance must be pre-registered and paid in advance to reserve their spot.

**If your child is absent for any reason,** please call the YMCA, 647-1616.

Children must sign in daily upon arrival to the child care site. Attendance is taken, if a child is absent from the program and the YMCA has received no prior notification, you will be contacted immediately. The care center staff is responsible for your child only during the time that your child is signed into the program.

#### Fees and Payment Policy

A non-refundable registration fee of \$15 for one child or \$20 per family is due each school year.

|                        | Member  | Participant |  |
|------------------------|---------|-------------|--|
| Daily 3pm-6pm          | \$10.00 | \$11.00     |  |
| 172 Day<br>11:30am-6pm | \$20.00 | \$22.00     |  |
| All Day 7am-6pm        | \$26.00 | \$28.00     |  |

30% sibling discount to 2nd and additional children.

 <u>All families must fill out a bank draft</u> <u>form</u>.

Fees may be set up to be drafted from your checking, savings or your credit/debit card, weekly, bi-weekly or monthly.

- If your draft is declined, your account will be charged an additional \$25 NSF fee and a payment must be made to bring your account balance to \$0 to continue in the child care program. Unless special arrangements have been made with the Youth Developement Director.
- Non-payment may result in suspension of your participation in the program until all fees are paid.

#### Fees and Payment Policy Continued.

- Financial assistance is available for families who qualify through the YMCA and Child Care Connection. Contact Liberty at 647-1616, for paperwork or more information.
- If you have questions concerning your fee or balance, please contact Liberty at 647-1616.

#### **Inclement Weather Policy**

When weather conditions close school before the normal start of the day, our program will be canceled for that day. When school is closed before the end of the school day, our staff will be there when the school closes and the site will open. (as applicable)

#### Withdrawal from the program

You may withdraw your child from the program, but must give us a one-week notice. Enrollment in the care program may be terminated if:

- Fees are not paid in a timely manner.
- Rules related to arrival and departure are not observed.
- Policies and procedures are not observed.
- A child exhibits unacceptable behavior that continually disrupts the program & prevents the other children from learning or enjoying themselves.

#### Staff

Nothing is more important in providing quality care for children outside their home that the staff who provides the care. YMCA Staff are warm, caring, reliable & responsible adults with patience, a good sense of humor & the ability to accept & respect differences among children. They listen to children and are sensitive to their individual needs. They enjoy participating in activities with the children & are committed to the program.

#### Communication

We encourage parents to communicate often with our staff. Take every opportunity to talk with the staff about your child and we encourage you to ask your child about the program each day. Our staff will also keep you informed about your child's successes and any problems. Please let us know if there is anything upsetting your child, so that we can better meet your child's needs.



#### Medication/Injury or Illness

All staff members are certified in CPR/First Aid. Staff will administer first aid for scrapes, minor cuts, bumps, and stings. You will be informed of the incident when you come to pick up your child. If your child becomes ill or is seriously injured you will be immediately notified. In the event we cannot reach you, (or one of your emergency contacts) and your child requires emergency treatment, the staff will take your child or have him/her transported to the nearest medical facility for treatment. A staff member will accompany your child.

#### **Medications**

We will administer prescription medication that does not require refrigeration. The medication must be in its original container with an unaltered label. Please give it to the site director with a completed signed medication consent form (available from the site director) indicating medication, dosage, quantity and time to administer. We cannot administer over the counter drugs.

#### REGISTRATION

#### **REGISTRATION FEES**

A non-refundable registration fee of \$15 for one child or \$20 per family is due each school year.

Session Fees Y Members: Daily 3pm-6pm \$10 1/2 Days 11:30am-6pm \$20 All Day- \$26

Potential Members: Daily 3pm-6pm \$11 1/2 Days 11:30am-6pm \$22 All Day- \$28

There is a 30% sibling discount for additional children.

#### HOW TO REGISTER FOR CARE IF YOU NEED ASSISTANCE

- 1. Register at the Member Service Desk.
- 2. Fill out the Childcare Resource and Referral Application. You will need two pay stubs or a school schedule. The Y will fax and mail it to SAL Child Care Connection. This can take up to 30 days to gain approval.
- A \$25 deposit per week, per child, due at registration, is required to hold your child's spot. This deposit will be applied to your copay once one is assigned by SAL.
- You are responsible for all childcare fees until you are approved by SAL. If you are denied by the state then the Y will grant a scholarship based on need.
- 5. If you are approved by SAL your copay will be drafted on the 15th of the month.

