



Parent Policies and Procedures

WELCOME TO THE TRINITY CHILD DEVELOPMENT CENTER

A Mission of Trinity United Methodist Church

We are delighted you have chosen Trinity Child Development Center “CDC” to nurture your child. Each of us at Trinity CDC considers every child a special gift from God. We are committed to be your partner in developing positive mental, spiritual, social, emotional and physical development for your child. With our “open door policy” we are always available, and we encourage you to get to know your child’s teachers, friends and school routine. In partnership, we will make this an exciting experience of wonder and growth.

Trinity Child Development Mission Statement

To provide the best practices in delivering age-appropriate child development to infants and children through pre-school. To join in partnership with parents to facilitate their children to be all that God has created them to be.

Curriculum

Trinity CDC is committed to being your partner in developing positive mental, spiritual, social, emotional and physical development of your child. Our curriculum is faith-based and integrated in every classroom in ways that each age group can understand. We provide children with opportunities to make choices, develop questions, explore and discover through play and designed activities.

The teachers utilize three main tools that are theme-based, engaging, developmentally appropriate, and “fun”. A Monthly Theme, Baby Signs and/or ABEKA are used for the following age groups to create a warm and friendly environment where children begin their life-long love of learning.

Infants:

Baby Signs (<http://www.babysigns.com/index,cfm?id=122>) are taught to increase communication and, to some extent, decrease aggressive behaviors.

Toddlers: (18 months – 36 months)

Baby Signs (<http://www.babysigns.com/index,cfm?id=122>) are continued to be taught to increase communication.

Preschool and PreK: (3’s and 4’s)

ABEKA (<http://www.abeka.com/Distinctives.aspx>)

(<http://www.abeka.com/OurFoundation.aspx>) Each lesson promotes pre-reading and math skills. It also encourages character building, comprehension, and valuable principles.

Additionally, the Three’s and Four’s attend chapel and music once a week.

All ages listen to age-appropriate Bible stories and participate with a blessing before meals.

Enrollment

Typically, Trinity CDC is fully enrolled. Therefore, most children are on a waiting list before receiving a confirmed enrollment. Waiting List registration is at no charge and continues year-round on a first-come, first-served basis with priority placement given to siblings of currently enrolled children and to Trinity Staff and Church members.

All registration, curriculum fees and activity fees are non-refundable.

Registration

Reserving a Spot and Registration:

- **Waiting List:** Joining the waiting list is free of charge.
- **Accepting a Position:** When a space becomes available for your child, we will contact you to schedule a tour. During your tour, we will complete the registration process.

If you are unable to start immediately but would like to secure your child's spot, a **holding fee of 50% of your child's regular tuition** will be required. Please note the following:

- If another family on the waiting list is ready to begin care immediately, you will be given the option to:
 - Pay **100% tuition** to hold the spot, or
 - **Relinquish the spot** and return to the waiting list.

This policy applies to **all classrooms**, including the **Infant Room**.

Semester-Based Time Limits for Holding a Spot:

Families may hold a spot for **one semester at a time**:

- **Spring Semester:** January – July
- **Fall Semester:** August – December

At the end of each semester, held spots **do not automatically renew**. To continue holding the spot, families must:

- Reconfirm their intent to enroll, and
- Submit continued payment of 50% tuition for the next semester.

Failure to reconfirm or begin care by the end of the hold period will result in the spot being released and offered to the next family on the waiting list.

Infant Enrollment & Expected Start Dates:

For families expecting a newborn, please notify the school once your child is born and provide the confirmed date of birth. While most newborns begin care around 6 weeks of age, families will be responsible for **full tuition beginning at 6 weeks**, regardless of the actual start date.

All children must have an updated Pre-Admission Form. It is the parents' responsibility to keep this information current and ensure the TCDC office is aware of any changes.

First time registration between August-January is \$100 for the first child and \$75 for the second child with a \$175 maximum per household.

First time registration between January-August is \$150 for the first child and \$100 for the second child with a \$250 maximum per household.

Re-enrollment for current TCDC children is \$75 per child with a \$150 maximum per household. Curriculum Fee for all children enrolled in our PreK 3 and PreK 4 program is \$100 per child annually.

Tuition

Tuition fees incorporate holidays, emergency closures, Teacher in Service days and occasional absences.

Tuition will not be adjusted for any reason, including absences.

Weekly and monthly payment plans are available, and the billing choice must be made at registration or at the beginning of a new school year. Weekly tuition is due every Monday for the current week. Monthly tuition is due by the 7th of each month for the current month. (To calculate monthly payments, multiply the weekly tuition by 4.3).

Timely payment is essential to maintaining your child's enrollment at Trinity Child Development Center. If payment is not received within 5 business days of the due date, your child's enrollment may be suspended until the balance is paid in full. Continued late payments may result in permanent dismissal from the program.

Scholarships are available to families needing emergency short-term financial assistance. These are considered on a case-by-case basis. Scholarship forms can be found in the TCDC main office.

Children with current accounts, who have attended the TCDC for twelve full months, are entitled to a one-week tuition-free absence to "use-or-lose" within the following twelve-month period, with a one-week written notice.

Payment Methods:

Auto payments from a bank account (ACH) or credit card through Tuition Express are mandatory. Auto payment program enrollment forms are managed by the TCDC main office. Personal checks and cash will not be accepted.

Changes to account information will only be made if the current account has been compromised or has expired. Please allow 2 weeks for any changes to account information.

Trinity Child Development Center (TCDC) will accept tuition and fee payments from reputable third-party entities such as grant programs or approved institutional sources. Payments from personal business accounts will not be accepted under this policy. The Director reserves the right to approve or deny any third-party payment at their discretion.

All accounts must remain current for third-party checks to be accepted. Additionally, an automatic draft via ACH or credit card must remain the primary method of payment on file. Third-party checks will be considered a secondary form of payment only and cannot replace the required primary payment method. Failure to comply with these guidelines may result in the rejection of payments or administrative withdrawal.

It is the parent's responsibility to communicate with dependent care agencies.

Parents may be required to choose another form of payment after the 3rd declined auto payment transaction in a 120-day period.

A \$30.00 charge will be assessed for each returned ACH. Parents may be required to use an alternate form of payment due to repeated returned ACH.

Statements needed for Dependent Care Accounts and tax purposes can be found on www.myprocare.com.

In the event of an extended closing, one lasting more than two weeks, parents are responsible for their current tuition payments for the first two weeks. Trinity CDC and Trinity UMC administration will assess the financial needs of the school during that time and communicate any changes with the parent community. The adjusted tuition will take into consideration the salaries, benefits and any additional operational needs to ensure the center is able to resume operations.

Withdrawal

A written two-week notice of intent to withdraw a child from the TCDC is required. If this notice is not given, an additional two-week tuition will be charged to the account and is the parents' financial responsibility.

