



St. Athanasius Catholic School  
Parent/Guardian  
Student Handbook 25-26  
**3 Yr Old Preschool**

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Your Future StArts With Us!



# Table of Contents

<b>Philosophy &amp; Objectives</b>	<b>3</b>
Goals	3
Curriculum	5
<b>Preschool Daily Routine</b>	<b>5</b>
<b>Facilities</b>	<b>6</b>
<b>Licensing</b>	<b>6</b>
<b>School Hours &amp; Closing</b>	<b>6</b>
<b>Winter Weather Cancellations, Delays, and Early Dismissals</b>	<b>6</b>
<b>Board of Directors</b>	<b>6</b>
<b>Notice of Nondiscrimination</b>	<b>7</b>
<b>Admission Policy</b>	<b>7</b>
<b>Dismissal Procedures</b>	<b>8</b>
<b>Tuition</b>	<b>8</b>
<b>General Health Policy</b>	<b>8</b>
<b>Medication</b>	<b>9</b>
<b>Absences</b>	<b>9</b>
<b>Clothing</b>	<b>9</b>
<b>Drop-off &amp; Pick-up</b>	<b>9</b>
<b>Newsletter &amp; Calendars</b>	<b>10</b>
<b>Communicable Disease Chart</b>	<b>10</b>
<b>Snacks &amp; Nutrition</b>	<b>12</b>
<b>Field Trips</b>	<b>12</b>
<b>Guidance Policy</b>	<b>12</b>
<b>Biting Policy</b>	<b>13</b>
<b>Outdoor Play</b>	<b>13</b>
<b>Supervision &amp; Access</b>	<b>14</b>
<b>Transportation</b>	<b>14</b>
<b>Universal Precautions</b>	<b>14</b>
<b>Training Chart</b>	<b>16</b>
<b>Playground Inspections</b>	<b>17</b>
<b>Medical Emergency</b>	<b>18</b>
<b>Dental Emergencies</b>	<b>19</b>
<b>Dental Emergency Fact Sheet</b>	<b>20</b>
<b>HHS Minor Injuries</b>	<b>21</b>
<b>Staff Orientation</b>	<b>22</b>
<b>Ongoing Professional Development</b>	<b>23</b>

## Philosophy & Objectives

We at St Athanasius feel that growth takes love. Learning through love promotes loving to learn. We provide a warm, nurturing environment where children are valued, respected and feel important in the world. Every person in the world possesses a unique individuality, not simply for mere existence, but to fulfill a distinct purpose. Each child, created by God, must be recognized and accepted as an individual with his/her unique qualities, needs, and pattern of growth.

Our Preschool provides a positive learning environment enhancing the child's social, emotional, physical, and Spiritual development. We seek to give children a readiness in social and academic skills by encouraging exploration of their world through creative art, literature, music, food preparation, self-awareness, and play. Further, our Preschool seeks to provide your child with a home parallel to the security and love of your family. Our caring and qualified staff works to aid your child in developing independence and self-control, while gaining new knowledge and friendships.

## Goals

Guided by our philosophy, our objective is to aid each child in their unique development.

1. Fostering a love of learning lasting throughout the child's academic career
2. Developing self-worth and positive feelings about themselves
3. Imparting an understanding of the feelings and rights of others
4. Growing their appreciation of God's love for them
5. Providing a safe, stimulating environment where children can learn through a variety of caregiver and child initiated activities

## St. Athanasius School Mission Statement

### Mission

St. Athanasius school's mission is to provide an exceptional Catholic education for every student within our faith community, built on a foundation of Catholic virtues to learn, lead, serve, and pray as disciples of Christ.

### Vision

The St. Athanasius community, formed in faith, is a nurturing and forward thinking environment that teaches well-rounded individuals of a world that exists outside the classroom walls.

### 4 Great Things

Learning - Faith-Filled Education Rooted in Catholic Virtues -

Leading - Whole Child Development -

Serving - Dedicated and Caring Faculty -

Praying - Strong Community built on Faith and Service -

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### 1. Learning: Faith-Filled Education Rooted in Catholic Virtues

At St. Athanasius, students grow in both knowledge and faith. Through daily prayer, liturgical celebrations, and a Christ-centered curriculum, we help children build a lifelong relationship with God, living out the values of compassion, service, and integrity.

## 2. Leading: Whole-Child Development

We believe every child is uniquely gifted by God. Our approach nurtures academic excellence, emotional well-being, creativity, and spiritual growth—ensuring students are supported and challenged to thrive in all aspects of life.

## 3. Serving: Dedicated and Caring Faculty

Our teachers and staff are more than educators—they are mentors, role models, and partners in your child's journey. Their deep commitment ensures each student receives personalized attention, encouragement, and the tools they need to succeed.

## 4. Praying: Strong Community Built on Faith and Service

St. Athanasius isn't just a school—it's a family. Rooted in our Catholic mission, we foster a supportive, welcoming community where families, students, and staff come together to learn, lead, serve, and pray as disciples of Christ.

### I. Philosophy of St. Athanasius School

At St. Athanasius School, we believe in nurturing the whole child within a Christ-centered environment rooted in Catholic virtues and the teachings of the Church. Our mission is to form disciples of Christ who are prepared to learn, lead, serve, and pray throughout their lives.