#### **HOW TO REGISTER FOR CARE**

- 1. Fill out registration forms.
- 2. Fill out and sign the Draft Form.
- 3. Fill out care week and days attended form.
- 4. All balances from other programs must be paid in full before you can register for care.

#### HOW TO REGISTER FOR CARE IF YOU ARE ALREADY APPROVED FOR STATE ASSISTANCE

- 1. Register at the Member Service Desk.
- 2. You may be required to fill out a Change of Provider Form. You may be required to contact your case worker to get this form. The Y will fax and mail it back to SAL for you.
- 3. All copays will be drafted on the 15th of the month.
- 4. All balances from other programs must be paid in full before you can register for care.

#### **FINANCIAL OBLIGATIONS**

Care sessions will be auto-drafted according to the times requested by you on your form. Co-payments will be drafted on the 15th of the month. Failure to pay will result in your child's spot being forfeited.

There is a \$25 fee for Non Sufficient Funds (NSF) for returned payments.

Changes to your draft form must be submitted in writing 1 full week prior to draft date.

#### STATE ASSISTANCE ATTENDANCE

Co-pays will be drafted on the 15th of the month.

Parents/Guardians are required to sign children in and out of child care on both the Y forms and the required State attendance forms.

Attendance beyond the amount of days approved by State are to be paid by the parent/ guardian and will be drafted with the monthly copays.

The YMCA does not receive payment from the state for days your child is not in attendance.

#### **PAYMENT INFORMATION**

- A 30% sibling discount will be applied to families with multiple children.
- All payments will be automatically drafted from your account.
- Any credits on account will remain a credit. No refunds will be issued.
- Cancellations or transfers must be made in writing one week in advance.

## SUPERVISED, SUPER FUN CARE FOR KIDS Going to child care is a very exciting experience for children and parents. It's very

Going to child care is a very exciting experience for children and parents. It's very natural for everyone to be anxious about the first day of care and meeting new friends. The YMCA has well-trained care staff that are focused on meeting the needs of individual children and are committed to serving as excellent role models.

#### WHAT TO BRING: PLEASE LABEL EVERYTHING WITH CHILD'S NAME

Water Bottle – Please send a water bottle with your child.

**<u>Clothing</u>**- We encourage your child to wear play clothes.

In the event of E-Learning- Please send all items your child may need for e-learning each day.

<u>Lunch</u>- We will not be serving lunches at this time. On half days and all days, please plan to pack a lunch. Snacks will only be served by YMCA staff members.

#### WHAT NOT TO BRING

- Cell phones
- Cash/coins
- Toys
- Radios
- Electronic games
- Video cameras
- Makeup
- Trading cards
- Firearms
- Fireworks
- Matches/lighters

- Tobacco products
- Sports equipment
- Balls
- Any expensive items that could lost or broken

Any of these items brought to care will be confiscated. They can be picked up by the parent at the end of the day. THE YMCA IS NOT RESPONSIBLE FOR LOST, STOLEN, TRADED, OR DAMAGED CLOTHING, TOYS, BALLS OR PERSONAL EQUIPMENT.

#### LOST AND FOUND

The Canton Family YMCA is not responsible for any lost or stolen items. Any items found by the YMCA staff are turned into the Site Director. If the items are marked with your name, the Site Director will call to inform you of the lost items.

#### **ARRIVAL AND DEPARTURES**

- If your child is involved in extra activities and leaves care, they cannot return the same day. The exception being a YMCA program such as swim lessons or specialty camps. Our goal is to run a safe program; this is difficult when children are coming and going at different times throughout the day.
- An authorized person (on your written list of authorized pick ups) must sign your child out daily with signature and time, as well as show their photo ID to match your child's registration form. Your child will not be released to anyone that is not on the authorized pick up list.
- Anyone under the influence of drugs, alcohol or altered emotional state which could cause injury to the child, will not be allowed to pick up the child.
- All children must be picked up by 6:00pm. Every additional 10 minutes past 6:00pm will be an extra \$10 per child.



### All elementary aged children in our program will be bussed from their schools to our YMCA facility.

## Parents will need to contact the School District Transportation office at 647–1415 to set up their schedules of care needed.