A written request for reimbursement of any credit on the account must be received within two weeks of withdrawal.

Administrative Withdrawal

The Director of Trinity CDC may require that a child be withdrawn when it is not in the best interests of the child and/or his/her classmates for the child to continue or the best professional judgment of the Director deems it necessary. Circumstances may make notice unfeasible, and any advanced-paid tuition would be refunded.

Arrival and Departure

Extreme caution is to be observed in the TCDC traffic areas.

Huntsville City ordinance requires entering and exiting the parking lot according to the posted signs.

Please do not park in or drive through the covered entry. Parking at the curb is also prohibited. Safety guidelines require parking in spaces with engines off.

Please protect children in the often-busy parking areas.

Per Huntsville City Fire Ordinance, strollers and car seats can not be stored at the center.

Please make sure to lock your car and do not leave children or any other valuables in the car unattended.

Please enter and exit the TCDC using the door near the TCDC Office. The far hall doors are alarmed for safety purposes. For safety reasons, the playground is locked outside of normal TCDC business hours.

To help ensure the safety of the children at Trinity CDC, the TCDC main entrance is locked. Each family will be issued (1) free door card. This will allow entrance to the TCDC between the hours of 7:00am-5:30pm Monday through Friday. If you wish to purchase an additional door card, the cost is \$10.00. You may have up to 2 cards per family. The additional people on your child's pickup list may still come get your child without a door card, however they will have to be buzzed in by the TCDC office from the intercom located on the TCDC main entrance door. In most cases the door is open right away, however, there may be a wait time if TCDC staff are attending other TCDC responsibilities. The replacement fee for the cards will be \$10 each. For safety reasons, we will issue a new card and charge your account after 3 days of needing to be buzzed in.

Please ensure that children are signed in and out on the sign-in sheets in their classrooms using full first and last names. DHR will not accept initials or unrecognizable signatures. This is the TCDC's official record of attendance and disaster accounting control log.

With multiple children, ensure that the oldest is signed in first and singled out last.

Please ensure that a teacher acknowledges children's arrival and departure. Alabama Department of Human Resources (DHR) licensing regulations state we 'MAY ONLY ASSUME RESPONSIBILITY FOR A CHILD AFTER HE/SHE HAS BEEN DELIVERED TO A STAFF MEMBER BY A RESPONSIBLE ADULT.'

Drop-Off and Pick-Up of children in Toddler, Preschool and PreK rooms during naptime, between 12:30pm and 2:30pm, is strongly discouraged. It is disruptive to the class and can cause the room to be in noncompliance of DHR ratios.

To ensure the best start for infants, please make sure they do not require feeding or diaper changes within the first hour at the TCDC. It is the parent's responsibility to check their child's diaper upon drop-off and change their child's diaper if necessary. Drop-Off time is very busy, and we want to make sure all the children have a smooth transition.

Departure time is a great time to learn about your child's Trinity CDC experience. Please ensure you are ready to receive your child and able to give your attention to your child and the teacher.

Children cannot be received by Trinity CDC prior to 7:00 AM and are to be picked up by 5:30 PM. After 5:30 PM, a fee of \$1 per minute (per child) will be assessed.

Release of a child to either natural parent cannot be denied unless a protection order prohibits such release and is on file in the TCDC office.

TCDC staff members will not release a child to any person whom they judge to be impaired.

Please call TCDC before 10:30AM at 256-489-7525 if your child will be absent. Regular attendance provides an optimal educational experience.

Updated Information

It is the parent's responsibility to keep all information current and to notify the TCDC office of any changes in information, i.e., address, phone numbers, job change, and persons authorized to pick up. These changes will not be accepted through email and **may require a new DHR Pre-Admission form to be completed.**

The TCDC must have written authorization on file for all persons picking up your child.

Communication

Communication Methods:

Open/consistent communication is critical to ensuring parents and teachers are working as a team. A child's behavior is influenced by experiences and events. Share with your child's teacher anything you feel might contribute to changes in your child's behavior.

Since pick-up time is a very busy time of day, please keep conversations with your child's teacher brief. We are happy to schedule a conference if further communication is necessary.

Correspondence from the TCDC office may be placed in each child's cubby - please check it daily.

Trinity CDC uses Constant Contact emails and the Remind text messaging app to keep parents as informed as possible. ***Please make sure the TCDC office has a current email address and cellphone number that is checked regularly.*** At least one parent/guardian must accept messages through Remind, as this is our primary method of immediate communication.

We also use a private Facebook group (<https://www.facebook.com/groups/TrinityCDCParents/>) to maintain open communication.

The TCDC telephone (256-489-7525) is answered between 7:00 AM and 5:30 PM. On occasions when the office is briefly unoccupied, an answering machine may intercept, and a staff member will promptly return calls. Teachers are not able to come on the phone during their time with the children but will always return calls when available.

Positive Communication:

It is vital to maintain communication that is positive and respectful. Respectful language and delivery of communication is expected from parents and staff. Parents using hostile or aggressive language towards TCDC staff are subject to immediate administrative withdrawal. Gossiping and spreading false information among parents and staff will also be subject to immediate administrative withdrawal.

Communicating Concerns:

Any questions or concerns that you have about activities in your child's classroom should be discussed with your child's teacher first. If the issue is not resolved there, please contact the CDC Director.

When contacting the Director regarding concerns in the classroom:

1. Please allow up to 48 hours for the Director to research and assess the issue.
2. If necessary, the Director will:
 1. view camera footage and confer with TCDC staff.
 2. confer with TUMC administrators.
 3. confer with DHR Child Care Licensing.
3. The Director will then contact the parent(s) with a possible resolution.
4. If a resolution is not reached, the Director will then involve TUMC administrators.
5. If all possible avenues have been exhausted and no resolution has been reached, TCDC administration reserves the right to administratively withdraw the child.

Immunization

All children must have an original *State of Alabama Certificate of Immunization* (aka Blue Card) with a current expiration to enroll or maintain enrollment. Immunization certificates are obtained from the child's physician or the Department of Public Health and must be completed and signed by a physician or his/her designee. Please be aware, the expiration date is set by your child's physician or the Department of Public Health.

Trinity CDC Administration will notify parents when their child's immunization record is about to expire. Once it has expired, Trinity CDC administration will need an updated immunization record within 2 weeks in order to continue care.

Trinity CDC follows the guidelines of the Advisory Committee on Immunization Practice (ACIP) of the Center for Disease Control (CDC) and the American Academy of Pediatrics regarding immunizations. We will not accept families unwilling to adhere to these immunization schedules.

The original certificate may be transferred to the parent on the child's last day of attendance. The TCDC will notify parents of pending expiration for each child's certificate.

Illness and Infection Control

Trinity CDC policies are designed to minimize the spread of infection and to ensure children can participate in activities.