- We strive to develop a program that fosters personal growth, moral responsibility, and spiritual formation in a faith-filled community. In this environment, children are guided to discover their God-given talents and develop the skills necessary to live as compassionate, thoughtful, and successful individuals.
- We encourage each student to grow as a self-directed, respectful, and independent child of God, promoting freedom of choice in age-appropriate ways that support moral development and spiritual maturity.
- We are committed to making learning a joyful and meaningful journey, rooted in Gospel values. By honoring each student's individual gifts—learning style, pace, and abilities—we personalize instruction to inspire confidence, creativity, and a love for learning.
- We intentionally cultivate an atmosphere where every student and adult feels valued and loved as a unique creation of God. By celebrating each individual's dignity and worth, we help all members of our community grow in faith and self-esteem.
- We believe that the formation of the whole child—mind, body, and spirit—requires active partnership among faculty, families, parish, and community. Through this collaboration, we draw upon the gifts of the Body of Christ to help students fully realize their potential as servant leaders in the world.

## Curriculum

St. Athanasius Preschool seeks to provide a diverse and exciting learning experience through a variety of means and methods including: songs, literature, creative art experiences, sharing and conversation time, science and nature activities, food preparation, field trips throughout the community, celebration of birthdays, holidays & family, and most importantly, play. All of these experiences and activities seek to back our primary skill objectives in these specific areas:

**Fine Motor:** Using a variety of manipulatives, art mediums, and games

**Art:** Cutting, pasting, painting, and coloring which develop fine motor skills as well as allowing free expression of creativity.

**Music:** Through singing, dancing, and instruments the child is exposed to new and familiar music, allowing further free expression.

**Literature:** A wide, rotating selection of books in the quiet reading corner for free choice and Regular story time helps build a lifetime love for reading.

**Discovery:** Develop an appreciation of nature and science by focus on an enjoyment and exploration and respect for nature

**Language Enrichment:** Storytelling, story listening, introducing both Spanish and sign language skills, familiarize children with different types of communication.

**Dramatic Play:** Materials offered to help build and extend social skills encourage imaginative interaction through dramatic play.

**Large Motor Skills:** A safe gymnasium with an inviting arrangement of equipment encourages active large-muscle exploration.

**Readiness:** Introduction to numbers, letter recognition, shapes, and colors. Weekly themes provide exposure to in-depth information on unique topics.

## Preschool Daily Routine

Children learn through routine. A general schedule of your child's routine at St. Athanasius Preschool is as follows (subject to change depending on student needs):

- Wash hands and sign in.
- Table activity until all children have arrived
- Circle time, including:
  - Prayer, songs, assignment of daily helpers, calendar, flag, weather, story
- Gym time
- Centers, including but not limited to: art, science, math, blocks, imaginative play, writing, puzzles, ABC's, technology, games
- Religion: Your child will hear Bible stories and be taught from our curriculum *I Am Special*
- Snack: Brought by parents, scheduled on snack calendar (see *Snacks & Nutrition*)
- Library/Storytime
- Craft/Outside time
- Dismissal

## Facilities

Located within the St. Athanasius School is blessed with a wealth of different areas for play and learning: access to the gymnasium for physical activity.

The three-year old program is located on the lower level floor of the school and has its own accessible restroom and lavatory.

## Licensing

St. Athanasius Pre School is fully licensed under the Iowa Department of Human Services.

## School Hours & Closing

- **AM Preschool:** 8:00 am-11:00 am **Monday, Wednesday, Friday**

The preschool will follow the Elementary School calendar and will be closed the same days as St. Athanasius closings. ***Please follow our academic calendar posted on the Website for details concerning the specific school year.***

## Winter Weather Cancellations, Delays, and Early Dismissals

St. Athanasius preschool follows the St. Athanasius School emergency closing procedures. If the elementary school is canceled due to inclement weather, the preschool will be canceled for that day. St. Athanasius School will generally follow the Jesup Public School dismissal/cancellation notices, please check local stations on the questionable days.

- **If the elementary school is delayed, preschool will be canceled.**

## Board of Directors

The St. Athanasius Board of Education, in conjunction with the Archdiocese of Dubuque, governs the school. The board consists of seven members of the Parish plus the Priest. The functions of the Board of Education are to:

- 1) Ensure that the operation of the St. Athanasius School complies with the laws of the State and with diocesan policy and is in accord with the doctrine of the Roman Catholic Church.
- 2) Develop the budget for the St. Athanasius School.
  - a. Oversee the collection and disbursement of financial resources necessary for the operation of the School.
- 3) Provide and maintain the facilities necessary to meet the educational goals of school.
- 4) Determine and implement a long-range plan for St. Athanasius.
  - a. Formulate and adopt general, educational, and financial policies that will guide the administration and enable the School to function efficiently and in such a manner as to maximize educational opportunities and enhance the quality of education provided.

## Notice of Nondiscrimination

Applicants for admission and employment, students, parents, employees, sources of referral of applicants for admission and employment with schools in the Archdiocese of Dubuque are hereby notified that the schools do not discriminate on the basis of race, color, national origin, sex, age, or disability as defined in Section 504 of the Rehabilitation Act of 1973 and Title I of the Americans with Disabilities Act, in admission or access to, or treatment or employment in, its programs and activities. Any person having inquiries concerning schools' compliance with the regulations implementing Title VI, and Title IX, of the Civil Rights Laws, the Americans with Disabilities Act or Section 504 is directed to contact: Lynn Osterhaus Contact Info:

Lynn Osterhaus,  
Human Resource Coordinator  
1229 Mt. Loretta Avenue  
Dubuque, Iowa 52004  
Phone: (563) 566-2580

### Phone Numbers/Contacts

School Office: 319 827-1314

Website: [www.saintaschool.com](http://www.saintaschool.com)

## Admission Policy

St. Athanasius Preschool admits children regardless of race, creed, color, sex, national origin or religion. Children who are 3 years old up to kindergarten age are eligible to enroll. Admission requirements and enrollment procedures are as follows:

Enrollment is based on a first-come, first-serve basis pending completion of necessary forms.