Don't forget to let your child's teacher know what the plan is as well!

#### **AUTHORIZED RELEASE**

The list of persons authorized to pick up your child must be current and accurate. Changes in persons authorized to pick up your child must be made in writing and submitted to the Youth Development Director.

- Changes in custody agreements will be accepted only with a copy of the court order that specifies the change and designates the person named as having legal custody of the child.
- Photo identification is required for any person picking up a child.
- No child in our care will be released to persons not authorized by the enrolling parent. In case of an emergency, please contact the Site Director or Youth Development Director to make arrangements.
- It is essential that enrollment information is updated as needed.

#### **GENERAL RULES**

- CARING: Keep your hands and feet to yourself. Take care of equipment, property, the environment, and each other.
- HONESTY: Tell the truth; do not steal.
- RESPECT: Use appropriate language. Respect the counselors and fellow campers. Treat others like you would want to be treated.
- **RESPONSIBILITY:** Stay with your group at all times. Keep up with your belongings.

#### **CONDUCT POLICY**

Please make sure that both you and your child are completely familiar with these policies. The Site Director may suspend or terminate a child's participation in the program for the following reasons:

- Leaving YMCA program premises without permission.
- Refusing to participate in activities.
- Using foul language or being rude and discourteous to another child, staff or member.
- Defacing YMCA property, vehicles, or field trip facilities.
- Engaging in fighting as the means to solve a problem.

Stealing or defacing another child's property.

- Intentionally injuring another child, staff or member.
- Refusing to remain with the group during outings or on the property.
- Refusing to follow check in and out procedures.
- Refusing to follow the basic rules of the program.
- Any physical or verbal sexual harassment of another child, staff or member.

#### DISCIPLINE

Behavioral incidents will result in parent notification. All incidents will be documented and require parent signature before child is permitted to return to care. Depending on severity of incident a meeting with a parent or guardian may be required. Consistent concerning behavior will result in temporary or permanent suspension from care without refund.

#### CHILD CARE CONSEQUENCES

- 1. Warning and redirection by staff.
- 2. If behavior continues for a 2nd time = Sit out for number of minutes equal to the child's age and problem solving conference with staff member.
- 3. If behavior continues for a 3rd time = 15 minutes of time out and problem solving conference with staff.
- 4. If behavior continues for a 4th time = Child's Parent is called and the child is removed from care for a day.
- 5. If the behavior continues after a day out= the child will be suspended for 3 days.
- 6. If the behavior continues after 3 days out= the child will be excluded from the program.

Care staff will record incidents of behavior that warrant 15 minutes out. Care reserves the right to skip over early consequences if behavior is severe enough to pose a risk to either the misbehaving child or others in the group. Our goal at care is to give the child every opportunity to correct his/her behavior without parental involvement.

#### **HEALTH AND SAFETY**

- Children with symptoms of or a diagnosis of lice, skin rashes, vomiting, diarrhea, pink eye or experiencing a temperature above 100.4 degrees will not be permitted to attend camp. We request that you keep your child home for a minimum of 24 hours if your child displays any of these symptoms. A doctor's note may be needed depending on the illness.
- If your child becomes ill throughout the day, you will be called immediately and asked to come pick up your child. For this
  reason, it is important that you keep your contact phone numbers up to date with the YMCA. Any time a parent is called
  for a sick child, the parent will need to arrange pick up of the ill child within 2 hours of being called.
- If a note from the doctor is required after a serious illness, please make sure to have them include the following: the date the child was seen, diagnosis of the illness, and when your child may return to camp.
- The YMCA has the responsibility to keep all children in the program safe and healthy. We will always inform parents if a child at care has been diagnosed with a contagious condition, and their name will remain anonymous. We also expect that you will inform us if your child has a contagious disease so we can inform the other parents as well.
- YMCA staff are mandated child abuse reporters- this includes physical, sexual, emotional, mental abuse and neglect.
- All allergies should be brought to the attention of the care staff.
- Children with special emotional or physical needs should be called to the attention of the Youth Development Director by fully describing any unique requirements of the child at least two weeks prior to the start of your selected care session. We will make every reasonable accommodation possible to serve your child with special needs.