CHILDREN MAY NOT ATTEND THE TCDC IF WITHIN THE PAST 24 HOURS THEY HAVE HAD A FEVER OF 100 OR HIGHER (WHEN NOT TAKING FEVER-REDUCING MEDICATION) HAD VOMITING, DIARRHEA OR HAVE SHOWN OTHER SIGNS OF INTESTINAL DISTRESS.

The cause of rashes must be identified and treated.

Even in the absence of all these symptoms, children sometimes indicate by their behavior that they are ill (i.e., unusual sleepiness or crankiness) and should not be at school. Children needing pain regulation medication will also be required to stay home.

Trinity CDC Administration reserves the right to send a child home if they cannot participate in their classroom's daily activity.

Children who become ill while at Trinity must be picked up within one hour of initial parent contact, unless other arrangements have been made with Trinity CDC Administration. Parents must ensure the TCDC has updated emergency contacts.

If a child is sent home sick or for any of the reasons listed above from Trinity CDC, they may not return to Trinity CDC the next day and must be 24 hours fever/symptom free without medication.

Fever of 100 or over as a result of teething will not be an exception to this rule.

If a child has a communicable illness, parents must notify the TCDC so communication of the potential exposure can be disseminated. We are required by DHR to communicate all communicable illnesses to the Alabama Department of Public Health.

TCDC Administration reserves the right to request a physician's authorization to return to school. In case of an epidemic, a more stringent short-term policy may be enacted.

Medication

Trinity CDC cannot administer medications (including prescription and over the counter) apart from limited emergency first-aid including inhalers and epinephrine auto injectors aka EpiPens. Other emergency first-aid medication requests will be determined at the discretion of the Trinity CDC Administration on a case-by-case basis.

DHR requires a completed medical form and written Physician's authorization, and instructions accompany all medications.

Topical ointments to treat diaper rash may be applied to the child's diaper area **ONLY** if a current Medicine Form and Physician's Authorization are completed and up to date. Both forms **MUST** have the following information: Name of diaper cream, amount to be given, refrigerated or non-refrigerated, times to be given and an expiration date.

The form may not say "as needed" for instructions, as this is considered a blanket statement and prohibited by DHR. All incomplete or expired forms will be returned, and diaper cream will not be administered.

Please see TCDC Administration for approval/disapproval of other medicines.

Snacks and Lunches

It is expected that children will receive a nourishing breakfast prior to arrival at the Trinity CDC including the "first AM feeding" for infants. To ensure the best start for infants, please make sure they do not require feeding within the first hour at the TCDC. It is the parent's responsibility to check their child's diaper upon drop-off and change their child's diaper if necessary. Drop-Off time is very busy, and we want to make sure all the children have a smooth transition.

TCDC staff will not wake infants to feed as sleep is vital to the child's development and growth.

Bottles and Baby Food:

Bottles containing breastmilk must be labeled with the child's first and last name as well as the date.

Breastmilk bottles cannot be heated more than once.

Bottles need to be mixed and ready to serve.

Formula bottles are discarded one hour after warming.

All unused bottles will be returned at pickup.

All bottles will be heated in a slow cooker.

TCDC must have specific feeding instructions from parents for all bottles.

All bottles will be stored in the refrigerator.

Baby food must be in an unopened container.

All bottles and baby food must be labeled with child's first and last name. Parents provide all bottles and baby food.

Please only introduce new foods at home and provide baby foods your child has previously had and enjoyed at home. Children participate in the CDC lunch program when they are ready for table food, typically around the child's first birthday and fully transitioned by 14 months old.

The TCDC offers two snacks and a hot lunch daily. Outside food and drink are permitted only when TUMC kitchen cannot accommodate verified food allergies or there is a scheduled class party/field trip. Trinity CDC will supply all eating utensils including sippy cups.

A snack and lunch menu are posted on the bulletin board in the main hall. We are required by DHR Childcare Licensing to offer ALL items on the menu to your child unless there is a completed Allergy Form in the CDC main office.

The TCDC asks that parents call by 10:30 AM if the child has not yet arrived but will arrive by lunchtime to ensure inclusion in the lunch count. Morning snacks are served at 8:30AM and lunch is served at 11:30AM. As per Health Department regulations, there can be no “holding of food” for children not in attendance at the time of service.

Allergies

Children with food allergies:

- All children with food allergies must have a completed Allergy Form on file in the CDC office.
- This form is completed by the Physician and MUST clearly explain the Care Plan and Treatment Plan.
- If the TUMC kitchen is unable to accommodate the dietary restrictions, CDC administration will discuss other options with the parents.
- Children with Lactose Intolerance or allergies to cow’s milk will need to bring an alternative option daily that is single use, unopened and does not need to be refrigerated. It must be labeled with the child’s FIRST and LAST NAME. This will be served at lunch and any remaining will be disposed of. Anything over a single use size will NOT be permitted.

Please ensure the TCDC office and your child’s teacher has an accurate list of any allergies your child may have to include, but not limited to, food allergies.

Please be aware that Trinity CDC is a Peanut Free environment. In the event you are asked to bring food for a special occasion, please make sure it does not contain peanuts and that it is made in a peanut-free factory.

Dress for Success

Children are to dress in comfortable, washable play clothes that allow freedom of movement, and the child can “self-manage”.

Once your child begins walking, appropriate footwear must be worn at all times. Children should wear safe, sensible, closed-toe and closed-back shoes suitable for active play—such as rubber-soled sneakers with socks. Tennis shoes or sneakers are strongly recommended for safety and comfort during daily activities.

All other types of footwear are worn at the parent’s discretion and risk. TCDC and TUMC are not liable for any accidents resulting from inappropriate footwear.

If a child is unable to participate in normal classroom activities due to their footwear, parents will be contacted and required to bring a more appropriate pair of shoes. If suitable shoes are not provided, parents will be required to take the child home for the remainder of the day.

“Water shoes” are required to play in sprinklers. Ensure that your child has school appropriate shoes to change into.

Please make sure shorts are worn under skirts and dresses.

Trinity CDC reserves the right to call parents for replacement clothing if their child is not dressed appropriately.

As “fashions” change, other items may be disallowed.

Regardless of age, please send a change of weather appropriate clothes and shoes in a plastic zip-lock bag LABELED WITH EACH CHILD’S FIRST AND LAST NAME.

Outdoor Play

The TCDC feels that outdoor play experiences are a vital part of a child’s total development. Children will play outside twice each day pending there isn’t a weather advisory. Outdoor play enriches all aspects of a child’s development including imaginative play, social skills, motor development and overall health. Please dress children in proper seasonal clothing.

Potty Training

Trinity CDC generally introduces potty training in our preschool program. Our preschool curriculum is designed to include self-help skills needed for potty training success. Please make sure to discuss this with your child’s Preschool teacher when your child begins to show interest in potty training.