1. A child must be 3 years old by September 15th of that school year to be admitted into the 3 year old class.
2. A child should enroll and begin preschool in August (or the start of the current school year) if they are planning to attend preschool that year.
3. Children in the 3 year old class will not be allowed to advance into the 4 year old class during the school year.
4. Children must be fully potty trained to be admitted into St. Athanasius Preschool.
5. All necessary (DHS) forms, medical and immunization records must be completed and on file in the office before the first day of the child's attendance. Forms may be picked up in the school office or online. Documentation of a valid Certificate of Immunization Exemption (Religious or Medical) or Provisional Certificate of Immunization may be submitted in lieu of a Certificate of Immunization.

## Dismissal Procedures

Sometimes preschool is not the most beneficial option for a child. If a child is exhibiting consistently disruptive or dangerous behavior, we may ask you to withdraw your child. No child will be withdrawn without a conference with the parent, director and teachers.

Parents are asked to provide one month's notice if and when they choose to withdraw their child from the program.

## Tuition

Tuition is covered by Saint Athanasius Educational Trust (SEAT).

## General Health Policy

Everyone must wash their hands when entering the classroom. Each child is required by state regulations to have on file a physical examination report and an immunization record.

This is required prior to admission into the center and must be done before EACH school year the child attends the program. The center must also have on file for each child a signed Emergency Medical Consent form authorizing emergency care at the local hospital. Emergency numbers for reaching the parent or guardian and another authorized person must also be on file.

No child who arrives at the center noticeably ill, with a rash, or with a fever will be admitted for that day. If a child becomes ill, parents will be called to pick up the child.

Parents who are working or going to school are encouraged to have a back-up plan for a sick child. If your child should contract a communicable disease (please reference the included chart), please inform the director so that precautions may be taken. We request that you phone in or email the teacher to let us know when your child is ill and will not be attending school. If a child is not feeling well or is running a temperature, other arrangements must be made for that day. Your child MUST be fever free for 24 hours without the aid of Tylenol (or other fever reducer) or have been on an antibiotic for 24 hours upon returning to the center.

Please keep your child home if he/she:

- Has a fever (99°F and over must stay home)
- Is vomiting or has vomited in the last 8 hours
- Has a communicable illness such as chicken pox, Strep infection or any other illness that is considered contagious by Buchanan County Health, please reference included chart under Communicable Disease Chart
- Has diarrhea. If your child is still experiencing diarrhea, do not bring him/her back unless you have a signed, written statement from your physician indicating that it is not contagious.

You will be contacted immediately if your child exhibits any of the above symptoms. You will be asked to remove your child until the symptoms have subsided. ***This policy is for your child's welfare as well as the welfare of other children in the center and will be strongly enforced.***

## Medication

Any sort of medication to be given at the center will be given by certified staff. The medication must be authorized for administration and accompanied by clear instructions in writing by the parent/guardian. Authorization forms are included on our website or are available from the center. A parent must complete these forms monthly. The medication must be in its original container with its name, physician's name, and the amount to be given printed on the label. Medications will be stored in a designated area inaccessible to children. Medications may NOT be stored in a child's cubby or backpack. Pharmacies will usually divide the medication into two separate bottles upon request.

## Absences

We ask that you call the school office (827-1314) or email the teacher if your child will be absent or late. Please also call or email to inform the teacher should there be an inconsistency in usual pickup. For instance, if your child will be picked up early, later or by a different person than usual even if this person is listed on your release forms. Doing so allows the teachers to be prepared.

## Clothing

Preschool does not have a dress code, however, please keep in mind the following: We encourage the children to explore and engage in fun, sometimes messy activities, clothing should be functional and washable. Additionally, belts, suspenders, jeans with difficult snaps, bodysuits, and jumpers that button in the back hinder the child's independence (especially in toileting) and should be avoided. Children will have a special cubby area with a hook to store their things.

Every child needs to have an extra set of clothing on hand at all times (seasonally appropriate). As the weather changes we ask that your child be appropriately dressed for the outdoors. Additionally, as footwear is important for the activity of children, flip-flops should never be worn to the center, as they tend to cause trips, blisters, and constrict active movement. Sandals must have a back strap. We ask that you label ALL of your child's extra clothing which could get lost or mixed up with someone else's clothing e.g. mittens, boots, hats, coats, shoes, change of clothes.

## Drop-off & Pick-up

All Preschool students are to be dropped off and picked-up by a parent/guardian or authorized adult. Preschoolers are not eligible to take the school bus. Children should not be brought to preschool more than 5 minutes before class begins, nor picked up more than 5 minutes after class is over.

Pick up and drop off will occur in the North parking lot (behind the school building) and enter between the church and the school entrance. The door will be programmed to be unlocked at 11 a.m. Go directly to the left down the stairs and walk them to the 3 yr old preschool room. (Mrs. Weber or Ms. Youngblut) will be there to greet you and your child.