#### **MEDICAL AUTHORIZATION & EMERGENCY PROCEDURES**

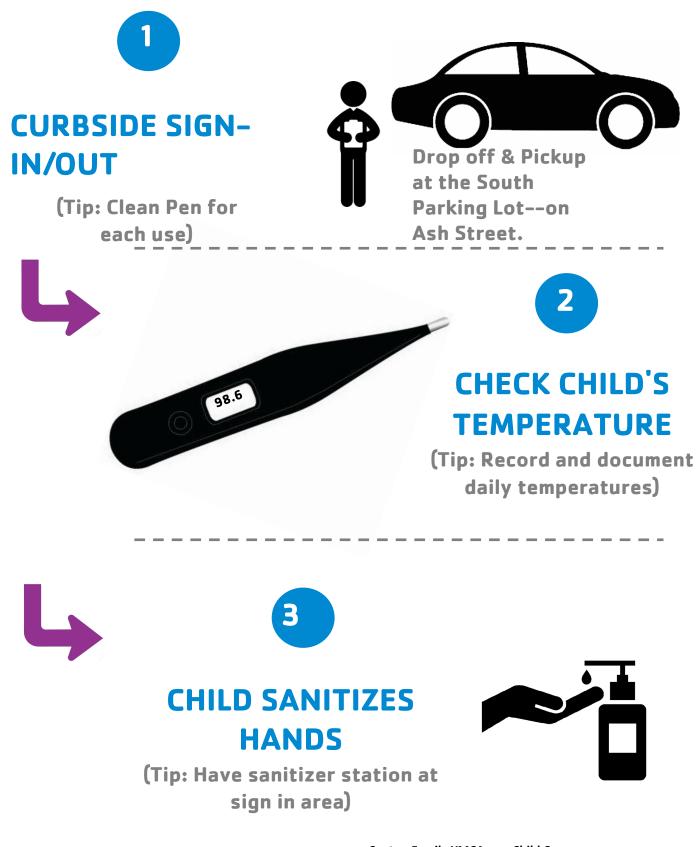
- The YMCA is permitted to administer medication only as prescribed by a physician. Medication must be in its originally
  labeled pharmaceutical bottle. All medications must be dropped off by the parent and must accompany a fully completed
  medication release form. Medication will be locked away and kept out of the reach of children. We require all parents and
  doctors to sign a medical release form.
- If your child is injured during care hours, we will handle minor scrapes, scratches and bruises, but we will call you if there are any questionable or serious injuries. The YMCA does not provide insurance.

#### **NO BABYSITTING**

YMCA employees are not allowed to babysit or have contact with participants in YMCA programs outside of program activities. We ask parents not to ask staff to babysit or participate in non-YMCA related events with their children.