To ensure your child’s success, please send your child to school in easily self-manageable clothing, i.e., no overalls or onesies. This will also help us teach the children self-help skills and build self-esteem. Also, make sure to bring several changes of clothes including shoes.

Children enrolled in the PreK 3 and PreK 4 classrooms at Trinity CDC are expected to be fully potty trained prior to the start of the school year.

Being fully potty trained means that a child can:

- Recognize the need to use the restroom
- Communicate that need to a teacher
- Use the toilet independently
- Stay accident-free on a regular basis

We understand that occasional accidents may happen, and our staff will respond with kindness and support. However, if accidents occur more than 2–3 times per week for two or more consecutive weeks, this may indicate that the child is not yet fully potty trained.

In these cases:

- We will partner with the family to develop a readiness plan
- The plan may include having the child stay home to complete potty training
- Tuition will remain the responsibility of the family during this time

Nap Time

Per DHR regulation, a rest mat or two blankets must be provided for all children sleeping on cots. Mats must have a “built-in” top sheet, or a separate covering must be provided. Each child’s mat must be taken home every Friday for washing and returned on Monday. Children may bring one soft nap buddy to rest with. Trinity CDC reserves the right to call parents for a rest mat if one is not provided.

Children are transitioned to sleeping on a cot during the 12:30pm to 2:30pm nap time during the month of their first birthday (with the exception of the Lambs room).

Drop-Off and Pick-Up of children in Toddler, Preschool and PreK rooms during naptime, between 12:30pm and 2:30pm, is strongly discouraged. It is disruptive to the class and can cause the room to be in noncompliance of DHR ratios.

Pacifier Policy

Beginning in the Toddler (Bunny, Penguin and Duck) classrooms, pacifiers will only be permitted at nap time until January. At that time the teachers will work with the parents to wean your child from the pacifier by June. Pacifiers will not be permitted in the PreK classrooms.

Positive Guidance

The purpose of discipline or guidance in the TCDC is to help children learn acceptable behavior, to express emotions appropriately, and to develop inner control. The CDC uses developmentally appropriate methods to guide behavior, recognizing that all children are unique with individualized past experiences, preferences, and concerns.

Parents should not be alarmed if their child exhibits new behaviors when joining a group of children. It is typical for children to mimic both desirable and undesirable newly observed behaviors. It is important to treat behavioral actions succinctly making clear what is/is not acceptable. Additionally, an increase in aggression or passivity may emerge while adjusting to a new situation. Through appropriate direction, the teachers will guide each child's positive interactions with the group.

Aggressive/Disruptive Behavior Policy

Includes but not limited to biting, pinching, hitting, throwing, pulling hair, being aggressive towards self or others, uncooperative and disruptive behavior

Our main priority is the safety of our children and staff. We strive to maintain a safe environment where children feel God's love while continuing to develop socially, emotionally and academically.

Our goal is to partner with parents and teachers to encourage positive behavior. We understand some aggressive behavior may be developmentally appropriate for younger children. It is a method of discovering the world around them, exhibiting strong emotions they can't verbalize, setting personal boundaries, or other reasons we cannot decipher. We also understand that some negative behaviors can be easily redirected, while others cannot. However, we know this behavior affects the children, the parents and the teachers in a negative manner. We want parents to know that we take aggressive and disruptive behavior very seriously.

When Aggressive/ Disruptive Behavior Occurs:

For the child who was hurt:

1. We will comfort the hurt child, administer first aid by washing the wound with soap and water and/or holding a cold cloth or ice pack on the wound, if needed. If the skin is broken, the area will be covered with a bandage.
2. Parents will be called at the time of the incident only if the skin is broken.
3. An Accident Report will be filled out, signed by the teacher(s) and parent, initialed by CDC Administration, and sent home that day. No children's names will be given.
4. A copy will be added to the child's file.

For the child who hurt a classmate:

1. For Infant and Toddler Children: The teacher will tell the child firmly, “No [aggressive behavior]! [Aggressive behavior] hurts!” and redirect the child to an appropriate behavior/activity.
2. For Preschool and PreK Children: The child will be placed in “time-out” for no longer than one minute per the child’s age (i.e., Age 4 = 4 minutes). The teacher will discuss the behavior as well as the consequences of the behavior with the child.
3. An Incident Report will be filled out, signed by the teacher(s) and parent, initiated by CDC Administration, and sent home that day. No children’s names will be given.
4. A copy will be added to the child’s file.
5. The child’s parent will be called if the skin of the other child is broken or if this is the second occurrence of aggressive/disruptive behavior on the same day.
6. Teachers maintain ongoing Observation Reports for each child in the classroom. Each incident will also be recorded in full detail on the child’s Observation Report.

When Aggressive/Disruptive Behaviors Continue:

1. The child will be monitored to help prevent further incidents. The teacher(s) will continue to complete Observation Reports detailing each occurrence.
2. The child will be observed by the classroom teacher(s) and/or administrative staff to determine what is causing the child to act out (teething, communication, frustration, etc.)
3. The child will be given positive attention and approval for positive behavior, and correction and redirection for negative behaviors.
4. If needed, a parent conference will be scheduled with the Director and teacher(s).
5. At that time, a Behavior Plan will be agreed upon and implemented, which may include outside resources.
6. If the behavior continues after steps 1 through 5 have been completed and implemented, a second parent conference will be scheduled.
7. For the safety of the children in our care, Trinity CDC Administration reserves the right to send a child home if the child exhibits aggressive behavior unmanageable due to DHR Child Care Licensing/TCDC policies, is disruptive to the classroom's daily activity, or is unable to participate in their classroom’s daily activity. The child must be picked up in a timely manner or the child will be administratively withdrawn.
8. For the safety of the children in our care, if the behavior continues with no resolution even after we have exhausted all DHR Child Care Licensing and TCDC approved options, the child will be administratively withdrawn.

Children with Special Needs

All children are welcome based on classroom availability. Eligibility for children with special needs shall be evaluated on a case-by-case basis in accordance with the Americans with Disabilities Act (ADA). Children will not be denied admission if reasonable accommodations can be made.

Evaluation Process:

1. The child will be observed by the classroom teacher(s) and/or administrative staff to help assess the need and whether Trinity CDC can supply resources. The teacher(s) will complete Observation Reports detailing these observations.
2. A parent conference will be scheduled with the Director and teacher(s).

3. At that time, a Behavior Plan will be agreed upon and implemented, which may include outside resources such as but not limited to, UCP or Huntsville, Child's Play Therapy, Early Intervention or First Five Alabama.
4. If Trinity CDC staff are unable to make appropriate accommodations, the child will be administratively withdrawn.