The first few weeks of school drop off and pick up can be confusing, so we ask for your help. As the teachers are watching children in the classroom who have already arrived, it is not always possible to greet every parent upon arriving and leaving. The teacher's eyes are on the children

coming and going, but to ensure the safety of your children we ask you to please make eye contact with a teacher upon arriving and leaving. This will also help us to recognize the parents of the children. Once the parents have arrived at pickup the child is the responsibility of the parents.

## Newsletter & Calendars

Periodically a newsletter will be sent via email, available in hardcopy upon request. Please take the time to read through it. It contains information on what your children have done and will be doing at Preschool. Calendars are also posted each month, one containing important dates of upcoming events and the other with the snack schedule for the month.

## Communicable Disease Chart

Below is a list that contains many common communicable diseases, but should not be assumed to be a complete catalog. Readmission after a communicable illness shall include written permission from the health officer, physician or practitioner, before any child is readmitted to the center/preschool following any disease, which requires exclusion, not mere absence.

Disease	Usual Interval	Main Symptoms	Minimum Exclusion
'Immunization Is Available	Between exposure and first symptoms of disease.		
'Chicken Pox	13 to 17 days	Mild symptoms and fever. Pocks are blistery Develop scabs, mostly on covered parts of the body.	7 days from onset of pocks or until pocks became dry.
Conjunctivitis (Pink Eye)	24 to 72 hours	Tearing, redness, and puffy lids, eye discharge.	Until treatment begins or Dr. approves re-admission
Erythema Infectiosum (5th Disease)	4 to 20 days	Usual age 5 to 14 years, unusual in adults, Brief prodrome of low-grade fever followed by Erythema (slapped cheek) appearance on cheeks, lace-like rash on extremities lasting a few days to 3 weeks Rash seems to recur.	After diagnosis. no exclusion.
German Measles (Rubella)	14 to 23 days	Usually mild. Enlarged glands in neck and behind the ears. Brief red rash.	7 days from onset of rash. Keep away from pregnant women.
Haemophilus	2 to 4 days	Fever, lethargy. stiff neck and back	Until physician permits return
Hepatitis A	Variable 15 to 50 days, (Average 28- 30 days)	Abdominal pain, nausea, usually fever, Skin and eyes may or may not turn yellow	14 days from onset of clinical disease and at least 7 days from onset of jaundice.
Impetigo	1 to 3 days	Inflamed sores with pus	45 hours after antibiotic therapy started or Dr. permits return
Measles	10 days to fever 14 days to rash	Begins with fever, conjunctivitis, runny nose, Cough, then blotchy red rash	4 days from onset rash
Meningococcal Meningitis	2 to 10 (Commonly 3 to 4 days)	Headache, nausea, stiff neck fever.	Until physician permits return
Mumps	12 to 25 days	Fever, swelling and tenderness of glands at angle of jaw	9 days after onset of swollen glands or until swelling disappears,
Pediculosis (Head/Body Lice)	7 days for eggs to hatch	Lice and nits (eggs) in hair	24 hours after adequate treatment to kill lice and nits
Ringworm of Scalp	10 to 14 days	Scaly patch. usually ring shaped, on scalp,	No exclusion, no swimming, gym or contact sports.
Scabies	2 to 6 weeks initial exposure:	Tiny burrows in skin caused by mites	Until 24 hours after treatment

	1 to 4 days re-exposure		
Scarlet Fever Scarlatina Strep Throat	1 to 3 days	Sudden on-set, vomiting, sore throat, fever, later fine rash (not on face) Rash usually only with the first infection.	24 hours after antibiotics started and no fever.
'Whooping Cough (Pertussis)	7 to 10 days	Head cold, slight fever, cough, characteristic whoop after about 2 weeks.	5 days after start of antibiotic treatment,

## Snacks & Nutrition

There will be a morning snack during preschool hours. The snack calendar will inform you as to when your child will need to provide snacks for his/her class. Some quick examples of good snacks are whole-wheat crackers/carrots, fruit/yogurt, or cheese/apples. Also this is the perfect age to expose children to different fruits and vegetables. If you choose to bring juice make sure that it is 100% juice, not a juice drink. However, we will provide milk or water at school. Our staff (who are all First Aid certified by the American Heart Association) closely supervises snack time. However, please be aware of potential choking hazards when choosing snacks. Special treats for birthdays are acceptable, but must also include other foods to meet the nutritional requirements, such as fruits or vegetables.

***Food Supplements, Modified Diets, and/or Food Allergies:*** If your child requires a food supplement or a modified diet, you must secure written information from your physician regarding this. Additionally, if your child has a food allergy, please notify the preschool before the first day of attendance so accommodations can be made. Please speak with the administrator for more details regarding this policy.

## Field Trips

We will plan a few field trips during the year. The field trips will be marked on the calendar. Several days before our field trips a permission slip will be sent home with your child informing you of the time and place of the trip. This form **MUST** be signed by you and returned in order for your child to accompany us on the field trip. We will need parent volunteers to go with us on our trips. Parent volunteers will also be asked to help transport the children with car seats. Sign up sheets will be posted in your child's classroom.

## Guidance Policy

Acceptable behavior is encouraged by use of positive reinforcement. This gives children good feelings about his/her behavior and serves as an example to other children to act in such a way to receive praise. At St. Athanasius we treat all children with dignity and respect in all situations. Rather than reprimand, we work to redirect. When a child acts inappropriately, the child will be pulled aside quietly and privately reminded of the appropriate behavior.