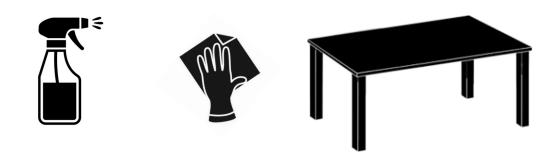
## CHILD CARE ARRIVAL



## **MEALS & SNACKS**

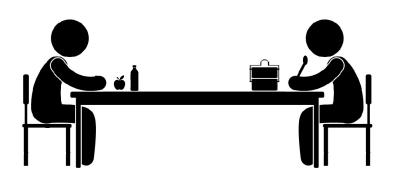
CHILD WASHES HANDS AND TEMPERATURE IS CHECKED AFTER LUNCH







### **CHILDREN SIT SIX FEET APART**



## **STAFF HEALTH**

## ALWAYS WEAR A FACEMASK





## CHECK TEMPERATURE

## WASH AND SANITIZE HANDS THROUGHOUT THE MORNING



## **SAFE ENVIRONMENT**



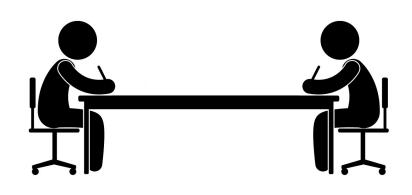
X

X

### MARK SPACES ON THE FLOOR SIX FEET APART

X

X



### EACH CHILD HAS THEIR OWN TABLE OR KEEP THEM AT OPPOSITE ENDS IF NECCESARY.

## SAFE ENVIRONMENT



### **MAINTAIN A 1:12 RATIO OF STAFF: CHILDREN**

**AVOID MORE THAN 13 PEOPLE IN ONE AREA** 

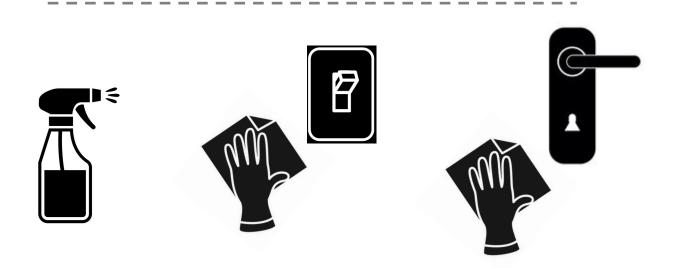


## EACH CHILD HAS THEIR OWN SUPPLIES TO USE EACH DAY

## **SAFE ENVIRONMENT**



## WIPE DOWN ALL MATERIALS AND EQUIPMENT AFTER EACH USE



## DEEP CLEAN ALL SURFACES AND AREAS USED EACH DAY

### 2020-21 YMCA SCHOOL AGE CARE CANTON REGISTRATION FORM

Please complete all information and return form to the YMCA. We must have this form returned before your child will be able to attend Child Care.

| CHILD'S NAME            |                   |                          | BIRTHDAY           |                          |  |
|-------------------------|-------------------|--------------------------|--------------------|--------------------------|--|
| GRADE/SCHOOL            | PARENT/GU         | ARDIAN                   |                    |                          |  |
| PHONE                   | NE ADDRESS/CITY   |                          |                    |                          |  |
| CELL                    |                   |                          |                    |                          |  |
| In case of an emergend  | cy and we are una | able to reach you, pleas | e list 3 emergency | y contacts.              |  |
| EMERGENCY NAME          |                   | RELATIONSHIP_            | PF                 | IONE                     |  |
| EMERGENCY NAME          |                   | RELATIONSHIP             | Pł                 | 10NE                     |  |
| EMERGENCY NAME          | NCY NAMERELATIO   |                          | PH                 | IONE                     |  |
| DISCIPLINE: What type   | e of problem solv | ring approach do you fi  | nd works best wit  | h your child?            |  |
| We want your child to   | have a successf   | ul experience. Please a  | dd any comments    | about your child you fee |  |
| My child's usual days a | nd times of atter | ndance will be:          |                    |                          |  |
|                         | MONDAY T          | Jesday Wednesda'         | Y THURSDAY         | FRIDAY                   |  |
| Leaving at:             |                   |                          |                    |                          |  |

#### PLEASE TURN PAGE OVER

\*\*Please note that the YMCA Child Care Program is a license exempt program and is not licensed or regulated by DCFS.

### **AUTHORIZATIONS**

#### **MEDICAL AUTHORIZATION:**

All information on the opposite side is correct so far as I know and the child herein described has permission to engage in all prescribed Child Care activities, except as noted by me or an examining physician. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the Site Director to hospitalize and/or secure proper treatment for my child as named.

My Child's Physician's Name is

Parent/Guardian

#### AUTHORIZATION TO DISPENSE MEDICATION:

I hereby request and authorize the Child Care staff to dispense any medication listed below to my child per my instructions. I understand that all prescription medication must be sent in its original container. which has my child's name on it as well as the prescribing physician. I understand that I must send a note with dispensing instructions and my signature for all medications.

List any medications to be given at Child Care

List any allergies or medical conditions that we should be aware of

Parent/Guardian

#### FIELD TRIP AUTHORIZATION:

I hereby give permission for my child to attend any and all field trips that may be taken during Child Care.

#### Parent/Guardian

#### **MEDIA AUTHORIZATION:**

I hereby give permission for my child's name and image to be used in the promotion or media coverage of Child Care activities. Including the YMCA Website, Facebook, Videos and Newspaper Ads.

Parent/Guardian

Date

Date

Date

#### 2020–21 Child Care Payment Agreement

We are thrilled that you have chosen to enroll your child for Child Care! To ensure proper communication, we have outlined our policy related to child care payments. If you have questions please feel free to contact us at 309.647.1616.