Screenings and Evaluations

Screenings:

All children are developmentally screened in September or upon enrollment using the ASQ3 (Ages and Stages Questionnaire). These are completed by the child's teacher. A copy of the results are given to the child's parent(s) upon request.

Children scoring in the white range, developmental concerns are not indicated.

Children scoring in the gray range, potential developmental concerns are possible and the child's teacher will monitor progress.

Children scoring in the black range, are showing evidence of developmental concerns. Parents will be notified and encouraged to seek additional support through their child's doctor or other resources such as Help Me Grow Alabama, First 5 Alabama, UCP of Huntsville or Early Intervention.

ASQ3 screenings are then completed annually (September) by the child's teacher.

Evaluations:

TCDC uses evaluations which align with AELG (Alabama Early Learning Guidelines).

These evaluations are completed by the child's teacher three times a year (October, January and June).

A copy of the results are given to the child's parent(s) upon request.

Results from all screenings and evaluations are used to create developmental goals and individualized weekly lesson plan activities.

Personal Belongings and Toys

The teachers provide a full day of activities in all classrooms that are fully equipped to occupy the children's interests. Personal toys are permitted only when your child's teacher has requested them for a lesson or a soft nap time buddy.

The Administration insists that videos, toy weapons, action figures, candy, gum, breakable and potentially hazardous items not be brought to the TCDC. These and other non-permitted personal belongings will be kept in the TCDC main office for parents to get at the end of the day.

The TCDC cannot be responsible for lost or broken personal items.

Birthdays/Holidays

Birthday parties will not be held at Trinity CDC. Parents may bring a special snack for their child's birthday pending it is store bought, meets peanut free requirements and the plans are discussed with your child's teacher ahead of time. Individual treat bags need to be non-child specific and given to all children in the classroom.

Due to confidentiality policies, please do not take pictures or video of any child except your own. Videos created by TUMC for special events such as The PreK Christmas Program and PreK4 Graduation are for private use only and should not be shared through social media or other public platforms.

The cubbies are available for invitations to outside parties if all children in the class are invited.

The TCDC will celebrate all major holidays.

Teachers may ask parents to participate in providing store bought refreshments for these events through a sign-up sheet in the classroom (no homemade items, per DHR regulations).

Babysitting/ Personal Relationships

Trinity CDC and TUMC cannot be held accountable for events happening while staff are “babysitting”.

Trinity CDC staff are permitted to “babysit” pending it does not interfere with their job requirements and responsibilities.

Our expectations is that all children will be treated equally regardless of personal relationships outside of work. Favoritism will not be tolerated.

In the event that a teacher cohabitates with a parent of a child in their class, the child will be moved to a different class. In the event that is not possible, the child will be withdrawn. The child will also be withdrawn if it is in the best interest of their development.

Teachers are prohibited from transporting currently enrolled children in their personal vehicles to and from TCDC premises unless they are related to the child.

Child Abuse and Neglect

Our staff, like all educators in Alabama, is required by law to report any suspicion of child abuse or neglect to the Department of Human Resources. Any physical discipline such as but not limited to spanking, pinching, pushing is reportable by law. Parental physical discipline included.

DHR Performance Standards for Day Care Centers

As an Alabama DHR licensee, Trinity CDC will comply with all provisions of “The Performance Standards for Day Care Centers and Nighttime Centers”. A copy of this manual is available in the CDC Office.



Emergency Preparedness Plans and Procedures

607 AIRPORT ROAD
HUNTSVILLE, ALABAMA 35802
(256)489-7525



Location of Emergency Supplies

Fire Extinguishers:

Always use Fire Extinguishers according to attached directions.

- Main CDC hallway
- In Maintenance Room near Teacher's Resource Room
- Across from women's bathroom in Asbury Wing
- Aldersgate wing near toddler playground door
- Hallway near room 157
- Women's bathroom in New Room lobby

First Aid and Emergency Supply Kits:

- Each classroom has a supply of bandages for first aid use.
- The main CDC office has a supply of bandages for first aid use.
- There is an AED located on the left side of the New Room doors (first floor).
- There is an AED located on near the elevator doors (second floor).

Telephones for On-site Use:

- All classroom phones can call 911 and TUMC extensions.
- The phones located in the CDC administration offices and Teacher's Resource Room can make outside phone calls.

Telephones for Off-site Use:

- CDC administration/ TUMC staff will use their personal cell phones.

Evacuation Bags:

- There are Evacuation Bags in each classroom.
- Each bag must include at least the following
 - For Infant and Toddler room
 - Diapers for each child
 - Wipes
 - Gloves
 - Plastic bag for soiled diapers
 - Books and toys for entertainment
 - Flashlight
 - Band-Aids
 - Tissues
 - For Preschool rooms
 - Gloves
 - Books and games for entertainment
 - Plastic bag for trash
 - Flash light
 - Band-Aids
 - Tissues

Shelter in Place Emergency Bins:

- Located in Room 191
- Batteries
- Radio
- CDs
- First Aid Kit
- Blankets
- Books
- Infant/Toddler
 - Changing Pads
 - Diapers
 - Wipes
 - Age-appropriate snacks
 - Water
 - Bottles
 - Age-appropriate toys
- Preschool/PreK
 - Pull-Ups
 - Water
 - Age-appropriate snacks
 - Juice
 - Cups with lids
 - Coloring books
 - Crayons

Emergency Phone Numbers

- Huntsville Police Department Non-Emergency Number: 256-722-7100
- Huntsville Fire Department Non-Emergency Number: 256-722-7120
- Huntsville Fire Department: 256-427-7401
- Alabama Public Health Department: 1-800-338-8374
- Poison Control: 1-800-222-1222
- Huntsville-Madison EMA: 256-427-5130
- Huntsville National Weather Service: 256-890-8503

OR

CALL 911

**The safety of the children is
ALWAYS our main concern!**



Medical Emergency Procedure

Determine which first step is best for the situation.

- Call EXT 252 office or EXT 251. One of us will call 911 and the child's parents so teachers can focus on the children
- If you are unable to reach anyone at 252 or 251

CALL 911

- Using the "Speaker Phone" or "Intercom" button will allow you to speak to the 911 operator and tend to the child
- Alert a neighboring classroom to make Sheryl or Connie aware of the situation

**The safety of the children is
ALWAYS our main concern!**



Infectious Disease Emergency Plan

Trinity CDC administration will contract the Public Health Department if there is an outbreak of a communicable disease. This is defined by the Public Health Department. Please refer to information attached.

(<http://alabamapublichealth.gov/infectiousdiseases/assets/countyschoolsinfection2pg.11.17.15.pdf>)

In the unlikely event of an infectious disease epidemic, Trinity CDC staff and children will follow the directions and recommendations of the Public Health Department, the Emergency Management Agency and the Center for Disease Control. They will provide the instructions and make decisions based on the safety of the staff and children.