There are some cases when time out may be necessary, for example, if a child is hurting another or has been reminded several times to correct a specific behavior. In this case, the child will sit their age in minutes (3min. for 3 y.o., 4min. for a 4 y.o., etc.). Following the sit, the teacher and child will discuss the event, focusing on the negative behavior (rather than the child), requiring the child to think about the inappropriate behavior to encourage development of their self-control. All consequences to negative behavior will be clear, reasonable, logical (to a child), and followed through with the child as an opportunity for learning and development.

## Biting Policy

Biting is a natural part of a child's development. Children bite for a variety of reasons such as teething, lack of verbal skills, overstimulation, hunger, fatigue, aggression, attention- getting, etc. Biting often surfaces when preschoolers are first in a new setting. Biting, however, is not an acceptable behavior. The staff will carefully, thoughtfully, and consistently handle any biting situation by:

- Stopping the action quickly by saying "No" or "Stop"
- Assessing the situation quickly to determine the cause of biting (child's frustration, hunger, teething, fatigue, separation anxiety, etc.)
- Attending to the child that has been bit.
- Talking to the biter in the following manner:
  - "Teeth are not for our friends."
  - "At preschool we use our words."
- Redirecting the biter to another activity or area.
- Finishing the interactions on a positive note by reassuring the biter that he or she is still important to you and the rest of the staff.

If the biting continues, the child will be put in time out for (1) minute per year of age. If a bite breaks the skin and/or draws blood, the child will be sent home for the day. The staff will notify the parents of the biter and the parents of the child that was bitten in writing as an incident report, informing them of its severity.

Parents will be asked to work cooperatively with staff to rectify the biting situation. If the biting becomes ongoing and more severe, and the child continues to bite and injure other children, it will be necessary for the parents to withdraw their child from the program. The parents will be given one week to make alternative arrangements. *It is the responsibility of the preschool staff to ensure the safety of all children in our care.*

## Outdoor Play

Research has shown that children stay healthier when they have daily outdoor play. Based on this information and DHS requirements, outdoor time will be included in our program when weather permits. We will limit the amount of time outside when the temperatures are very warm or very cold. If the situation requires it, we will also adjust outdoor time due to rain, threatening weather, ozone warnings, etc. On days that outdoor play is not provided, we will include a time for indoor gross motor activities. Please send your children with the proper clothing so they may be comfortable and safe whenever we are outside.

## Supervision & Access

We have an open door policy toward parents and primary caregivers at St. Athanasius. Parents should feel free to visit at any time (a phone call first is always appreciated to ensure we will be in our classroom), although we ask that care is taken to cause minimal disruption to the program.

In the interest of child safety, it is necessary to take precautionary and preventive measures to assure access to children is limited to only those persons with authorization. Staff will release children only to authorized persons on the release form provided by the parent. If an emergency arises, the parent must provide a written, signed note giving permission for a specific person to pick up the child. If staff does not recognize, or is unsure of the identity of any person, Photo Identification may be checked.

All staff have regular background checks and are responsible for ensuring the safety of children and preventing harm by being proactive and diligent in supervising not only the children, but other people present at the facility. Parent volunteers, when present with St. Athanasius preschool, should follow the policies set forth in this handbook and the guidance of present staff. Staff will provide the primary supervision over both children and volunteers, monitoring all present, assuring proper care and conduct.

*Unlimited Access (posted in accordance with DHS regulations of all preschool facilities):* Parents shall be afforded unlimited access to their children and to the teacher caring for their children during the preschool's hours of operation or whenever their child is in preschool, unless parental contact is prohibited by court order. The provider shall inform all parents of this policy in writing at the time the child is admitted to preschool.

## Transportation

**St. Athanasius does not provide transportation for preschoolers.** Guardians must provide the name and emergency contact information of the responsible person who will pick-up and drop off the preschool student at time of enrollment. Parents or legal guardians are asked to keep their information current by reporting changes to the preschool teacher or elementary school secretary. All information will be updated at least quarterly by teaching staff. For children who have special needs for transportation, the facility will use a plan based on a functional assessment of the child's needs related to transportation. Any accommodations indicated in the child's Individualized Educational Program will be implemented as described.

### UNIVERSAL PRECAUTIONS

ALL blood and body fluids are to be treated as potentially infectious.

All staff and volunteers must always exercise good hygiene practices in the work place, particularly in and around classrooms. They serve as role models for children as they develop hygiene habits.

**Handwashing:** The best possible means to prevent disease and control infection is good handwashing. This should be done as soon as possible after:

1. Helping children with toileting

2. After nose-blowing (your own or assisting children)
3. Changing diapers or undergarments
4. Before and after changing or applying dressings to wounds
5. After your toilet use, combing hair, applying make-up, etc.
6. Before setting tables, working with foods or feeding children
7. After cleaning up spills, body fluids or other potentially dangerous materials
8. After outdoor activities
9. AFTER REMOVING GLOVES

**Method:**

1. Wash hands under running water
2. Wet hands with water and apply a heavy soap lather
3. Wash all areas of the hands-between fingers, around nail beds, under finger nails and back of hands
4. Rinse well under running water holding hand so water flows from wrist to finger tips
5. Dry with disposable towel, using a new towel
6. Use towel to turn off faucet and discard
7. Use hand lotion to prevent cracks in the skin which are openings for germs.