#### PLEASE READ CAREFULLY

**1.** All past due accounts must be brought to a \$0 balance prior to sign up.

**2.** Payments for care are due the Thursday prior to the start of care. For example if you sign up for the week of September 14–18, then your care balance is due on September 10th. You are also welcome to pay the care balance any time prior to the due date.

3. If you wish to cancel your child's enrollment, notification in writing must be sent 14-days prior to the start of the registered care week.

4. To receive the member rate for child care, your child must be a current YMCA member from the date of registration through the child's last day of care.

5. A \$10 program fee will be charged when a child is registered After Thursday 6pm for the next week.

6. There are no credits or refunds for missed days.

7. Payment Options:

Bank Draft your care fee Pay in person check, cash, debit or credit card Pay over the phone with a debit or credit card 309.647.1616

Mail check: Canton Family YMCA Child Care 1325 E. Ash Canton, Illinois 61520

I have read and understand the above statements. I fully understand my responsibility for payment of my child's care fees. I also understand that my child may be released from the care program if I have not met my financial obligations. Return this form along with your child's registration information, signed bank draft form, and signed attendance schedule.

Child(ren) name:\_\_\_\_\_

Parent's Signature:\_\_\_\_\_\_Date:\_\_\_\_\_



#### To all YMCA Child Care Program Participants:

The Canton Family YMCA requires automatic Bank Draft Payments for our Child Care Programs. The convenience of automatic withdrawal reduces the administrative time necessary to manage our YMCA program, maintaining reasonable fees and convenient service for our entire community. This form will be used for all child care programs and expires on 8/15/2021. When to Draft: Contact Information Parent Name:\_\_\_\_\_\_\_\_Monthly Child(ren) Name: Email: Automatic Withdrawal Information Bank Draft Information (Please check one and attach a voided check) \_\_\_\_\_Checking Account \_\_\_\_\_ Savings Account Bank Name Routing/Transit Number (First set of Numbers)\_\_\_\_\_ Account Number (Second Set of Numbers) Please continue to "When to Draft" OR Credit/Debit Card Information Master Card \_\_\_\_\_Visa \_\_\_\_American Express \_\_\_\_Discover Card Number\_\_\_\_\_ Expiration Date\_\_\_\_ **ATTENDANCE SCHEDULE FOR DRAFT:** Payments will be drafted the Thursday before the planned attendance After Care 1 day 2 days 3 days 4 days 5 days **Child Care Payment Policy** - I understand that if a payment is returned to the YMCA, a \$25 charge will be added to my account.

- The YMCA reserves the right to terminate child care upon non-payment of fees.
- I understand that this draft authorizes a perpetual payment from the above account.

#### I HAVE READ AND UNDERSTAND THE ABOVE TERMS AND DURATION OF THE AGREEMENT

#### **ATTENDANCE SCHEDULE**

Please check mark each week of care you plan for your child to attend. A bank draft payment will be taken on the Thursday before that week of care, unless other arrangements have been made with the Youth Development Director.

| Week 23: Jan 18-22   | Week 32: March 22-26       |
|----------------------|----------------------------|
| Week 24: Jan 25-29   | Week 33: March 29- April 1 |
| Week 25: Feb 1-5     | Week 34: April 6-9         |
| Week 26: Feb 8-12    | Week 35: April 12-16       |
| Week 27: Feb 15-19   | Week 36: April 19-23       |
| Week 28: Feb 22-26   | Week 37: April 26-30       |
| Week 29: March 1-5   | Week 38: May 3-7           |
| Week 30: March 8-12  | Week 39: May 10-14         |
| Week 31: March 15-19 | Week 40: May 17-19         |

#### **ATTENDANCE SCHEDULE FOR DRAFT:**

Payments will be drafted the Thursday before the planned attendance

| After Care: |      |  |
|-------------|------|--|
| 1           | Day  |  |
| 2           | Days |  |
| 3           | Days |  |
| 4           | Days |  |
| 5           | Days |  |

My child's usual days and times of attendance will be:

|                             | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|-----------------------------|--------|---------|-----------|----------|--------|
|                             |        |         |           |          |        |
| After Care<br>Pick Up time: |        |         |           |          |        |
|                             |        |         |           |          |        |
|                             |        |         |           |          |        |

Child(ren) name:\_\_\_\_\_

Parent's Signature:\_\_\_\_\_Date:\_\_\_\_\_Date:\_\_\_\_\_Date:\_\_\_\_\_