If the decision is made to close the center, parents will be notified to pick up their children immediately. The same late fee will apply.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Police Department, EMA and Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.

Communicable Disease Chart for Alabama's Schools and Childcare Facilities

Exclusions contained in this chart pertain to children and students only.

	Communicable Disease or Condition	Signs and Symptoms	Exclusion and Readmission Recommended Criteria	
Gastrointestinal	Diarrhea	Frequent loose or watery stools compared with normal pattern, abdominal cramps, fever, generally not feeling well	Exclude until no diarrhea for 24 hours. Exclude until stools are contained in the diaper or the child is continent, stool frequency is no more than 2 stools above child's normal frequency.	 <p>Notifiable Disease Reporters All physicians, dentists, nurses, medical examiners, hospital administrators, nursing home administrators, lab directors, school principals, and childcare directors are responsible for reporting Notifiable Diseases in Alabama. Notifiable Disease reporters must report "Outbreaks of any kind" to the Infectious Diseases & Outbreaks Division within 24 hours.</p> <p>Communicable diseases noted in red are reportable. Communicable diseases noted in black are not reportable unless associated with an outbreak.</p> <p>*An outbreak is defined as two or more similarly ill persons who live in different households and have a common exposure. All outbreaks must be reported and public health will be involved in investigating and providing control measures.</p> <p>Please visit: alabamapublichealth.gov/infectiousdiseases or call 1-800-338-6374 for more information.</p> <p>*All unvaccinated persons should be excluded until vaccination received or risk of transmission is over.</p> <p>Please visit: alabamapublichealth.gov/immunization or call 1-800-468-4599 for more information.</p> <p>*The individual must be symptom free for the timeframe specified without the aid of any medication that may suppress symptoms.</p>
	Jaundice	Yellowish discoloration of the whites of the eyes, skin, and mucous membranes	Exclude for 7 days after onset of illness.	
	Vomiting	Nausea, vomiting, or cramping	Exclude until no vomiting for 24 hours or until the individual provides medical documentation that the cause is not infectious.	
	Campylobacteriosis (<i>Campylobacter</i>)	Mild to severe diarrhea, may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.	
	Clostridium difficile Infection	Mild to moderate diarrhea, possible nausea, abdominal cramps, low-grade fever	Exclude until symptom free* for 48 hours.	
	Cryptosporidiosis (<i>Cryptosporidium</i>)	Acute non-bloody diarrhea, may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea	Exclude until symptom free* for 24 hours. Restrict recreational water activities (e.g., swimming, splash pad, water slide, etc.) for 2 weeks after symptom resolution.	
	Cyclosporiasis (<i>Cyclospora</i>)	Mild to severe diarrhea, may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.	
	Giardiasis (<i>Giardia</i>)	Mild to severe diarrhea, may have additional symptoms such as abdominal cramps, foul-smelling stools associated with anorexia, flatulence, malaise, weakness, nausea, vomiting, low grade fever, and abdominal discomfort	Exclude until symptom free* for 24 hours. Restrict recreational water activities (e.g., swimming, splash pad, water slide, etc.) for 1 week after symptom resolution.	
	Hepatitis A¹ Infection	Loss of appetite, fever, abdominal discomfort, nausea, fatigue, headache, dark brown urine, or yellowing of skin or eyes; young children less than 6 years of age may be symptom free	Exclude for 7 days after onset of illness. Individuals with known infection, but no symptoms should be excluded for 7 days after collection date of positive test.	
	Hepatitis E	Jaundice, fatigue, loss of appetite, nausea, fever, abdominal pain, and/or dark (tea-colored) urine	Exclude until symptom free* for 2 weeks after illness onset. Contact precautions recommended for diapered child for duration of illness.	
	Listeriosis (<i>Listeria</i>)	Mild to severe diarrhea, may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.	
	Norovirus Infection	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Exclude until symptom free* for 48 hours.	
	Rotavirus Infection	Acute onset of vomiting and/or watery diarrhea, possible vomiting, fever, abdominal pain, loss of appetite, dehydration	Exclude until symptom free* for 24 hours.	
	Salmonellosis (<i>Salmonella</i> non-Typhi)	Mild to severe diarrhea, may have additional symptoms such as abdominal cramps, vomiting, fever, bloody stools, or nausea	Exclude until symptom free* for 24 hours.	
	Sapovirus Infection	Acute onset of vomiting and/or diarrhea, possible nausea, abdominal cramps, low-grade fever, headache, fatigue, and myalgia	Exclude until symptom free* for 48 hours.	
Ears, Nose, and Throat	Shiga toxin producing E. coli Infection (STEC or E. coli, shiga toxin-producing)	Acute diarrhea (often bloody); may have additional symptoms such as abdominal cramps, vomiting, fever, fatigue, or nausea	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-6374.	
	Shigellosis (<i>Shigella</i>)	Loose, watery stools with blood or mucus, may have additional symptoms such as fever, headache, convulsions, or abdominal pain	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-6374.	
	Typhoid/Paratyphoid Fever (<i>Salmonella Typhi</i> /Paratyphi)	Sustained fever, may have additional symptoms such as weakness, stomach pain, headache, diarrhea or constipation, cough and loss of appetite	Exclude until symptom free* for 24 hours. Children <5 years of age – Follow-up testing may be recommended. Contact ADPH Infectious Diseases & Outbreaks Division for guidance at 1-800-338-6374.	
	Cold Sores (Herpes Simplex Virus)	Fever, irritability, sores in mouth, gums, or lips	Exclude children/student who do not have control of oral secretions and until sores have healed.	
	Common Cold (Multiple viruses)	Sore throat, runny nose, coughing, sneezing, headaches, and body aches	Exclude until symptoms subside and exercise droplet precautions.	
	Mononucleosis (Mono, Epstein-Barr Virus)	Fever, sore throat, swollen lymph nodes, fatigue	Exclude from contact sports and consult physician for clearance to participate in sports.	
	Mumps²	Swelling of one or more of the salivary glands, headache, low grade fever, and myalgia, anorexia and fatigue	Exclude for 5 days after onset of swelling. Without vaccine history, one should be excluded for 21 days after onset of swelling of most recent case.	
	Pink Eye (Bacterial or viral conjunctivitis)	Red/pink itchy, swollen eyes; eye discharge, possible light sensitivity; and/or eye pain	Exclude if child/student has a white or yellow drainage coming from the eye or eye pain and until evaluated by a physician.	
	Strep throat and Scarlet fever (Streptococcal pharyngitis)	Strep throat: Fever, red sore throat, swollen glands, strawberry tongue (occurs following peeling of a white coating from tongue) Scarlet Fever: A very fine raised rash (feels like sandpaper) is present on the neck, chest, elbow and groin	Exclude until 24 hours after beginning appropriate antimicrobial therapy and no longer have a fever.	
	Influenza² (Flu, seasonal)	Fever, chills, body aches, cough, runny or stuffy nose, sore throat, headache, and/or myalgia	Exclude until fever free for 24 hours and child is well enough for routine activities.	
Respiratory	Pertussis² (Whooping cough)	Runny nose, sneezing, low grade fever, and mild to occasional cough; a pause in breathing may be noted in infants with coughing spasms; Pertussis is known for uncontrollable, violent coughing which often makes it hard to breathe	Exclude until 5 days of recommended antibiotics, or 21 days from onset of cough for those who do not take antibiotics.	
	Tuberculosis (Pulmonary)	Fatigue, significant weight loss, fever, night sweats, cough that may produce blood, and chest pain; children may have no symptoms	Exclude until public health evaluates and provides notification that child/student is released to return to school or childcare facility. No exclusion for latent TB infection.	
	Chickenpox² (Varicella, varicella zoster virus)	Itchy fluid filled blisters that begin on face, chest, and back then spreads to the rest of the body.	May return when rash has crusted or, in immunized people without crusts, until no new lesions appear within a 24-hour period. Without vaccine history, one should be excluded for 21 days after rash appears* for most recent case.	
	Fifth disease (Human Parvovirus, erythema infectiosum)	Facial rash that can be intensely red with a "slapped cheek" appearance, fever, fatigue, myalgia, headache, a systemic macular-lace like and often pruritic rash on trunk that moves peripherally to arms, buttocks, and thighs	No exclusion is necessary if the child/student is healthy enough for routine activities because the period of contagion occurs before rash is evident.	
Skin and Rash	Hand, foot, and mouth disease (Coxsackie virus)	Fever, sore throat, poor appetite, vague feeling of illness, skin rash, flat or raised red spots usually on the palms of hands, soles of feet and may appear on knees elbows, bottom, or genital area; may experience diarrhea and vomiting	Exclude until child/student is free of fever for at least 24 hours.	
	Head Lice (Pediculosis)	Itching of the head and neck; visible crawling lice in the hair	Exclude until first head lice treatment is completed.	
	Impetigo (<i>Staphylococcus aureus</i> and/or Group A <i>Streptococcus</i>)	Rash anywhere on the skin but most often on the face, lips, arms, or legs; that spread to other areas; itchy blisters filled with yellow or honey colored fluid that oozes then dries and crust over.	Exclude until 24 hours of treatment has been initiated. Lesions on exposed skin should be covered with watertight dressing.	
	Measles² (<i>Rubeola</i>)	High fever, red eyes, runny nose, and cough; a rash appears 3 to 5 days after initial symptoms	Exclude until 4 days after rash appears. Without vaccine history, one should be excluded for 21 days, after rash appears* of most recent case.	
	MRSA (Methicillin-resistant <i>Staphylococcus aureus</i>)	Bump or infected area that is red, swollen, painful, warm to the touch with or without pus and drainage; common sites are legs, buttocks, groin, back of the neck, sites of skin trauma, such as cuts or abrasions	Exclude only if skin lesions are draining and cannot be completely covered with a watertight bandage.	
	Ringworm (Fungal infection, tinea dermatophytosis)	Fungus that may affect skin on almost any part of the body as well as finger and toe nails; ring shaped, itchy, red, scaly, rash, may develop; there may also be cracked skin and hair loss if the infection develops on the scalp	Exclude until after treatment begins. Cover lesions with waterproof dressing.	
	Roseola (Human herpes virus 6)	High fever, red raised rash which appears once fever has resolved	Exclude until fever is gone and other rash illnesses have been ruled out.	
	Rubella² (<i>Rubella virus</i> , German Measles)	Low grade fever (less than 101) and rash that starts on the face and spreads to the rest of the body	Exclude until 7 days after the rash appears. Without vaccine history, one should be excluded for 21 days after rash appears* of the last case in the outbreak.	
	Scabies (<i>Sarcoptes scabiei</i>)	Intense itching especially at night, pimple or tiny blister-like scaly rash which may affect much of the body, common in between fingers, and around wrists, elbows, armpits, and knees	Exclude until 24 hours after prescribed treatment has been completed.	
	Shingles (Herpes zoster, varicella zoster virus)	Painful rash on one side of the face or body; blisters form and typically scab over in 7-10 days; fever, headache, chills, and upset stomach	Exclude only if sores cannot be completely covered by a bandage or clothing; if not, exclude until sores have crusted and are dry.	
Invasive	Haemophilus influenza	Fatigue, fever, stiff neck, lack of appetite, chills, headache, nausea, vomiting, and irritability	Exclude until after 24 hours of initiation of physician treatment. Public health will advise regarding management.	
	Meningococcal Disease (<i>Neisseria meningitidis</i>)	Fever, chills, confusion, stiff neck, lack of appetite, fatigue, myalgia, limb pain, and sometimes a rash	Exclude until child has been on antibiotics for at least 24 hours.	
	Pneumococcal Disease (<i>Streptococcus pneumoniae</i>)	Ear infection, fever, ear pain, chills, behavior or appetite changes, ear redness or drainage	Exclude until at least 24 hours after beginning antibiotic therapy. Close contact with other children should be avoided.	