Special antibacterial cleaning towelettes should be used when soap and water are not available, to be followed up by soap and water AS SOON AS POSSIBLE thereafter.

**Clean-Up:**

Disposable gloves should be worn anytime staff or volunteers need to clean up a blood spill, vomitus, or a child who has had a diarrhea-like accident. Paper towels should be used for clean ups. Changing soiled clothes should take place on a disposable surface or a non-porous surface which can be disinfected. Where a diaper changing area is available, ALWAYS disinfect after each use.

Use a solution of 1 part bleach to 10 parts water or to disinfect, ¼ C bleach to 1 gallon water. Clean up surfaces that have been contaminated with blood, mucus or any other body fluid. Mops should be cleaned and rinsed in the bleach solution.

Put cloth soiled or wet diapers or other clothing in a plastic bag and tie securely. Label with the child's name and send it home with a parent.

### **Sharps:**

The greatest chance for blood exposure comes from skin punctures from contaminated articles.

1. Use a broom and dustpan or tongs to pick up sharp objects like needles or broken glass.
2. Dispose of sharp items in puncture resistant containers.

### **Bloody Materials:**

Gauze, sponges or towels that have been saturated with blood should be placed in leak proof plastic bags and tied off so they cannot be emptied and reused. Call the nurse for further instructions.

### **Employee/Student Health Status:**

1. Employees with open lesions or broken skin should keep these areas covered.
2. Children in child care programs who have open sores should have these covered by a dressing to keep them from being contaminated, from touching others who may have scratches, or accidentally be contaminated from any oozing or bleeding.

### **Food, Drink, and Cosmetics:**

Eating, drinking, applying cosmetics or handling contact lenses should not be done in areas where there is a potential for exposure to blood borne pathogens.

### **Personal Protective Equipment:**

All personal protective equipment will be provided to employees. This equipment has been chosen based upon anticipated exposure to blood and other potentially infectious materials. The equipment provided consists of disposable protective gloves for use when attending to any situation in which exposure to blood, potentially infectious materials, non-intact skin, and mucous membranes may occur. Gloves are available and located in the following locations -----.

Adapted from Head Start

### **Training Chart: Preschools Licensing Standards and Procedures**

**WITHIN FIRST YEAR OF EMPLOYMENT THEREAFTER 1 hour of universal precautions (within first three months) 1 hour of universal precautions annually per OSHA Training for mandatory reporting of child abuse (within first three months) Maintain current certification for mandatory reporting of child abuse Certification in American Red Cross or American Heart Association infant, child, and adult cardiopulmonary resuscitation (CPR) Maintain current certification for infant, child, and adult CPR Certification in infant, child, and adult first aid that uses a nationally recognized curriculum or is received from a nationally recognized training organization (see rule) Maintain current certification for infant, child, and adult first aid**

**Minimum health and safety training:** • Prevention and control of infectious disease, including immunizations • Prevention of sudden infant death syndrome and use of safe sleep practices • Administration of medication, consistent with standards for parental consent • Prevention of and response to emergencies due to food and allergic reactions • Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic • Prevention of shaken baby syndrome and abusive head trauma • Emergency preparedness and response planning for emergencies resulted from natural disaster or man caused event • Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants • Precautions in transporting children • Child development 10 contact hours of training from: • Child development • Guidance and discipline • Developmentally appropriate practices • Nutrition • Health and safety • Communication skills • Professionalism, business practices • Cross-cultural competence. Training received for CPR, first aid, mandatory reporting, and universal precautions does not count toward the 10 hours. Staff that completed a comprehensive training package of at least 10 contact hours offered through a child care resource and referral agency or community college within 6 months before initial employment are waived from first year's 10 contact hours of training. Staff must receive 6 contact hours of training from the topical areas. Center directors and on-site supervisors must receive 8 contact hours of training annually from the topical areas.

## **Monthly Playground Inspection**

S = Satisfactory   NA = Not Applicable   U = Unsatisfactory

1. Adequate protective surfacing under and around the Equipment (§2.4)
2. Surfacing materials have not deteriorated or been compacted or been displaced under heavy use areas. (§2.4)
3. Loose-fill surfacing materials have no foreign objects or debris. (§2.4)
4. The entire play area has satisfactory drainage, especially in heavy use areas such as under swings and at slide exits. (§2.4)
5. There are no sharp points, corners or edges on the equipment (§3.4).
6. There are no missing or damaged protective caps or plugs (§3.4).
7. There are no hazardous protrusions (§3.2 and Appendix 8).
8. There are no potential clothing entanglement hazards, such as open S-hooks or protruding bolts (§2.5.2, §3.2, §5.3.8.1 and App B).
9. There are no crush and shearing points on exposed moving parts (§3.1).
10. There are no trip hazards, such as exposed footings or anchoring devices and rocks, roots, or any other obstacles in a use zone (§3.6).
11. There are no loose fastening devices or worn connections. (§2.5)
12. Moving parts, such as swing hangers, merry-go-round bearings, and track rides, are not worn. (§2.5)
13. There are no rust, rot, cracks, or splinters on any equipment (check carefully where it comes in con-tact with the ground). (§2.5)
14. There are no broken or missing components on the equipment (e.g., handrails, guardrails, protective barriers, steps, or rungs). (§2.5)
15. There are no damaged fences, benches, or signs on the playground. (§2.5)
16. All equipment is securely anchored. (§2.5)
17. Paint (especially lead paint) is not peeling, cracking, chipping, or chalking. (§2.5.4)

18. There are no areas of visible leaded paint chips or accumulation of lead dust. (§2.5.4)
19. There are no user modifications to the equipment, such as strings and ropes tied to equipment, swings looped over top rails, etc. (§4)
20. The entire playground is free from debris or litter such as tree branches, cans, bottles, glass, animal waste, etc. (§4)

Please date and initial

YEAR: \_\_\_\_\_

Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
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### **Medical Emergency**

In the event a child should need emergency medical care and a delay in treatment would be harmful, the following should be followed:

1. Each center should have on file an Emergency Permission form for each child enrolled. This form must be signed prior to enrollment by parent or guardian with a copy submitted to the administration office.
2. Be sure to keep emergency numbers updated.
3. First-aid kits & Emergency Information should accompany children at all times, including outdoor time, study trips, & field trips.

### **Injuries that need immediate medical care:**

- Loss of consciousness (longer than one minute) or semi-consciousness
- Breathing difficulties
- Anaphylactic shock
- Hives that appear quickly
- Severe bleeding
- Unequal pupils
- Seizure (without a health care plan)
- Suspected neck or back injury
- Continuous clear drainage from nose/ears after a blow to the head
- Abdominal pain after a blow to the abdomen
- Severe abdominal pain that causes child to double over
- Severe headache
- Severe burns
- Repeated forceful vomiting
- Vomiting blood
- Open fractures or possible broken bones
- Impaled objects
- Shock

### **Procedure:**

1. Call 911 immediately when recognizing signs & symptoms that require immediate medical attention.
2. Call the child's parent/guardian immediately after calling 911 to inform them of the child's symptoms & where they will be transported for medical care.
3. Staff will provide first aid as trained in an approved First Aid training course until emergency personnel arrive. a. Use personal protective equipment, such as gloves, as necessary.
4. The staff person should ride in the ambulance or drive to the hospital with the child permission form.
5. The staff person will remain at the hospital with the child until the parent/guardian arrives and is able to assume responsibility.

## Dental Emergencies

**Toothache:** Rinse the mouth with warm water to clean it out. Place a cold compress or ice wrapped in a cloth on the outside of the cheek. Call and go to the dentist as soon as possible. Do NOT use heat or place aspirin on the tooth or gum tissue.

**Broken Tooth:** Rinse the mouth with warm water to clean the area. Place a cold compress on the face to reduce swelling. Call and go to the dentist as soon as possible. If possible, bring the broken tooth fragment with you to the dentist.

**Knocked-Out Tooth:** If it is a baby tooth, call the dentist as soon as possible. Do NOT attempt to put a baby tooth back in the socket.

If it is a permanent tooth, rinse it gently in cool water. Do NOT scrub it or clean it with soap. If possible, put the tooth back in the socket and hold it there with clean gauze or a wash cloth. If the tooth cannot be put back in the socket, place the tooth in a clean glass with milk, saliva, or water. Take the tooth and go to the dentist immediately.

**Bitten Lip or Tongue:** Clean the area gently with a cloth and apply direct pressure to the bleeding area. If swelling is present, apply a cold compress. If bleeding does not stop, go to a hospital emergency room immediately.

**Objects Wedged Between Teeth:** Try to remove the object with dental floss, guiding the floss carefully to avoid cutting the gums. If using floss does not work, call the dentist. Do NOT try to remove the object with a sharp or pointed object.

**Possible Fractured Jaw:** Apply a cold compress to control swelling. Go immediately to the emergency room of a local hospital . Head injuries can be life threatening.

Oral Health Bureau Iowa Department of Public Health 1-866-528-4020

**AGD: FACTSHEET** Compiled for you by the Academy of General Dentistry

### DENTAL EMERGENCIES

Dental emergencies can be avoided by taking some simple precautions, such as wearing a mouth guard

during sports and recreation and staying away from hard food such as candy that may crack a tooth. Accidents do happen however, and it is important to know what actions to take immediately. Injuries to the mouth may include teeth that are knocked out (avulsed), forced out of position and loosened (extruded) or fractured. In addition, lips, gums or cheeks can be cut. Oral injuries are often painful and should be treated by a dentist as soon as possible.

### **What do I when a tooth is knocked out?**

Immediately call your dentist for an emergency appointment. Handle the tooth by the crown, not the root. Touching the root (the part of the tooth below the gum) can damage cells necessary for bone re-attachment. Gently rinse the tooth in water to remove dirt. Do not scrub. Place the clean tooth in your mouth between the cheek and gum to keep it moist. It is important not to let the tooth dry out. If it is not possible to store the tooth in the mouth of the injured person, wrap the tooth in a clean cloth or gauze and immerse it in milk or saline solution.

### **Can I somehow prepare for dental emergencies?**

Yes, by packing an emergency dental care kit including:

- ☐ Dentist's phone numbers (home and office)
- ☐ Saline solution
- ☐ Handkerchief
- ☐ Gauze
- ☐ Small container with lid
- ☐ Ibuprofen (Not aspirin. Aspirin is an anti-coagulant, which may cause excessive bleeding in a dental emergency.)

### **What do I do if the tooth is pushed out of position?**

Attempt to reposition the tooth to its normal alignment using very light finger pressure, but do not force the tooth. Bite down to keep the tooth from moving. The dentist may splint the tooth in place to the two healthy teeth next to the loose tooth.

### **What about when the tooth is fractured?**

Rinse your mouth with warm water and use an ice pack or cold compress to reduce swelling. Take ibuprofen, not aspirin, for pain. Minor fractures can be smoothed by your dentist with a sandpaper disc or simply left alone. Restorative procedures can also be done to fix the tooth. In either case, treat the tooth with care for several days. Moderate fractures include damage to the enamel, tissue and/or pulp. If the pulp is not permanently damaged, the tooth may be restored with a full permanent crown. If pulp damage does occur, further dental treatment will be required. Severe fractures often mean a traumatized tooth with a slim chance of recovery.

### **What should I do when the tissue of my mouth is injured?**

Injuries to the inside of the mouth include tears, puncture wounds and lacerations to the cheek, lips or tongue. The wound should be cleaned right away with warm water, and the injured person taken to a hospital emergency room for the necessary care. Bleeding from a tongue laceration can be reduced by pulling the tongue forward and using gauze to place pressure on the wound.

# Policy and Procedures for Reporting Minor Injuries, Health Changes, or Behavioral Concerns

## Purpose:

To ensure prompt, clear, and consistent communication with parents or guardians regarding any minor injury, change in health status, or behavioral concern that occurs while a child is in our care.

## Policy Statement:

St. Athanasius Early Learning Center is committed to maintaining open communication between staff and families. Any minor injury, change in health condition, or behavioral concern will be documented and reported to the child's parent or guardian **on the day of the incident**.

## Procedures:

### 1. Immediate Response:

- Staff will assess and provide first aid as needed for any minor injury (e.g., bumps, scrapes, small cuts).
- Comfort and care will be provided immediately.

### 2. Documentation:

- Staff will complete an **Incident or Behavior Report Form** describing the occurrence, actions taken, and any follow-up care needed.
- The form will include the date, time, location, witnesses (if any), and staff signature.

### 3. Parent Notification:

- Parents will be informed **the same day** via direct conversation at pick-up, a phone call, or written report.
- A copy of the completed form will be given to the parent, and one copy retained in the child's file.

### 4. Follow-Up:

- The Director or Lead Teacher will review all incident reports weekly to identify patterns and implement preventive measures if necessary.
- If the concern continues, staff will schedule a parent meeting to develop a plan of support for the child.

## Reference:

Iowa HHS Child Care Licensing Standards, 441 IAC Chapter 109.10(1) "Injury and Incident Reporting."

# Staff Orientation Plan

## **Purpose:**

To ensure that all new staff members understand and follow St. Athanasius Early Learning Center's mission, policies, and Iowa HHS licensing regulations before beginning work with children.

## **Policy Statement:**

All new employees, substitutes, and volunteers will participate in a structured orientation process within their first week of employment. Orientation ensures staff are knowledgeable, competent, and prepared to provide a safe, nurturing environment.

## **Orientation Procedures:**

### **1. Introduction and Overview:**

- Welcome to St. Athanasius Early Learning Center and review of our Mission and Vision.
- Introduction to program structure, age groups served, and classroom assignments.

### **2. Policy Review:**

- Review of center handbook including:
  - Supervision and safety procedures
  - Child guidance and behavior management policies
  - Emergency preparedness plan
  - Health, sanitation, and infection control procedures
  - Child abuse reporting obligations
  - Daily schedule and classroom routines
  - Communication procedures with parents

### **3. Licensing and Compliance Training:**

- Review of Iowa HHS Licensing Standards (441 IAC Chapter 109).
- Training in mandatory reporter requirements, universal precautions, and first aid/CPR (if not already certified).

### **4. Facility Tour and Introduction to Staff:**

- Orientation to classroom spaces, emergency exits, first aid supplies, and equipment.

- Introduction to Lead Teachers, Associates, and administrative personnel.

#### 5. **Verification:**

- Each staff member signs the **Orientation Completion Form** confirming review of policies and procedures.
- A copy of the signed form is maintained in the employee's personnel file.

## Ongoing Professional Development Plan

#### **Purpose:**

To ensure that all staff members maintain and enhance their knowledge and skills in alignment with Iowa HHS licensing requirements and best practices in early childhood education.

#### **Policy Statement:**

St. Athanasius Early Learning Center supports continuous professional growth. All staff are required to participate in ongoing professional development each year as outlined by Iowa HHS Child Care Licensing Standards.

#### **Procedures:**

##### 1. **Training Requirements:**

- Each staff member must complete a minimum of **six (6) clock hours of approved training annually**, as required by HHS.
- Directors must complete **ten (10) clock hours annually**.
- Required trainings include but are not limited to:
  - Universal precautions and infectious disease control
  - Mandatory child abuse reporting
  - Emergency preparedness and safety drills
  - Child development, behavior guidance, and inclusive practices

##### 2. **Training Opportunities:**

- Professional development may include HHS-approved online courses, in-person workshops, staff meetings with a training component, or continuing education programs.
- Staff are encouraged to pursue coursework through **Iowa CCR&R, TEACH Iowa**, or other state-approved providers.

### **3. Documentation and Recordkeeping:**

- Staff must submit certificates of completion for all trainings to the Director.
- The Director maintains a professional development record for each employee to verify compliance.

### **4. Program Improvement:**

- The Director will annually review training records to identify areas for growth and to guide staff development planning.
- Ongoing professional learning may also be connected to individual performance evaluations and program goals.

### **Reference:**

Iowa HHS Child Care Center Licensing Standards, 441 IAC 109.7(2) and 109.9(3).