References:
Control of Communicable Diseases Manual, 20th Edition. 2015. American Public Health Association.
Managing Infectious Diseases in Childcare and Schools: A Quick Reference Guide, 4th edition. 2017. American Academy of Pediatrics.
Red Book. 2018 Report of the Committee on Infectious Diseases, 31st edition. American Academy of Pediatrics.

CD.Chart.Schools.09.19.ch



Loss of Utilities Emergency Plan

Such as power, water, heat, air conditioning or phone line

Trinity CDC and Trinity UMC administrators will contact the utility company and get an estimated time in which utilities will be restored. We will monitor the progress and give updates when possible.

If the estimated time is greater than 2 hours, we will monitor progress for 1 hour. If utilities have NOT been restored within that hour, Trinity CDC will close promptly one hour after (if CDC loses power at 1:30 PM and it has not been restored by 2:30 PM, CDC will close at 3:30PM). The same late pick-up fee will apply.

If utilities are restored after the closing announcement, the decision remains the same.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Police Department, EMA and Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.



Emergency Evacuation Plan

Such as Hazardous Materials Spill, Gas Leaks and Bomb Threats

In the unlikely event of a catastrophe that would force an evacuation of the surrounding area, Trinity CDC staff and children will follow the directions and recommendations of the Police Department, the Emergency Management Agency and the Fire Department. They will provide the meeting place safest for our staff and children.

- Infant/Toddler classrooms will use evacuation cribs.
- Toddler classrooms will use walking ropes/arm straps.
- Preschool and PreK classrooms will allow the children to walk carefully.

One teacher will lead the class in exiting the building through the main CDC entrance. The teacher will need to take the children's Sign In/Out sheets and the Evacuation Bag.

Transportation will be provided by Trinity vehicles, staff vehicles and any other available means.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Police Department, EMA and Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.



Fire Evacuation Plan

Upon the sounding of the fire alarm, all occupants MUST EXIT THE BUILDING IMMEDIATELY. DO NOT USE THE ELEVATOR IF THE FIRE ALARM SOUNDS. During this time, no persons will be permitted to enter the building.

- Infant/Toddler classrooms will use evacuation cribs to bring children to the designated location.
- Toddler classrooms will use walking ropes/arm straps to bring children to the designated location.
- Preschool and PreK classrooms will allow the children to walk carefully to the designated location.

One teacher will lead the class in exiting the building according to the building floor plan posted in the classroom. The teacher will need to take the children's Sign In/Out sheets and the Evacuation Bag. If possible, the last teacher exiting the room should close classroom doors.

All classes will re-assemble on the Holy Spirit side of the driveway to be counted and wait for the "All Clear".

If a class is on the playground or in chapel, music room, gym or other area when the alarm sounds, use the closest exit to get out of the building and proceed directly to the Holy Spirit side of the driveway, the designated safe area. Do not go back to the classroom.

Room #	Evacuation Path
168 and 169	Exit the main CDC entrance.
170, 171, 150 and 155	Exit through back door in classroom and proceed through the CDC parking lot.
172, 173, 174, 156, 157 and 160	Exit through the back door in the classroom and proceed through the CDC playground.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.



Inclement Weather Plan

Such as Severe Thunderstorms, Flash Flooding, Major Snowfall, Blizzards and Ice Storms

If inclement weather is pending, parents will refer to local media outlets regarding Huntsville City Schools. Trinity CDC will follow Huntsville City School decisions and announcements.

- If City Schools open one hour later than 8:00 a.m. (i.e. to allow roads to improve), the CDC will open at 9:00 AM.
- If City Schools open two hours (or more) later, the CDC will open at 10:00 AM.
- If a “weather day” occurs when the Huntsville City Schools are on break, a specific announcement pertaining to Trinity CDC will be made and announced via the Remind program and social media.
- If Huntsville City schools are closed for the day or shifts to an E-Learning Day, CDC is closed.
- If the Huntsville City Schools dismiss early on account of threatening or inclement weather, the CDC will close promptly one hour after (if Huntsville City Schools close at 1:30 PM, then Trinity CDC will close at 2:30 PM). The same late pick-up fee will apply.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Police Department, EMA and Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.



Weather Emergency Plan **Such as Tornado or Earthquake**

In the event of a weather emergency, during this time no persons are permitted to exit the building.

A member of Trinity CDC administration will notify the staff by using the telephone intercom system instructing them to follow the Weather Emergency Plan below.

- Infant/Toddler classrooms will use evacuation cribs to bring children to the designated location.
- Toddler classrooms will use walking ropes/arm straps to bring children to the designated location.
- Preschool and PreK classrooms will allow the children to walk carefully to the designated location.

One teacher will lead the class in exiting the classroom according to the building floor plan posted in the classroom. The teacher will need to take the children's Sign In/Out sheets and the Evacuation Bag. If possible, the last teacher exiting the room should close classroom doors.

If a class is on the playground or in chapel, music room, gym or other area when the alarm sounds, use the quickest route to the designated safe area. Do not go back to the classroom.

All classes will re-assemble in room 191 to be counted and wait for the "All Clear".

Parents will refer to local media outlets regarding Huntsville City Schools. Trinity CDC will follow Huntsville City School decisions and announcements.

- If Huntsville City Schools are on not in session, a specific announcement pertaining to Trinity CDC will be made and announced via the Remind program and social media.
- If Huntsville City schools are closed for the day or shifts to an E-Learning Day, CDC is closed.
- If the Huntsville City Schools dismiss early on account of threatening or inclement weather, the CDC will close promptly one hour after (if Huntsville City Schools close at 1:30 PM, then Trinity CDC will close at 2:30 PM). The same late pick-up fee will apply.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Police Department, EMA and Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.



Threat Response Plan

IMMEDIATE DANGER: Person or situation including weapons and/ or obvious intent to do harm.

A member of Trinity CDC administration will alert the staff by using the telephone intercom system by announcing a “**Hard Lock Down**”. TCDC administration will provide detailed information regarding the immediate danger including the physical and positional description.

- 1) All CDC staff will lock the doors of the classroom they are currently in.
 - 2) Turn out lights
 - 3) Sit in area as far away from doors and windows as possible, or under a desk, where you cannot be seen. The bathroom doors in each classroom also lock.
 - 4) DO NOT leave the area or come out for any reason until emergency personnel come get you.
 - 5) When possible, TCDC administration will communicate the threat to TUMC staff and Emergency Services.
- *In the event of a lock down, no persons shall be allowed to enter or leave the building***

SUSPICIOUS BEHAVIOR: Persons acting belligerently, strangely, refusing to leave the building, insisting on exploring restricted areas (CDC), or any behavior causing concern to an individual.

CDC staff must alert CDC administration immediately. CDC administration will assess the situation and make a decision based on the safety of the children and staff. If there is a need, CDC administration will lock all classroom doors and monitor the CDC hallways. Parents may continue to pick up their children with CDC administrative supervision.

A member of Trinity CDC administration will alert the staff by using the telephone intercom system by announcing a “**Soft Lock Down**”. TCDC administration will provide detailed information regarding the immediate danger including the physical and positional description. When possible, TCDC administration will communicate the threat to TUMC staff and Emergency Services.

If the situation escalates, follow the Immediate Danger Plan.

Trinity CDC staff and children will follow the directions and recommendations of the Police Department, the Emergency Management Agency and the Fire Department. They will provide the “all Clear” and meeting place safest for our staff and children.

Trinity CDC uses Constant Contact, Remind, Facebook and Twitter to keep parents as informed as possible. Please make sure the CDC office has a current email address and cellphone number that is checked regularly. In the event that CDC staff can not send information through these methods, we will work with the Police Department, EMA and Fire Department to ensure parents are notified in a timely manner.

Trinity CDC reserves the right to make closing, late opening and early closing decisions as well as changes to the plan at any time based on the safety of the children and staff whenever necessary.

Signature Page

By completing this form, I confirm that I have received and agree to abide by the Trinity CDC Parent Policies and Procedures as well as the TCDC Emergency Preparedness Plan. I further understand that by refusing to do so my child(ren) may be subject to administrative withdrawal of the program.

I also understand that these policies and procedures are subject to change at any time.

Child(ren)'s Name(s) (Printed)

Parent's Name (Printed)

Parent's Signature

Date Signed:
