

Tete and Zios Place

Parent Handbook



Tips for choosing what to wear



At Tete and Zios Place we believe that play belongs in all elements of weather, art, and sensory experiences. This includes rain, mud, paint, and clay in our daily materials. Children have access to materials at all times. Please dress your child ready to play!

Your child WILL paint themselves

It's going to happen. I promise. Children are sensory based learners. This means painting their faces, bodies, and clothing. They are learning through this sensory exploration and there is no wrong way to do it!

REMEMBER, IT'S WASHABLE!

Since there may be times where kiddos faces/hands/clothes may have leftover residue even after washing, dark/play clothing is highly recommended.

Dress for play

We do not throw smocks or "paint" clothes on kiddos. We do not interrupt their play and smocks get in the way! This slows creativity as we stop them from Their activities. we call this "proof of play".

All weather play **

We love jumping in mud puddles just as much as playing and splashing in the sunshine. Our goal is to hit 1000 hours outside by the end of the year! Your child will need a high quality rain-suit, and loose play clothes that are easy to change.



Tete and Zios Place, LLC
a play based learning environment

****We play in all weather. If your child is too unwell to attend due to weather conditions, they are required to stay home. We will use our best judgement in hot and cold weather temperatures, and follow local news guidelines for outdoor exposure.

Please read this handbook thoroughly.

I look forward to having you as part of our family. Taking care of your children is the highlight of my day. I have devoted my life to caring for children while parents are away. I strive to have a close consistent relationship with parents and children. My home has been inspected by a state licensor and meets the minimum licensing requirements as required by Washington State law". This handbook is a document that is subject to change due to licensing requirements, Washington health codes and at providers discretion

This handbook was updated on __5/6/2025__

=Welcome=

Before you dive in, I want to pause and say—I get it.

This handbook is long. And maybe a little much.

But this is the handbook. There's no shorter version or plain English summary, because this is everything I have to give.

Some parts might feel like common sense.

Some parts you might skim (and honestly, that's fine in places).

But every part is here for a reason—especially the ones about policies, safety, your rights, and how things run around here. Those are the parts that keep us all on the same page, protect your family and mine, and help things run smoothly.

I'm licensed through the Department of Children, Youth, and Families (DCYF), follow the Washington Administrative Code (WAC), and participate in Washington's Early Achievers program.

That means I'm required to give you all of this in writing—even the parts that might seem obvious.

But here's the heart of it:

Even though this handbook is heavy, I'm still me.

Same care. Same open door. Same respect for your family.

If anything ever feels unclear or overwhelming, or if you want someone to talk it through with—I'm always here.

Thanks for reading (or skimming—I truly won't tell),
and thank you for being here.

A handwritten signature in black ink, appearing to read "Tete". The signature is stylized with a horizontal line above the letters and a long, sweeping underline.

Mission Statement

At Tete and Zios Place we believe that every child is born with unique wants, needs, and desires. Our mission is to create a nurturing environment that feels like home, where children feel safe, happy, and excited to learn. We are dedicated to providing continuity of care through play-based sensory learning that celebrates the diverse love languages each child expresses through their senses. We are committed to ensuring that all children receive the love and support they deserve, while offering quality care to every family we serve. Together, we foster a community of growth, joy, and understanding.



ABOUT OUR PHILISOPHIES.....

Welcome to our family run childcare! Our approach to childcare is all about play and exploration. We believe that every child comes into the world with needs, desires, and intentions. Our philosophy is centered around body autonomy and consent, where children are allowed to make choices about how they want to play and interact with their environment. We encourage sensory play, whether it's splashing in puddles, playing in mud, or painting. We often find that children enjoy painting their bodies and using them as a canvas, just like how adults may choose to have tattoos or piercings.

To ensure that children get the most out of their playtime, we encourage barefoot play. There are many benefits to playing barefoot, including improved balance and coordination, increased sensory stimulation, and a stronger connection to nature. We have a designated grass area for our smaller infants, while mobile infants and toddlers are closely watched as they crawl and explore their surroundings.

Our childcare is a messy place, but that's because we believe that care is education. We don't interrupt children when they're happily playing on the floor, but we do coddle, *spoil*, and snuggle them when they need it. *spoiler alert, you cant spoil a baby*

We encourage parents to send their children in play clothes, as we don't stop them from exploring their senses, even if it means getting a little paint or dirt on their clothes.

Part of our curriculum and philosophy includes outdoor play. Our goal for 2023 is to spend 1000 hours outside, and we surpassed our goal hitting 1024 hours!! We believe that children thrive on sensory play, and we're proud to provide a safe and nurturing environment where they can explore and learn. Thank you for considering our family run childcare for your child's needs!

Ever wondered if we include our little Dinos in our outdoor adventures? You betcha! Our tiny tots are just as stoked as their older siblings to get outside and play. Even though they may not be taking giant steps or playing tag, we make sure they're right in the mix. Snug in a carrier or stroller, they get to feel the sun on their faces, breathe fresh air, and explore the wonders of nature. And don't worry, we have a special grassy area to keep our baby explorers safe while older kiddos roam free. Our curious crawlers and toddlers are always under watchful eyes, making sure their adventures stay fun and safe. And yes, we know you've seen some photos where it looks like they're eating dirt, but we've got it covered. While it's natural for little ones to put things in their mouths, we've got plenty of snacks to keep little tummies happy and healthy. So, let's get out there and explore! Outdoor learning involves spending plenty of time outside, playing in the grass. Infants are outside as much as older children, except for morning naps. Children and infants spend 1-8 hours per day outdoors, engaging in activities such as painting, playing with water tables, being carried in carriers, and exploring play spaces based on their interests. Being outside Awakens all the senses too with textures, smells variety of colors etc etc

Outdoor and nature play resources

<https://www.nejm.org/doi/full/10.1056/NEJMoa1508749>

https://www.science.org/doi/10.1126/sciadv.aba2578?fbclid=IwAR1_cVDkg-oCD-tlu3g0FI2Cjgh977hZGKZUus9jvpEEzeHHTE5cXwwKd--c

Regarding dirt near or around childrens mouths https://intheloop.mayo-clinic.org/2016/08/11/let-them-eat-dirt-or-at-least-play-in-it/?utm_campaign=search

Ages Served

Our goal is to serve the youngest children in our community ages 0-3 years old. Once your child enters their third year, You should begin looking for new care, we have friendly providers we can recommend, or, if you choose, you may seek care through the school district or other private matter. In some cases, children may stay until they are ready to enter their Kindergarten year, promoting a 5 year care plan.


Transition into care

Transition Into Our Program: Supporting Children & Families with a Gentle Start We know that starting in a new program is a big step for both children and families. Our goal is to create a welcoming, comforting space where children can build trust, feel safe, and develop a strong sense of belonging at their own pace.

- ✨ One Month for Gentle Transition We honor a full one-month transition period for all new children. During this time:

- Children are seen as “new friends” who are getting to know our routines, teachers, and classmates.
- Teachers will provide extra patience, support, and flexibility while your child learns to feel safe and confident in the classroom.
- Families are encouraged to share as much information as they wish about their child’s routines, preferences, and comfort items. —

Welcoming Breastfeeding Families We welcome and support breastfeeding families.

- Breastfeeding mothers are invited to stay and nurse as often as they wish during the first two months, or until their child feels comfortable and developmentally ready to separate with minimal support.
- Families are always welcome to check in, stay nearby, or take breaks together in our calm, family-friendly spaces. —
-  Close, Nurturing Support During the transition, your child will receive:
 - 1:1 support from a familiar teacher, who will stay close and available for comfort, snuggles, and reassurance.
 - Gentle routines that help them feel secure and connected.
 - Opportunities to explore at their own pace, with no pressure to join group activities right away. —

Building Peer Connections Whenever possible, we will:

- Pair your child with a “peer buddy” or “classroom friend” to help them feel included and supported by peers.
- Plan small group or one-on-one activities to build friendship and trust.

Family as Partners We invite and value your partnership throughout this transition

- Families are welcome to stay as needed, call for updates, and collaborate with teachers to create a personalized transition plan.
- We believe that strong relationships between families, children, and teachers build the foundation for long-term success and confidence

Transition to Kindergarten Policy

Transition to Kindergarten Policy Policy Statement: Our program supports a comprehensive, child-centered approach to kindergarten readiness, recognizing that a successful transition includes not only academic readiness but also social-emotional competence, independence, and self-advocacy skills.

In alignment with Washington State’s Early Learning and Development Guidelines, our approach prepares children and families for a confident, supported entry into kindergarten.

Key Readiness Areas Supported by Our Program:

1. Self-Care & Independence:

- Children will be supported in developing skills to use the bathroom independently, including recognizing their body cues and managing hygiene routines.
- Children will be encouraged and guided to remove and change soiled clothing with minimal assistance.
- Staff will support children in practicing daily routines such as opening their own lunch boxes, food packaging, and using eating utensils independently.

2. Social-Emotional Development & Communication:

- Children will be supported to recognize, name, and express their feelings appropriately.
- Children will practice asking adults for help and communicating their needs confidently.
- Staff will model and encourage language development that supports children in advocating for themselves and expressing their preferences, choices, and boundaries.

3. Body Autonomy & Advocacy:

- The program will support children in developing respect and understanding of their bodies.
- Children will practice setting and expressing body boundaries, including saying “no” when uncomfortable and seeking adult support when needed
- Staff will use age-appropriate language and books to reinforce body safety, autonomy, and personal advocacy.

4. Partnership with Families:

- Families will be engaged throughout the pre-kindergarten year in conversations about their child’s growth in these readiness areas
- Staff will provide resources, workshops, and intentional transition activities to support families in understanding and preparing for the expectations of the kindergarten environment.
- Individualized transition plans will be created as needed, honoring each child’s unique strengths, culture, and needs.

6. Community & School Partnerships:

- The program will collaborate with local schools and community partners to ensure a smooth transition process.

- When possible, staff will coordinate visits to kindergarten classrooms, introduce children to school routines, and facilitate opportunities to meet kindergarten teachers.

We will connect parents and check in and see if they need assistance in locating their local Kindergarten program. If necessary,, we will use their address with them and help them locate their local Kindergarten

Review and Support: Progress in kindergarten readiness skills will be monitored regularly through observation and family conversations. Staff will provide individualized support, scaffolding, and family resources to ensure all children build the confidence and skills needed for a positive transition to kindergarten.

Communication With your Provider

We utilize the Brightwheel app for parent communication. It is crucial that you keep us informed if you will be running late or if your child will not be attending care. Please send us a message to avoid any unnecessary worry. Failure to notify us of your child's absence will result in a no call-no show fee being added to your bill.

When we send you a message regarding your child's health, injury, or attendance, please take the time to respond or acknowledge our message so that we know you have seen it. Please refrain from texting our personal phones, as they are kept on silent to maintain focus on the children. Using the app ensures that all our conversations are in one place. If you need to send us a different form of message, please use Facebook Messenger or request a text message.

It is important that you acknowledge messages from your provider. We understand that you may be busy and unable to respond immediately, but if the message requires a response, please reply as soon as possible. If we call you, please answer or return the call promptly. We typically only call in case of emergencies or injuries, but there may be other reasons for our call. Please do not text our personal phones, as we have them on silent, to keep a focus on the children. Using the app also keeps all of our conversations in one place. If you need to send us a different form of message, please use Brightwheel. If there is an emergency, you may call us.

Communication is a critical element in building a good relationship between parents and their child's care provider. At our facility, we use the Brightwheel app for parent communication to keep everyone informed and updated. We encourage all parents to notify us in advance if their child will not be attending care or if they will be running late. This helps us to plan and ensure that your child is safe and well-cared for. Failure to notify us of your child's absence may result in a no-call, no-show fee.

When we send you a message through the app concerning your child's health, injury, or attendance, please take the time to respond or acknowledge our message. This lets us know that you have seen it and are aware of any updates or changes that may be necessary. To help us maintain

our focus on the children, please refrain from texting our personal phones. Instead, use the Brightwheel app or Business Messenger to contact us.

Acknowledging messages from your provider is essential. We understand that you may be busy, but if the message requires a response, please reply as soon as possible. If we call you, please answer or return the call promptly, as it may be important. In case of an emergency, you may call us, and we will do everything we can to assist you and your child.

My Training and Experience

The State of Washington requires that I take annual training on topics related to caring for young children and leadership practices. Feel free to ask me about my training. I will frequently share interesting things I learn with the families in my program.

The I obtained my ECE certificate in June 2017. I have volunteered in many nurseries, summer camps, I have managed the infant room in the YMCA nursery, ran the weekend care program at an in home facility and worked for two years in a licensed care facility. During my time at the center, I carried the center through the Early Achievers process, and QRIS Scale. I managed the toddler classroom ages 12-30 months. As lead, I managed curriculum planning, child portfolios and staff interactions with children.

My Family and Background About my Family

I am Ay Jay (Tete) , My husband is T. J.(Zio) and we have one child, Oliver who is 13 years old. We have one dog, Beesley. I am pro baby wearing, and prefer attachment caregiving style. I know that infant care is hard to find, and it is important to me to provide quality care while maintaining a loving relationship with parents and children

Read a bit more about us!

I am Tete! I love babies, babywearing, messy play, music and letting kids be themselves. I have a deep love for my kiddos, and love watching them grow up. I became an auntie at 4 years old, and have 10 Nibblings aged 5-30. I always loved being an auntie and taking the kids with me for adventures, trying to put them down for naps and playing with them were my childhood hobbies. I love tattoos, the ocean, and baby snuggles.

Baby-wearing is a passion of mine, and having carried more than 75 children, I also have the international baby-wearing symbol tattooed on my arm.

My husband is the "Zio" to Tete and Zios place. He started working with me in September 2021. He would come home from work and enjoy hanging with the littles and myself, enjoyed our

outside time together and saw that it was just a little more stress free. He is returning to school in the next year or two to earn his Early Childhood Education degree.

Age grouping is extremely important to me, and crazy enough, it all just happened to work out that way. I start children as all infants (0-6 months) and they grow up together. We plan our buddy matches by birthdate, generally within a few months of each-other.

When I first opened, I did not see myself caring for littles past the age of 2. So I opened to work alone, but i quickly realized that I did not want to send my littles off to school, I had become so attached to them, i could not imagine. Plus, we were loving our outdoor school concept too much, we decided for my husband to join me, so now here we are. We are licensed for 12 children, but we prefer to start children as infants, and provide continuity of care. I love babies, and my only careers have ever been childcare. but babies.... man they rock. I have 10 nieces and nephews, so the life really chose me

Access to children

Curriculum Philosophy, Implementation and Program Description (WAC 110-300-0305)

Children require love and attention to feel safe in their daily lives At Tete and Zios place, your child will feel comfortable as if in they were in their own home. We are essentially a family raising children together, and we thank you for trusting your child in my care. We believe children learn best through hands on sensory experiences and encouragement to push and expand their limits. We believe in talking to children through everything you do during the day to promote language development. We believe every emotion has a reason, and giving children names for their emotions and letting them experience them is a natural part of growing up. It is up to us, to help children handle their feelings and emotions. We are firm believers in you cannot hold a baby too much, while still believing in tummy time, and time for exploration.

Children learn through rich interactions and routines in an environment where they feel safe, secure and accepted. Our early learning environment is designed to promote curiosity, conversations and continuous opportunities to develop socially, emotionally, physically and cognitively. At Tete and Zios Place we strive to build relationships throughout the first years of a child's life. Children will develop socially and emotionally through rich interactions, open ended questions and acceptance. The indoor and outdoor environment is designed to explore and develop both fine and gross motor skills that will promote development across social/emotional, physical, cognitive, language and literacy. s

As an infant caregiver, I am dedicated to the practice of babywearing for the comfort of our little ones. We use carriers to wear children from birth up to the age of five, which helps to soothe them when they need attention and we're tending to other kids. To ensure hygiene, we provide each child with their own carrier. Babywearing is a fundamental part of my philosophy as a

caregiver, and I believe it helps to create a strong bond between the child and caregiver. In fact, I am so dedicated to this practice that I have a tattoo to show my unwavering commitment to it.

1. We are a play based program. Children engage in messy, hands on, sensory, indoor and outdoor play.
2. At my program, I believe that the role of the educator is to provide hands on learning opportunities. Children should learn through hands on experiences provided by the provider, as well as child led experiences and interactions. Children shall learn independently through guidance from the provider. We will use sign language and English as well as childrens home languages in our classroom. Curriculum is catered to each childs individual needs, and adjustments will be made to cater to your childs specific age and set goals for development.
3. At my program, the goal of the curriculum is to enhance learning experiences by providing opportunities that meet PIES and WAC guidelines through a play based and outdoor environment. We learn through stewardship and caring for others.
4. Program activities you might see at my site include: indoor or outdoor play, sensory activities, water play, story telling, cooking, reading, baby/toddler wearing and outdoor play including in rain and or snow.
5. We are a sensory based Playschool. Children learn through senses and real life experiences. All children play in all environments. Please be sure to keep up to date on weather appropriate clothing

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Family engagement and partnership communication plan (WAC 110-300-0305)

Please contact me in person, by Brightwheel, or email anytime you have a question or concern about your child or our child care program. We use Brightwheel to communicate daily needs, document diaper changes, meals etc.

Because we are a family based childcare, it is important that you keep us updated with your attendance, family schedule and things such as illnesses. If your child has a communicable illness, it is important that you tell us so we can prevent the spread.

We pride ourselves on our communication with parents, and expect the same from the parents in our care. We have a wonderful community village, and it takes a village to help care for everyone.

Drop off and pick up times are very busy times for us. If you would like to share with us important information about your child please fill free to do so. If you would like to have a longer conversation please schedule a time with us so that we can focus on your concerns.

You must indicate anticipated arrival times on your Child Care Contract. Requests to arrive earlier than contracted drop-off time must be made at least 1 day in advance.

Developmental screenings

Twice yearly, You may schedule a regular time to meet with you to discuss your child in a more formal way through a family/provider conference. In these conferences we will communicate with each other

about goals, strengths and challenges for your child, and how I can support you in your parenting as you support me in my care-giving.

At the time of registration and each year thereafter we will ask about your child's development, behavioral, health, linguistic, cultural, social and other relevant information to accommodate each child's individual characteristics, strengths and needs.

It is important for us to provide the best program for your child. We will provide a developmental screening for each child from birth through age five

Tete and Zios place provides developmental screenings for children within 45 days of enrollment. Screenings are provided by ASQ. In addition to the ASQ, we use the CDC Milestones screening. These screenings will be provided and discussed with you within 45 days of enrollment. Screening results are shared with parents Via conference or Zoom call, depending on what works better for the family. If other languages are needed, I will reach out to local intervention agencies to attempt to locate additional resources. Screening will re-occur annually, or three times per year.

Center VS Home childcare important note for parents

We are a family-run childcare service, and we are proud to say that the only staff members are my husband and myself. With years of experience in various childcare settings, I have chosen to create a nurturing environment based on a "yes" philosophy, where children feel encouraged and supported.

Our Commitment to Care: Because we prioritize maintaining the highest standards of care, we do not employ substitute providers. This means that if either of us is unwell, we must close the childcare service. We understand that this may be an inconvenience, so we strongly encourage all families to have a backup childcare provider in case of illness or emergencies

Vacations: We also take vacations, and during these times, our childcare will be closed. While other centers may offer longer hours and more consistent availability, we believe that the continuity of care provided by having the same caregivers—myself and my husband—every day is invaluable. Your child will always be greeted with open arms by the same familiar faces, ensuring a loving and secure environment.

Health Policies: To further protect your child's well-being, please note that our illness policies are more stringent than those found in many centers. We do not allow children with coughs, colds, or runny noses, as we are the only caregivers available to tend to them. This policy is in place to ensure the health of all children in our care. We appreciate your understanding and cooperation as we strive to provide a nurturing and safe environment for your little ones. Thank you for choosing us as your childcare provider!

Are you coming from center based care? Here are some things to consider"

Advantages of Home-Based Care:

1. Consistency of Care: In our home-based setting, your child will be cared for by the same dedicated caregivers every day—my husband and I. This continuity fosters a strong,

trusting relationship between your child and their caregivers, which is essential for their emotional and social development.

2. Individualized Attention: Our smaller group size allows us to provide personalized attention tailored to each child's needs, interests, and learning pace. This individualized approach encourages children to thrive in a nurturing environment. I use a variety of informative practices to help me understand each child's unique learning needs. Developmental screenings, observational assessments and information you provide me about your child's strengths and needs are taken into consideration to develop individualized learning goals and activities that support growth across all domains of development.

3. Family Atmosphere: Our childcare operates in a warm, home-like setting that makes children feel secure and loved. They will always be greeted with open arms by familiar faces, creating a sense of belonging and comfort.

4. Flexibility and Freedom: We embrace a "yes" philosophy that encourages exploration and creativity. Children have the freedom to learn through play and engage in activities that spark their imagination, all under the watchful eye of caregivers who know them well.

5. Health and Safety Standards: We prioritize the health of all children in our care by implementing strict illness policies. To protect your child and others, we do not allow attendance with coughs, colds, or runny noses. This ensures a healthier environment for everyone.

Important Considerations: - Backup Care: As a small, family-run operation, if either of us is unwell or when we take vacations, we will need to close our childcare. We strongly recommend that families have a backup provider in place for these instances. This is a critical aspect to consider when choosing home-based care. –

Limited Hours: While centers may offer longer hours and more consistent availability, the personalized care and strong bonds formed in our home-based setting provide a unique and valuable experience for your child. By choosing our home-based childcare, you are opting for a nurturing, consistent, and individualized environment that prioritizes your child's well-being and development. Thank you for entrusting us with your child's care

*Best Practice suggestions for facilitating ongoing communication with families:

- My program has an orientation meeting with new families prior to their child enrolling. Typically we will meet multiple times so the child will feel comfortable with us, and the parents mind will be put at ease.
- Newly enrolling children are encouraged to visit for a half-day prior to beginning care, and allowed to gradually transition into full-day care, if family desires.
- Family members are encouraged to visit and spend time with their child at care.
- Regularly scheduled family meetings encourage discussion of relevant developmental information and program news.
- Communication will be verbal, written and may include texts and photos of your child throughout the day.
- Ongoing individual child assessment information is shared with each family.
- (Check off boxes for what your program does, delete items you do not include)

Introductory Visit

Two introductory visits may be scheduled with the provider prior to starting care. These may be scheduled with the provider via phone or in person.

Trial Period

The trial period will be _4 weeks. This period is used to observe the child's adjustment to care and to talk about concerns. I will talk to you daily about your child's day. Please tell me if you have any concerns. After a _4_ week trial period, we will determine if the child care services are satisfactory to everyone. If any problems cannot be resolved, the care is terminated.

Admission Requirements and Enrollment Procedures (WAC 110-300-0460)

Payment is required as such: First and last week of care, as well as a yearly registration/supply fee of \$150 may be made via Brightwheel. This is paid on The anniversary of enrollment, or, with the intent to return paperwork provided to you. (Generally by September 1st) This is non refundable.

Payments from employers are accepted

ENROLLMENT

We WOULD LOVE TO MEET YOU. HOWEVER, WE HAVE LIMITED SPOTS AVAILABLE. THE PROCESS OF ENROLLMENT IS:

CHAT ABOUT YOUR NEEDS, YOUR CHILD, WHAT HOURS OF CARE ETC

READ OVER PARENT HANDBOOK, contact me after you have read the parent handbook.

IF YOU HAVE READ OUR PARENT HANDBOOK IN WHOLE, AND WOULD LIKE TO PROGRESS TO A VIRTUAL MEETING, WE WILL SCHEDULE A TIME DURING NON BUSINESS HOURS TO DO A VIRTUAL MEETING. YOUR CHILD SHOULD ATTEND THIS VIRTUAL MEETING, SO WE CAN GET TO KNOW EACH OTHER, WE CAN CHAT BACK AND FORTH, AND YOUR CHILD WILL GET TO KNOW MY FACE BEFORE MEETING IN PERSON

Meet in person and sign parent handbook and begin enrollment records.

To hold your place immediately, upon approval from provider, to hold your space you will pay the \$150 registration fee.

The registration fee is non-refundable. This registration fee reserves your spot. Tuition begins after registration, or at the date discussed with your provider. This is non refundable.

If you are holding a spot, full tuition is due to hold a spot for your child, until their start date.

We are a 52 week per year program, If you choose to use an alternating weekly schedule tuition is still due.

If you are offered enrollment at Tete and Zios Place, and you are not ready to start, you are welcome to hold your spot by paying the full tuition rate until your child begins. This does not roll over or apply to any future care. Payment ensures your child will have a spot when you are ready for them to enter care.

Part Time Care: Now Available in 2025! We're excited to offer part-time care at our hourly rates, with a three-hour minimum that must be paid in advance, as all payments are non-refundable. Our engaging learning and play activities take place in the morning, followed by lunch and rest time, making it an ideal option for our older kiddos who need to continue their day afterward. Please note that rest time begins promptly at 12:30 PM. Payments are due a week in advance, specifically on Fridays. Please remember that your spot will not be held without payment.

PM care is not recommended. Arriving after 12:30 Children are resting until around 3pm, giving little time for play and learning.

DROP IN

We offer a Drop in rate of \$150 per day. There will be no contract for care, as care would be provided on an as needed basis. You will need to pay a one time registration fee.

DISENROLLMENT

A one month notice is required before leaving Tete and Zios Place. You are required to pay for the month regardless of attendance. If you decide to leave, and your child does not attend, you are still required to pay for a one month notice of disenrollment. If your deposit does not cover the tuition, you will immediately be sent a bill regarding the remainder of your bill. You have 48 hours after disenrollment to pick up your child's items or they will be donated.

Deposits and Registration Fees

Deposit: Your child's position is reserved upon receipt of __2__ week's tuition deposit. This deposit will be applied to the __first and last__ week(s) of care. This is non-refundable.

Yearly Registration Fee: I require a non-refundable registration fee of \$__150__ to cover administrative costs. This fee is paid Yearly. The due date is in accordance with your intent to return, sent out in June. It's due date is posted in brightwheel

Infant Registration: Infant spots are very difficult to come by, and are often planned 6-12 months in advance. To reserve an infant spot, a \$200 non refundable payment is required. This Holds your infant's space and serves as their registration fee. We have a separate contract for Infant Registration. Your child's start date will be discussed with the provider. If you choose not to start on the available start date, you are required to pay full tuition rate until your child begins care, to ensure their spot is saved.

Admission Forms **WAC 110-300-0085, 0106(9)**

There are several forms you are required to complete prior to your child's attendance:

1. Child Care Registration
2. Permission Authorization for field trips, transportation, bathing, water activities, photo, video and surveillance activity.
3. Child Care fee Agreement
4. Certificate of Immunization Status (CIS) or Certificate of Exemption (COE)
5. Completed USDA food program enrollment (if applicable)
6. A plan for special or individual needs of a child, including allergies (if applicable)
7. An approved plan for physical restraint, which includes holding a child as gently as possible to accomplish restraint (if applicable)
8. Medication authorization and medical procedure training (if Applicable)

We will use the, CDC Developmental milestones, as well as ASQ to monitor children's development. Each child shall have a WA kids form in their portfolio.

Tete and Zios place provides developmental screenings for children within 45 days of enrollment. Screenings are provided the CDC Milestones screening. We also use the ASQ screening tool. These screenings will be provided and discussed with you within 45 days of enrollment or upon request.

How children's records, including immunization records, are kept current (WAC 110-300-0460 and WAC 110-300-0210)

A record for your child is very important to us. The records will be used to plan your child's curriculum, classroom setting, daily activities and in emergency situations. All children's files, including immunization records, must be updated by parents as personal and contact information changes and they will be updated:

_____ times a month or _____ times a quarter or ___3___ times a year upon request

Immunization records will be updated at the time of registration and on the following day after the child receives an immunization or the next day the child attends child care. Changes such as job changes, address and phone numbers will be updated on the day of the change or the next day that the child attends child care

Certificate of Immunization Status (CIS) (WAC 110-300-0210)

A CIS form or similar form supplied by a health professional must be used, and be current and updated yearly (more frequently for infants). All children must be current on their immunizations. If there is a signed Certificate of exemption (COE) from a licensed physician, the child will be excluded from child care if there is an outbreak of a vaccine preventable disease that the child has not been immunized for. We accept homeless or foster children into care without the records listed in this section if the child's family, case worker, or health care provider offers written proof that he or she is in the process of obtaining the child's immunization records.

Confidentiality policy including when information may be shared (WAC 110-300-0465)

Children's records will include all admission forms, medication information, injury and incident reports, attendance records, payment history and other information obtain while caring for your children. This Information will remain confidential. You have the right to access your child's records any time. Anything of a sensitive nature will be shared outside of the presence of the children. On a need to know basis staff members may access your child's file to obtain contact information, medical information, classroom placement information and other information to support your child having the best

experience while at this child care.

The Department may also access your children's files.

Staff training logs are available for review, Staff have been trained in childhood sexual abuse prevention, CPR, First Aid, BloodBorne Pathogens with an additional 10 hours of STARS classes yearly. These classes include curriculum development, teacher child interaction and more. These classes change yearly and records of classes taken by staff may be made available for you to view.

Staff members may have individual portfolios with copies of background checks, classes change yearly to adapt to the changing needs of our children and our staffs professional development

Non-discrimination Statement, Anti Bias and Bullying (WAC 110-300-0030, 0331, 0160)

Our program is defined by state and federal law as a place of public accommodation. I do not discriminate in my employment practices, client services or in the care of children based on race, color, creed, ethnicity, national origin, gender, marital status, veteran's status, class, sexual orientation, age, socio-economic status, religion, differing physical or mental abilities, use of a trained dog or service animal by a child or family member or communication and learning styles. We comply with the requirements of the Washington law against discrimination and the ADA (chapter 49.60 RCW).

We do not promote bias attitude or bullying in our home. Bullying and bias attitude is terms for immediate dismissal or termination of any contract.No refunds will be made if care is terminated due to these behaviors.

Abuse and Neglect-Protection and Training (WAC 110-300-0475)

As a child care provider, I will protect children from all forms of child abuse or neglect. I have a duty to report and am required by mandatory reporting laws to report any suspected physical, sexual or emotional child abuse, any suspected child neglect, child endangerment, or child exploitation, a child's disclosure of sexual or physical abuse and maltreatment to Child Protective Services (CPS) and my local law enforcement agency immediately (without prior notification to the parents involved). I will also inform my licenser. All staff or volunteers in this program, as well as my family members, are trained on prevention and reporting of child abuse, neglect, sexual abuse, maltreatment or exploitation. Staff have completed Darkness to Light Childhood Sexual Abuse Prevention and Awareness Training.

Permission for Free Access (WAC 110-300-0085)

Children need to arrive for the day before 9am. This allows us to keep our routine, schedule and be sure each child is ready for the day. We strongly discourage and cannot accomodate pick ups between 12:30-3:30pm. No drop offs after 9 am unless previously arranged.

During business hours, you have the right to access any areas of my home licensed for child care. You are welcome to visit or drop-in unannounced to observe your child. You have the right to access your child's file, provider training log(s), DEL inspection checklist(s), and Facility Licensing Compliance Agreements. Please schedule time in advance if you would like to have a meeting with me or my staff,

so we can arrange to speak away from the children.

We are all family here! We encourage families to participate and share their knowledge with us.

We encourage parents to incorporate their culture in our classroom. If there is a meal that is native to your culture that you would like to share, we would love it! If you use or read another language at home, come teach us new words, read a book, or sing songs with us. This includes grandparents and siblings as well.

Definitions of Care

Full Time: 5 hours 1 minute – 10 hours per day: Contract

Part Time: 5 hours or less per day: Contracted Hours Pickup BEFORE LUNCH

Drop In: No Contract as needed basis, may be unavailable.

Your care is only provided during contracted hours. For care outside of your scheduled time frame, additional charges will apply. Your drive time to and from work should be considered when applying for care. Your child may attend for a maximum of 9 hours per day. This may or may not be reflected in your childcare agreement.

For parents utilizing DSHS & Working Connections Subsidy:

Full Time: 5-10 hours of care a day

Part Time: less than 5 hours of care a day

Drop In: DSHS/Working Connections does not cover drop in/hourly care

Sign-in and Sign-out Procedures/ Attendance records (WAC 110-300-0455)

1. Arrival and pick-up instructions:

- Upon arrival; the parent, guardian or authorized person must sign the child in using signature of full name, the date and time.
- Upon departure; the parent, guardian or authorized person must sign the child *out* using signature of full name, the date and time.
- Our sign-in/sign out form is electronic You will log your child in using Brightwheel, our parent communication app.

- A reminder to be sure to check in and out. A \$5 charge will be applied to your bill. If we receive a fine due to your child not being signed out, you will be required to pay the DCYF failure to sign in/our procedure fee. This may cause us to reconsider our contract.
- This is subject to a civil penalty fine, if I am fined due to you not signing your child in or out the amount of that fine will be on your next billing statement. Repeated occurrences will result in fees, and continued offences may result in immediate termination of care without refund.

Pick-Up and Drop-Off Protocol at Our Facility

We take the health and safety of our children seriously. In light of this, we have implemented a pick-up and drop-off procedure that will limit the spread of germs while keeping our focus on the children and their transitions. Here's what you need to know:

- Please pick up and drop off your child at the porch door.
- Have your child ready when you knock so they may enter and begin their day.
- During the first few days, we understand that new students may be apprehensive. We want everyone to be comfortable leaving their kiddos, but once your child is secured in care, it's important that you help them feel confident by leaving with confidence. Prolonging goodbyes makes it difficult for everyone. Confidence is key!
- You are required to stay with your child until they have been accepted into care. You are required to walk them to the porch, or ensure they have been seen by a teacher, You must make verbal communication that you child has been accepted into care.

Please note the following:

- If your child does not meet our check-in requirements and is not ready for the day, they will not be admitted into care.
- If your child arrives unprepared for the day (e.g., not wearing sunscreen, not dressed appropriately), you may be charged a convenience fee. We care for many children during the day, and having your child ready is important to keep the flow of day. We have many children to care for and it takes a team effort to have everyone prepared.

For the safety of our children, please ensure that:

- The gate closes behind you when you leave. Do not leave the gate open as it puts the children at risk. If this happens, we will not be able to care for your child any longer.
- Only adults in the home are allowed to open and close the front door. Children are not allowed to open the gate or handle, as it opens to our driveway. Do NOT let older children or siblings open or close the gate.

2. Please identify on the Child Care Registration form, who is authorized to pick up your child. I will not release your child to any person without your written permission. This form should be kept current. The person picking up your child must have identification, as we may ask for verification of identity before releasing a child.
3. Anyone who appears to be under the influence of drugs or alcohol arriving at child care to pick up a child will be asked to call someone else to pick up that child. If a person leaves with a child while they appear to be under the influence, 911 will be called.

Attendance Policy

Attendance Policy Attendance is never required. We wholeheartedly support families in spending as much time as possible with their children and encourage you to enjoy those moments whenever you can. While we understand that every family's routine is different, we kindly ask that if you are not working or have the flexibility, please consider shorter days for your child. Children thrive when they have time with their caregivers, and we aim to support a healthy balance between care and connection. If you have unique circumstances or need support navigating schedules, we're always here to chat.

Sun Safety & Sunscreen Policy

Protecting our little explorers during outdoor play

As warmer, sunnier days arrive, we want to ensure all children stay safe and comfortable while enjoying time outdoors. Please review our sun safety guidelines below:

Clothing Guidelines

To reduce the amount of sunscreen needed and protect sensitive skin:

- Dress your child in long-sleeved sun-protective clothing each day.
- No one-piece suits, as they make diapering difficult.
- No bikini-style tops and bottoms, as they shift easily and expose skin to sunburn.
- If it's chilly in the morning, your child may wear a light shirt over their sun clothes.
- Please dress your child before arrival. Do not hand us sun clothing at drop-off.

Sunscreen Application

- Apply sunscreen before arriving at school. We often go outside right away or start our day outdoors.
- Our preferred sunscreen is Blue Lizard—safe, effective, and gentle for young skin.
- If you're able, we gladly accept donations of Blue Lizard to support our sun safety efforts.

We appreciate your partnership in keeping everyone safe and ready for outdoor learning and play! Thank you for helping us make daily transitions smooth and sun-safe.

Scheduling

We are committed to providing a safe and nurturing environment for your child. Please take note of the following important information regarding our operating hours and scheduling policies:

Operating Hours:

Our childcare operates from 7:30am to 5:00pm, Monday through Friday. We strive to accommodate a variety of schedules within these hours to meet the needs of our families.

Scheduling Policy:

While we make every effort to accommodate different schedules, we have a daily cap on the number of hours a child can be in our care. The maximum duration is set at 9 hours per day. This policy ensures that each child receives adequate rest and allows our staff to maintain a high level of care and attention throughout the day.

We understand that some families may require care beyond our operating hours. If you have specific scheduling needs that fall outside of our regular hours, we recommend exploring alternative childcare options that can better accommodate your requirements. At this time, we are not able to accommodate any schedules needing care before 7:30 AM.

We appreciate your understanding and cooperation in adhering to our scheduling policy. If you have any questions or concerns, please do not hesitate to reach out to our staff. We are here to support you and your child's needs.

Understand that your childcare agreement covers your hours of time. Care outside of these hours is subjected to an additional fee.

Late pickups are subjected to late pickup fees. We are a family with appointments, meetings and commitments who schedule around our families childcare agreements. Being on time for pickup and drop off is not only important for children and their families but also for us as providers.

Why Our Rates Reflect the Quality of Care

We know that choosing childcare is a big decision, and we want to be transparent about why our rates reflect the value we offer. Our program is not a center, and we're not trying to be. We're something in between—a warm, home-based environment that's truly the next best thing to a nanny share. Children are cared for by the same two people every single day: us, the husband-and-wife team who own and run this program. There's no rotation of unfamiliar teachers, no high turnover—just consistent, loving care from people who really know your child. Unlike centers where ratios can be much higher, we keep things small and intentional with a 1:5 teacher-to-child ratio. That's lower than most centers and allows us to truly connect with each child while maintaining structure, safety, and a calm environment. Our pricing doesn't go down because we're not a center—if anything, the level of personalized care, consistency, and connection we offer makes what we do different, not lesser. This is a place where children feel safe, seen, and supported every day. That's what makes our program special—and that's why our rates reflect that quality.

Cost of Care Rates

Rates are evaluated and may be raised every year on ____September 1st____.

____4____ weeks' notice will be given to families for rate increases.

If other adjustments are needed, __2__ weeks' notice will be given.

PAYMENTS ARE DUE FRIDAY. You will receive your bill through Bright wheel. Payment is due Friday.

The program rates are:

Age	Full time/Daily	Part-time/Daily	Drop-in/hour
0-2 not potty trained	\$450 weekly	Discuss with Provider	30
2-5 potty learning	\$400		
Potty Trained**** 3.5-5	\$350		
Yearly Supply fee	\$150		
Drop in Rate	\$150 Daily		
Late Payment	\$25 Daily		
After 5:00 PM	\$25 late fee +4 per min.		
Out of hours contracted	\$5 per minute + \$25 at 5pm closing		

Your contract will specify your child's days and hours of care. While we are open 7:30-5:00 each parent will have contracted hours at which times they pick up their child. Having contracted hours allows us to know when children are scheduled to be picked up, so we can schedule our personal errands and activities. Please stay within your contracted hours to avoid late pickup fees.

*** Potty trained is defined as your child is able to pull pants down, use bathroom, wipe, pull

pants up and use the bathroom without being told to go.

Maximum hours of care provided per day = 9

Payment Plan, Holiday charges and Discounts

Payment Plan: As a small local business, you are our valued customers. We are not attendance based. Tuition is due regardless in order to keep your enrollment spot in our program. This includes long absences, and summers. No half rates or tuition discounts for long absences. This ensures your spot is covered and since we are limited to a certain number of children by the state it allows your spot to remain available to you. If there comes a time when we need to re-evaluate care, we will work out a solution that benefits both parties.

Holiday Pay: Fees are not reduced during months/weeks that have holidays or vacations.

Payment Penalties:

1. The fee for late payment is \$___25___ per day. If fees remain unpaid after a period of three days, your child will not be admitted until *ALL* fees are paid in full. If you are on Working Connection Child Care this late fee will be reported. PAYMENTS ARE DUE FRIDAY 5:00PM.
2. The penalty for NSF checks and or payments is \$___30___ plus any bank costs incurred by me. Cash payment is required for returned checks. You may be put on a cash only basis after the second NSF check.
3. Late pick-up fees are __\$4 per minute_____. This also accounts for Early Drop off outside of contracted hours, or before opening.
4. Sick and non responsive pick up late fees. \$25 late fee, \$5 per minute to follow.

There may be some cases where I will open early, for your child. These will be made on a case by case basis. This must be discussed and approved.

Payments shall be directly paid through Brightwheel.

Extra Charges:

Field Trip Fees: Field trip fees will be charged when necessary. You will receive advance notice of any charges.

You will be notified of extra field trip fees ___2___ weeks in advance

Other fees may include snacks for field trips I.E. if we go to the park and the ice cream man comes ETC.

Receipts and Taxes:

Upon request I will give you a payment receipt when you pay for child care. You will be given a year end statement by January 31st. Please give up to one week for statements beyond the usual bi monthly receipt.

Hours and Days of Operation

The child care program is open the following hours, except holidays. Parents are welcome to visit their children at any time during the day.

Day	Hours
Monday	7:30am-5:00pm.
Tuesday	7:30am-5:00pm.
Wednesday	7:30am-5:00pm.
Thursday	7:30am-5:00pm.
Friday	7:30am-5:00pm.
Saturday	CLOSED
Sunday	CLOSED

Holidays

Child care is closed for the following clo:

Holiday	Date, Comments
New Years Day	Closed
Memorial Day	Closed
Independence Day	Closed
Day After Independence Day July 5th	Closed
Labor Day	Closed
Indigenous Peoples Day	Closed
Thanksgiving Day	Closed
Christmas Day	Closed
Christmas Eve	Closed
Juneteeth	Closed
Veterans Day	Closed
Martin Luther King Jr Day	Closed
View Closure Page for Updated Days	CLOSED
November 1 st Day after Halloween	CLOSED

Additional closure days immediately preceding or following a holiday will depend on enrollment for those dates and we will notify you in advance

If a parent or child does not wish to participate in a religious activity please inform us so we may find an alternate activity. If you wish to keep your child home to exclude them from a special event please inform us in advance.

Family/Parent/Guardian Vacations and Absences and Doctor appointments.

1. You are required to give __2__ weeks advance notice for vacation.
2. Please call and inform me when your child will not attend due to illness or some other event.
3. Payment will not be reduced during your vacation days.
4. Please advise me upon enrollment if you plan to remove your child from child care for any length of time (i.e., the summers for school teachers, or when you are on maternity leave with another child, etc.). Discounts are not given while your child is not in attendance.
5. Children attending childcare is important as it provides them with opportunities for socialization, learning, and development. However, it is equally important for children to spend time with their families and not spend the full day in care. Family time is crucial for building strong bonds, fostering communication, and creating lasting memories. Days out with family members are always welcome as they offer children new experiences, adventures, and opportunities to explore the world around them. Balancing time in childcare with quality time with family ensures that children receive the best of both worlds – structured learning and nurturing support in childcare, as well as love, connection, and joy with their families.

Well Child visits should be scheduled for Fridays. Children must remain home for 48 HOURS AFTER ANY IMMUNIZATIONS INCLUDING FLU/COVID AND BOOSTER SHOTS.

You are required to provide an updated immunization sheet after every update.

Provider Vacation/Emergency Closure Policy/Emergency Weather

I will give you at least ____4__ week(s) advance notice of my vacation schedule.

We will follow local new guidelines for closures related to weather. This may include a two hour delay in opening, or potential closures. We will Follow closely with Pierce county School districts. As wether is unpredictable, we will reach out to parents to let everyone know whats happening. Our mail goal is for children to be safe. If you do not have to leave the house, please do not. We will keep you updated on road closures and conditions.

PERSONAL AND VACATION TIME While I will love your littles as I do my own, I do have a family of my own. I will be taking the above mentioned holidays and 15 vacation days in order to spend time with my family and maintain a high energy level to care for your child. I will do my best to inform you of any other holidays/ closures as they come up. I want to make sure you have backup care for your child during these times. Please see our schedule for scheduled holiday closures.

Provider is allowed seven (7) sick days per year. These days are paid. Make sure you have backup care for these days. These days are not related to mandated closures.

Providers may take up to five professional development days per year, to meet compliance and educational requirements

VACATION Provider may take _3_ weeks' vacation per year. (15 days) Payment will not be reduced during my vacation. 5 days Bereavement are also provided if necessary.

Back-up Child Care and Consistent care policy (WAC 110-300-0495)

I recommend that you have access to an alternate child care arrangement. You may need care if I am ill, school closure days or when I am on vacation. If I am ill you will be notified as soon as possible so that you can make other arrangements. It is always your responsibility to find backup child care. For a child

care referral, please call:

Child Care Aware of Washington
(206) 329-5544
1-800-446-1114

Staffing Plan, Classroom types and Ratios (WAC 110-300-0495)

We will maintain the State required staff to child ratios at all times. For consistency of care I or a permanent staff member will be assigned to care for your child with a goal of building a long-term trusting relationship. Any Staff who covers for me in my absence will meet all State requirements to care for the children, and be fully trained according to State requirements and will be trained on the policies and procedures of our program. You may ask for access to our staff training and professional development records.

If we have any staffing changes, or I need to be absent for an extended period of time, you will be notified in writing or by electronically.

Our staff to child ratios are ____ 1:3 infants, 1:7 toddlers 1:10 preschool, always maintaining ratio of the youngest child and we offer mixed age setting.

Termination of Services (WAC 110-300-0485)

1. You are required to give me __2__ weeks' notice of your intent to terminate care. Your deposit will cover ____1____. If you should terminate your child's care without notice, the deposit will not be refunded. Your remaining balance is due at time of notice given.
 2. If Tete and Zios Place terminates care immediately, no payments will be refunded.
2. The following are conditions that may cause child care to be immediately terminated:
- A. Non-receipt of co-pay
 - B. Family members or other adults not meeting the programs requirements, inappropriate or unsafe behavior in or near the facility, disrespecting the child care facility, staff or policies
 - C. Continual late payments or unpaid bills
 - D. Continual late arrivals or pick-ups
 - E. We can also give two (2) weeks' notice if it is necessary for the child to leave the daycare and/or if the provider chooses to for any reason.
 - F. If a negative situation presents itself and we are unable to work through things for two weeks, then immediate termination or withdrawal will be allowed on either part for any reason. If We give immediate termination, payment is required on your part. If, however, you the parent give

immediate termination, payment for two weeks is still required on the day of notice. Although reasonable steps will be taken to avoid termination, reasons for termination may include non-payment, failure to honor the obligations listed in the contract, personality conflicts or child/parent behavior. An exit form to confirm termination will be printed and signed by the provider and parents. Parents are responsible for any and all legal fees, collections fees, court fees, and any and all fees related to collecting an unpaid balance of any kind


G. Failure to follow our health and safety practices

Expulsion Policy (WAC 110-300-0486, 0340)

At our facility we will work with each individual child promoting consistent care and maximize opportunities for child development and learning. When a Child exhibits behavior that presents serious safety concern for the child or others and the program is not able to reduce or eliminate the safety concern through reasonable modifications the child's care will be terminated.

Children, like adults have a wide range of emotions. It is up to adults and peers to guide them on how to properly manage their feelings and behaviors. If a child is having a hard time and needs to "take a break" They will go sit in a designated "break space" until they have calmed and collected themselves. If able to, staff will sit with the child giving words for their feelings. It will be explained with "Who, What, Why," Childrens feelings will be validated.

Children with repeated disruptive behavior may be terminated from care without notice.

 **Expulsion Prevention & Support Policy** Our program is committed to supporting all children, including those who may display challenging behaviors, through a relationship-based, trauma-informed approach. We view behavior as communication and will exhaust all appropriate supports before considering the expulsion of a child from our program. Prior to any decision to discontinue services due to a child's behavior, the following steps will be followed:

1. Family Meetings & Communication

- Families will be invited to participate in weekly (or more frequent) meetings to review progress, concerns, and next steps.
 - These meetings will focus on open, solution-focused conversations and family partnership.
- #### **2. Review of Expulsion Policy**
- The program's expulsion policy will be reviewed with parents/guardians to ensure transparency and understanding

3. Documentation of Incidents

- All incidents leading up to potential expulsion will be documented thoroughly, including:
 - Date and time of incidents
 - Staff involved

- Detailed description of what occurred and what interventions were used

4. Steps Taken to Prevent Expulsion

- Parents/guardians will be given a written summary of all steps taken to prevent expulsion, including any plans, meetings, and interventions.

5. Environmental & Staff Modifications

- A description of environmental changes, staff adjustments, and other reasonable accommodations made to support the child will be shared with families.

6. Individual Behavior Support Plan

- A Behavior Support Plan will be developed in collaboration with the family, teachers, and support staff
- Copies of the plan will be provided to all teachers, support staff, and the family.


7. Referrals to Community-Based Supports

- Families will receive referrals and connections to appropriate community programs and settings, including mental health services, developmental services, and family support resources.

8. Department Notification

- The Department of Children, Youth, and Families (DCYF) will be notified of any expulsion decision, in alignment with licensing requirements.

9. Staff take annual anti expulsion, behavioral support and trauma informed care classes.

 Additional Support Services & Partnerships To ensure a comprehensive, child-centered approach, our program is committed to consulting with professional partners when behavioral or developmental concerns arise.

This includes:

- Early Achievers Coaches For support with classroom strategies, environmental adjustments, and professional development for staff.
- Holding Hope Program (Toddler Mental Health Support) To provide mental health consultation, trauma-informed strategies, and family support services for children under five.
- Pierce County ESIT (Early Support for Infants and Toddlers) To support referrals and evaluations for developmental delays, disabilities, or suspected concerns.
- IFSNT (Infant, Family, & Specialist Network of Tacoma) For specialized infant and toddler mental health consultation and support. When concerns arise, our team will proactively contact these partners to bring in additional professional perspectives, ensuring the child and family receive wrap-around support and advocacy whenever possible.

10. Resources including Early Achievers professional coaching services and Early Childhood Mental Health Consultation may be contacted to support in this process. If, after a 3-week period, behaviors have not improved, I will provide support to connect families with additional outside resources as needed. This may include, but not be limited to, counseling/therapy services, crisis intervention services

or additional developmental screenings for medical/behavioral diagnosis. Once this has taken place, another meeting will be scheduled where I will work in partnership with your family to reevaluate the situation and go over next steps for your child. In most cases, this will result in a revised behavior plan.

Should I feel a situation is beyond my expertise and it is found that the behavior or developmental needs require supervision and expertise beyond my capacity or expertise, then a final meeting will be scheduled to consider solutions that will meet the needs of your child. This can include a referral to a local developmental preschool or other programs that may better meet the needs of your child. The Department of Children Youth & Families (DCYF) will be notified of all children removed from my care voluntarily or involuntarily.

Posting requirements: (WAC 110-300-0505)

Information such as Program policy, Health policy, Consistent care policy, menus, liability insurance status, inspection reports, enforcement actions and resources for families, and how frequently they are updated can be found in the parent resources closet.

Items Brought from Home

Electronics shall not be brought from home to school. We are a screen free facility. Please leave all screens in the car. We will not be liable if electronics or items brought from home are lost or stolen. We do not allow outside food or drink to come inside.

We are peanut and tree nut free. Please keep in mind this includes lotions, fragrances, butters on food, milk etc. Please ask if you have questions. We have food allergies and these are non negotiable rules.

Dual language Learning (WAC 110-300-0305)

Dual language is very important to the growth and development of children. We encourage sign language. If you speak another language at home, please share with us, so we may incorporate your home language into the classroom and daily settings.

Checklist of Child Care Supplies

	<i>I Provide</i>	<i>You Provide</i>	<i>Item</i>	<i>Comments</i>
1.		x	Bottles	
2.		x	Bottle Liners	
3.		x	Formula	
4.		x	Nipples	
5.		x	Diapers	
6.		x	Pacifiers	
7.	x		ECR 4 Kids Cot Cover	
8.		x	sunscreen	Blue lizard preferred
9.		x	Therm suit/ Rain suit as requested	Reima, Jan and Jul reccomended
10.		x	Change of clothes	
11.		x	Cold and rainy weather clothes	Please provide muddy suit
12.		x	Blanket and sleeping necessities	ECR4kids cot cover
13.			Waterproof ELBOW length mittens	Reima, Therm, Ice N'Caps
14.		x	Sleep Sack	
15.		x	Three-day supply of medication	
16.		x	ALL special requests regarding food	

Typical Daily Activity Schedule (WAC 110-300-0360, 0295, 0296)

We are **required** by WAC to give a typical daily schedule that includes multiple key items.
Most of our time is spent outdoors playing, or indoors playing.

Our “circle time” consists of a group gathering if desired, reading books, and is more of a time to be social if wanted. Typically this may look like a teacher reading a book, talking about weather, evening and daytime, families, current fun events during snack time. Children are never forced to participate in “Group/ Circle” time. Our kids are playing as often as possible

WAC 110-300-0360 Daily Schedule****

Start-End	Event
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07:30 - 08:00	Handwashing - breakfast outdoor play
08:00 - 08:15	Post-breakfast toileting and handwashing
08:15 - 08:45	Entry Tasks (indoor/outdoor play)
08:45 - 09:30	Free Choice/ indoor outdoor play
09:30 - 10:00	Circle time activities indoor outdoor play
10:00 - 10:15	Mid-morning toileting and handwashing
10:15 - 10:45	Morning snack
10:45 - 12:00	Prepare for outside- outdoor play
12:00 - 12:15	Return inside - remove shoes, coats, toileting and handwashing
12:15 - 12:30	Story Time
12:30 - 12:45	Pre-lunch toileting and handwashing
12:45 - 01:15	Lunch
01:15 - 03:00	Quiet time - rest time
03:00 - 03:15	Wake up snuggles - independent activities, puzzles outdoor play
03:15 - 03:30	Afternoon toileting and handwashing outdoor play
03:30 - 03:45	PM Snack – outdoor play
03:45 - 04:30	Free Play - outdoor activities
04:30 - 05:00	Indoor or outdoor free choice

**** We are required to give detailed information about our daily schedule. Due to the ages of our children, our timing is not strict.

WAC's 110-300-0295 and 0296.

Infants and toddlers will play on the floor, in a safe space where they can explore and move freely. This may also be in a playpen/crib depending on the environment. Generally our infants love playing in the grass, so we require all weather outfits for infants. Size, and and culturally appropriate toys will be provided to infants. They will be cleaned daily as needed.

Screen Time Usage (WAC 110-300-0155)

☐

We do not use television, videos, or computers for educational purposes at our program. We ask parents to please leave their phone in vehicle or pocket at pickup if possible. Parent u with provider at pickup is vital, and meaningful relationships are built during this time. We communicate about your childs day ETC.

Outdoor activities (WAC 110-300-0147)

Our facility offers an outdoor programming daily for all children enrolled, except during the following conditions (a) Heat in excess of 100 degrees Fahrenheit or pursuant to advice of the local authority;(b) Cold less than 20 degrees Fahrenheit, or pursuant to advice of the local authority;(c) Lightning storm, tornado, hurricane, or flooding if there is immediate or likely danger;(d) Earthquake;(e) Air quality emergency ordered by a local or state authority on air quality or public health;(f) Lockdown notification ordered by a public safety authority; and(g) Other similar incidents. Children must have appropriate clothing for outdoor activities during days that may be hot, rainy and cold. We recommend and strongly encourage a muddy suit, rainsuit etc, as we go outside in all weather conditions.

Our outdoor play area consists of a garden where children will learn about growing fruits and vegetables. This will also incorporate into our meal and science time. Children will be able to plant, and watch fruit and vegetables grow, as well as pick snacks from the garden for snack time.

In addition to our garden, we have a large grassy play area which is great for running, rolling, jumping, tumbling etc. We also provide scooting toys, play kitchens, an outdoor play house, music area, soccer, basketball hoop and much more. We are constantly adding and changing out our outside toys, as children enjoy new things to play with and can be bored with the same toys on a daily basis.

Infants and non walking children will also be outside. Infants and toddlers will be placed in a safe location, on a padded surface, such as a blanket in the grass, playpen, or held outside. It is important that children of all ages have access to fresh air and outside time.

Outdoor play time is vital to a childs development. Our goal is to spend a minimum of 90 minutes outside per day, but more if appropriate. This outside time allows children to move freely, exercise, and breathe In fresh air.

We go daily for outdoor walks and activities. This is part of our routine. food

Napping/sleeping (WAC 110-300-0265)

A rest period will be offered for all children under five years of age, who remain in care for more than six hours or show a need to rest. Alternative quiet activities will be available for those children who are unable to nap or who no longer need a nap. No child will be forced to sleep/nap. I will work with you to discuss your child's sleep patterns and needs. I must allow infants and toddlers to follow individual sleep schedules.

Please be sure to bring your child's comfort items. Crib sheets will be provided by provider, and will be washed as soiled, needed, and/or every Friday.

Mixed Age groups: (WAC 110-300-0345, 0450)

Mixed-age groups in childcare and education provide a nurturing environment where children of various ages learn, interact, and develop together. Older children in these groups have the valuable opportunity to take on leadership roles, mentor younger peers, and reinforce their own learning by teaching others. This experience enhances their confidence, teaching skills, and understanding of concepts. Conversely, younger children benefit from the guidance and support of older peers, who serve as positive role models and sources of inspiration. Socially and emotionally, mixed-age groups help children cultivate empathy, respect for diversity, and the ability to navigate different social dynamics. Interacting with peers of varying ages fosters a sense of community, cooperation, and mutual respect. Children learn to appreciate individual differences, draw from each other's experiences, and develop strong social skills crucial for building healthy relationships and emotional well-being. Overall, mixed-age groups promote a comprehensive approach to learning and social development, encouraging children to engage with diverse perspectives, experiences, and abilities. This pedagogical approach not only supports academic growth but also nurtures essential social and emotional skills that will benefit children as they progress through their educational journey and beyond.

Individual care plan, Special needs accommodation (WAC 110-300-0300)

We will ask all parents and guardians to have a written individual care plan for each child with special needs including allergies. The individual care plan must be signed by the parent or guardian and must contain the following:

1. The child's diagnosis, if known;
2. Contact information for the primary health care provider or other relevant specialist;
3. A list of medications to be administered at scheduled times, or during an emergency along with descriptions of symptoms that would trigger emergency medication;
4. Directions on how to administer medication;
5. Allergies;
6. Food allergy and dietary needs, pursuant to WAC [110-300-0186](#);
7. Activity, behavioral, or environmental modifications for the child;

8. Known symptoms and triggers;
9. Emergency response plans and what procedures to perform; and
10. Suggested special skills training, and education for early learning program staff, including specific pediatric first aid and CPR for special health care needs.
Accompanying the individual care plan, we must have supporting documentation of the child's special needs provided by the child's licensed or certified:

- a. Physician or physician's assistant;
 - b. Mental health professional;
 - c. Education professional;
 - d. Social worker with a bachelor's degree or higher with a specialization in the individual child's needs; or
 - e. Registered nurse or advanced registered nurse practitioner.
11. If the child has one of the following it must accompany the child's service plan.
- (a) Individual education plan (IEP);
 - (b) Individual health plan (IHP);
 - (c) 504 Plan; or
 - (d) Individualized family service plan (IFSP).

I can help them to obtain the needed requirements and that my goal is to help their child to succeed and have a great learning experience while in my care.

Religious and Cultural Activities

Please bring items that represent your religion and culture, it is important to acknowledge all families histories, culture and background. Art and postings that are in your home that are related to culture. We "gently" acknowledge Holidays, please let us know if there are Holidays from your home or culture we can also celebrate. We acknowledge our holidays, minus the characters that may be associated with them I.E. easter bunny, santa etc. However, we do acknowledge holidays and Birthdays, Christmas ETC. If this is something you would like to discuss with me, please sit down with me and we can find something that works for your family.

Tete and Zios Place seeks to provide an affirming environment that celebrates each child's unique racial and cultural identities. Similarly, Tete and Zios Place does not tolerate racism or discrimination and will actively intervene when racism or discrimination occurs to protect the well being of the children in our care. Therefore, Tete and Zios Place will adhere to the following policies related to anti-bias early childhood education policies:

- Tete and Zios Place provides culturally and racially diverse learning opportunities that extends to its curriculum, activities and materials and seeks out materials that represent all children, families, and staff.
- Tete and Zios Place provides a variety of materials that reflect the identities of our staff and the children in our care, including diverse dolls, books, pictures, games, or materials that do not reinforce stereotypes; diverse music from many cultures in children's primary

languages; and a balance of different ethnic and cultural groups, ages, abilities, family styles, and genders.

- Tete and Zios Place will intervene appropriately to stop biased behavior displayed by children or adults including, but not limited to:
 - Redirecting an inappropriate conversation or behavior
 - Being aware of situations that may involve bias and responding appropriately
 - Refusing to ignore bias
- Tete and Zios Place will intervene appropriately to stop biased behavior displayed by children or adults including, but not limited to:

Child Guidance plan, Physical Restraint policy and Corporal punishment (WAC 110-300-0331, 0335, 0490)

Guidance techniques may include:

- Coaching behavior
- Modeling and teaching social skills such as taking turns, cooperation, waiting, self-control, respect for the rights of others, treating others kindly, and conflict resolution
- Offering choices
- Distracting
- Redirecting or helping a child change their focus to something appropriate to achieve their goal
- Planning ahead to prevent problems and letting children know what events will happen next
- Explaining consistent, clear rules and involving children in defining simple, clear classroom limits
- Involving children in solving problems
- Explaining to children the natural and logical consequence related to the child's behavior in a reasonable and developmentally appropriate manner

We will use consistent, fair, positive methods of managing children's behavior. Methods used will be appropriate to the child's abilities, developmental level, and culture.

We always discuss with a child their expected behaviors, and how we can manage our outbursts.

Spanking or any form of corporal punishment, physical or mechanical restraint, the withholding of food, or any form of emotional abuse is prohibited by anyone on the premises including parents. No corporal punishment will be used in our program. This includes biting, jerking, shaking, slapping, spanking, hitting, kicking or any other means of inflicting physical pain.

If a child is having an outburst that may be dangerous to themselves or other children, other children in the area will be moved to another location in the room during the outburst. If an outburst is extreme, your child may be picked up. Or hand led to a chair, cushion, quiet space ETC where they can safely express themselves and their emotions, and wait to re join the group. Children will not be restrained in any form as punishment.

All staff and volunteers will be trained on the guidance and discipline policy and practices.

Diapering Procedure (WAC 110-300-0221)

Children will be attended to at all times during the diapering procedure. Diapers will be checked every two hours and changed when necessary and not less than every four hours. The parents or guardians will need to supply appropriate diapers include disposable or cloth diapers and diaper wipes. All staff, parents or guardians will wash their hands immediately before and after diapering. The child's hands will also be washed immediately after diapering.

Toilet Learning (WAC 110-300-0220)

Before a child is ready to start toilet training, I will discuss with the parent or guardian their views on toilet training. For toilet training I use positive reinforcement, culturally sensitive and developmentally appropriate methods, as well as a routine developed in agreement with the parents or guardians.

We use a standard sized toilet with a washable potty seat for those who are potty learning. If you choose to potty train your child in a standing position, a washable, wall mounted toddler urinal may be used. You will be required to provide this.

You are required to provide pull ups. Pull ups / waterproof lined pants. are required until a child is accident free for two weeks. No exceptions.

A child must be accident free for two weeks to wear underwear to school.

Diapers may not be used during toilet learning, as toilet learning is independent. Your child should be able to push down their underwear/ pull up/down.

Your child should wear loose clothing so clothing can be easily removed. No jeans, or tight leggings.

To keep our childcare clean, and free of bodily fluids and waste, these terms are non negotiable.

Infant and Toddler nutrition and Feeding (WAC 110-300-0285)

We support families as their children transition from formula and breast milk to eating solid foods at the table. We will consult with the parent or guardian to implement a feeding plan for infants and toddlers at each step of this process. We will provide educational materials and resources to support breastfeeding mothers and nutritional information on infant formulas. We will have a designated area for nursing and bottle-feeding mothers. All infants and toddlers will eat when hungry according to their nutritional and developmental needs, unless medically directed. We will serve only breast milk or infant formula to an infant, unless the child's health care provider offers a written order stating otherwise. We will hold infants and toddlers while making eye contact with them. We will stop feeding the infant or toddler when he or she shows signs of fullness. We will not allow infants or toddlers to have propped bottles or given a bottle or cup when lying down. We will transition a child to a cup only when developmentally appropriate and with the permission of the parent or guardian. In consultation with the parent or guardian we will begin introducing solid foods. We will not introduce solid foods sooner than four months of age, and it will be based on an infant's ability to sit with support, hold his or her head steady, close his or her lips over a spoon, and show signs of hunger and being full, unless identified in written food plan pursuant to WAC [110-300-0190](#) or written medical approval. We will not add food, medication, or sweeteners to the contents of a bottle unless a health care provider gives written consent. We will not serve juice or any sweetened beverages (for example, juice drinks, sports drinks, or tea) to infants less than twelve months old, unless a health care provider gives written consent, and to help prevent tooth decay we will only offer juice to children older than twelve months from a cup. In consultation with the parents or guardians we will increase the texture of the food from strained, to mashed, to soft table foods as a child's development and skills progress between six and twelve months of age. Soft foods offered to older infants will be cut into pieces one-quarter inch or smaller to prevent choking. We will allow older infants or toddlers to self-feed soft foods from developmentally appropriate eating equipment. Placing infants or toddlers who can sit up on their own in high chairs or at an appropriate child-size table and chairs when feeding solid foods or liquids from a cup, and having an early learning provider sit with and observe each child eating. See policy for storing and serving breast milk. Infants and toddlers will not be served food from polystyrene (Styrofoam) cups, bowls, and/or plates.

We use stainless steel plates and cups

Bottle preparation (WAC 110-300-0280)

Parents or guardians who bring bottles must label the bottle with the child first and last name and the date. The bottles and nipples must be in good repair be glass or stainless-steel bottles, or use plastic bottles labeled with "1," "2," "4," or "5" on the bottle. A plastic bottle must not contain the chemical bisphenol-A or phthalates. Infants are fed on demand or based on parents/guardians recommended feeding schedule. Infants will stop being fed when the child shows signs of fullness. Bottles will be emptied when a child is done feeding. We will throw away contents of any formula bottle not fully

consumed within one hour (partially consumed bottles will not be put back into the refrigerator). Infants and toddlers will be held at all times when bottle feeding, I do not prop bottles up or let children feed themselves while lying down, children sitting up in a high chair or at a table may feed themselves their bottles if that is their preference. Bottles will be checked to ensure temperature is safe before feeding. Medications, cereal supplements, or sweeteners will not be added to the contents of bottles unless prescribed by a health care professional and the medication management procedure has been followed. Please bring bottles in daily. At the end of the day, any unused bottles will be returned to parents. Bottles are to be labeled with 1) Child's first and last name 2) contents of bottle 3) amount of liquid in bottle

No food, flavors, or purees of any kind may be added to your child's bottle. The only thing in a bottle served, is formula, breastmilk, and water.

Please ensure that a new bottle is provided for each bottle of breast milk or formula. We do not recycle or reuse bottles. The bottles must be pre-sterilized and ready for use. Kindly send an adequate number of empty bottles for each bag of frozen breast milk and or formula bottles.

Breast Milk (WAC 110-300-0281)

We encourage families to breast feed their children. We welcome parents to come in to nurse their child or bring breast milk. We When a parent or guardian provides breast milk, we will Immediately refrigerate or freeze the breast milk. The breast milk must be in a closed container, labeled with the child's first and last name and the date received. We will keep frozen breast milk for no more than thirty days upon receipt and then any unused frozen breast milk will be returned to the parent after thirty days. We will keep unfrozen breast milk for up to twenty-four hours. Thawed breast milk or breast milk that has not been previously frozen and has not been served within twenty-four hours will be returned to the parent or guardian at the end of each day. We will throw away contents of any bottle not fully consumed within one hour. We will obtain parental consent prior to feeding infant formula or solid foods to an otherwise breastfed infant.

There are both breastfeeding and formula feeding resources Located in the resource closet.

Naps, Rest Periods and Infant Sleep Patterns (WAC 110-300-0290)

Infant and toddlers will follow their own individual sleep patterns and never be forced to sleep. Infants and toddlers will use napping equipment approved by the U.S. Consumer Products Safety Commission or ASTM international Safety Standards. Napping equipment will be clean and firm with a snug-fitting mattress that does not have tears or holes. Children will be removed from car seats, swings, rockers, or other similar equipment if they have fallen asleep. When children are able to climb out of a crib or it is no longer developmentally appropriate for the child to sleep in an infant crib we will consult with the parent and develop a transition plan to a mat or other approved sleeping equipment.

Infants will be placed on their back to sleep in a playpen with their own personal sheet. Sheets will be

removed after every nap, and nap pads/mattresses will be wiped down.

Toddlers 12 months and up will use a nap cot with a provided crib sheet. During Naptime we play rain sounds, ocean sounds etc to bring a calm to the room. We pat backs as needed, or cuddle and help a child transition into their sleep schedule.

Children sleep in either classroom, or a spot visible to teachers in the living room or other space within our licensed area.

Infant and toddler safe sleep practices. (WAC 110-300-0291)

To reduce the risk of Sudden Infant Death Syndrome (SIDS) I and all my staff have completed yearly safe sleep training. I will actively supervise infants and toddlers by visibly checking often and being within sight and hearing range, including when an infant or toddler goes to sleep, is sleeping, or is waking up. I will follow the current standard of American Academy of Pediatrics concerning safe sleep practices including SIDS/SUIDS risk reduction. I will place an infant to sleep on his or her back or follow the current standard of American Academy of Pediatrics. If an infant turns over while sleeping, I will return the infant to his or her back until the infant is able to independently roll from back to front and front to back. I will not use a sleep positioning device unless directed to do so by an infant's or toddler's health care provider. The directive must be in writing and kept in the infant's or toddler's file. I will have sufficient lighting in the room in which an infant or toddler is sleeping to observe skin color. I will monitor breathing patterns of an infant or toddler and allow infants and toddlers to follow their own sleep patterns;

I will not allow loose blankets, stuffed toys, pillows, crib bumpers, and similar items inside an occupied crib, bassinet, or other equipment where infants commonly sleep. I will not allow a blanket or any other item to cover or drape over an occupied crib, bassinet, or other equipment where infants commonly sleep. I will not allow a blanket, bedding, or clothing to cover any portion of an infant's or toddler's head or face while sleeping, and will readjust these items when necessary. I will prevent infants or toddlers from getting too warm while sleeping, which may be exhibited by indicators that include, but are not limited to, sweating; flushed, pale, or hot and dry skin, warm to the touch; a sudden rise in temperature; vomiting; refusing to drink, a depressed fontanelle; or irritability. Infants and toddlers sleep in sleeping room #1. If an infant becomes tired during outside time, we have a portable crib where an infant may continue to rest while the other children enjoy outside time.

Special Care For Children Entering Kindergarten transition plan (WAC 110-300-0065)

Children turning five years old or six months before the child is ready to attend a Kindergarten program, we will meet with the family to provide resources and write a transition plan with the parents. Resource materials can be found in the parent resource closet. This information can be found on line by OSPI, the department or other equivalent organizations.

Meal and snack schedule (WAC 110-300-0180)

7:45-8:15am Breakfast

9:45-10:15 AM snack
11:45-12:15 Lunch
1:45-2:15 Pm Snack
3:45-4:14 Optional evening snacks

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I do participate in the USDA Food Program

All meals and snacks are prepared and served in accordance with the most current edition of the USDA Child and Adult Care Food Program (CACFP) standards or the USDA National School Lunch and School Breakfast Program standards. It is your responsibility to notify me of any allergies or adverse reactions your child may have with certain foods or beverages.

Home canned foods are not allowed to be served.

Safe drinking water will be served.

Whole milk will be served to children 12-24 months.

*See information about infant feeding, bottles and breast milk in the **Infant and Toddler Nutrition and feeding** section of this handbook.*

Sample Menu and Description of How Foods Are Served

Meals will be provided throughout the day. Examples may be fresh or canned fruit, crackers. Cheese, whole grain snacks. Any special snack requests must be brought in at the cost of parents. Main meals will incorporate all food groups. A sample menu will be attached.

Food allergies and special dietary needs **(WAC 110-300-0186)**

We must obtain written instructions (individual care plan) from the child's health allergy or special dietary requirement due to a health condition. The individual care plan pursuant to WAC [110-300-0300](#) must include the following:

- (a) Identify foods that must not be consumed by the child and steps to take in the case of an unintended allergic reaction;
- (b) Identify foods that can be substitute for allergenic foods; and
- (c) Provide a specific treatment plan for the early learning provider to follow in response to an allergic reaction. The specific treatment plan must include the:
 - (i) Names of all medication to be administered;
 - (ii) Directions for how to administer the medication;
 - (iii) Directions related to medication dosage amounts; and
 - (iv) Description of allergic reactions and symptoms associated with the child's particular allergies.

We require that the parents or guardians of a child in care ensure that the program has the necessary medication, training, and equipment to properly manage your child's food allergies. If your child suffers from an allergic reaction, we must immediately:

- (a) Administer medication pursuant to the instructions in that child's individual care plan;
 - (b) Contact 911 whenever epinephrine or another lifesaving medication has been administered; and
 - (c) Notify the parents or guardians of a child if it is suspected or appears that any of the following occurred, or is occurring:
 - (i) The child is having an allergic reaction; or
 - (ii) The child consumed or came in contact with a food identified by the parents or guardians that must not be consumed by the child, even if the child is not having or did not have an allergic reaction.
- If you have special dietary requests, you will be responsible for providing the special request and bringing it from home.

Food Handling Practices (WAC 110-300-0195)

Anyone preparing food for the children will be required to maintain a current and valid Food Handlers Permit and will follow all procedures. Proper hand washing procedures will be followed during food handling.

Safe food, bottle and formula storage, preparation, cooking, proper holding temperature, and serving guidelines will be consistent with current department of health Washington State Food and Beverage Workers' manual and current foundational Quality Standards WAC 110-300.

Please send your child's lunch in a lunch box, with an ice pack to keep food cold. Food will be stored in their lunchboxes and in the child's cubby or hook. Meals will be placed on a washable plate and served to children. Due to current COVID-19, these practices of self serving are NOT being practiced. We serve food family style and that staff will be sitting with the children during meal times to help the children learn skills such as dishing out their own foods, asking for food to be passed and pouring their own milk. As of 8/29/2021 Tete and Zios Place is participating in the MDC food program and is providing all meals and snacks to children. Formula must be provided by parents.

Dishwashing Practices (WAC110-300-0198)

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Dishes are washed in an automatic dishwasher using the sanitizing cycle (if available)

Safety of Food Containers and Preparation Area (WAC 110-300-0197)

Food preparation and eating surfaces will be cleaned and sanitized before and after use. Food preparation surfaces must be free of cracks and crevices with a floor area that is resistant to moisture. Pets are not allowed in the food preparation area while food is being prepared or served.

Food will not be cooked or reheated in a microwave unless the container is labeled by the manufacturer as "microwave use", "microwave safe", or other similar labeling. Disposable serving containers may be used if they are sturdy and thrown away after one use. All sharp utensils that may cause serious injury or pose a choking hazard will be kept inaccessible to children at all times.

Policies for Food Brought from Home (WAC 110-300-0190)

A parent or guardian may provide alternative food for their child if a written food plan is completed and signed by the parent or guardian and the licensee. All food and drink items brought from home must be labeled with child's first and last name and the date it was prepared. If you choose to provide alternative food for your child, I will need a written plan. Any meal or snack brought from home that does not meet USDA CACFP requirements will not be served to your child. If items are brought from home to share such as birthday cakes or cupcakes a written permission must be obtained by all parents of children who will consume the item.

Water activities (WAC 110-300-0175)

Water play is one of our favorite activities! We play with water on a regular basis. Water is drained after every activity and the containers are disinfected after use. Some examples of water play you may see are a play kitchen with sink that splashes water, sprinklers for water play, or "mistlers". Outdoor seasonal water play will not include pools.

Transportation and Off-Site Field Trips (WAC 110-300-0480)

1. Parents are responsible for transportation to and from my home.
2. If we take a field trip off site, you will be notified and asked to sign a permission slip. If there is a fee for a field trip, you will be notified in advance.
3. Transportation for field trips will be provided by walking.
4. There will be no vehicle transportation, however, I have __3__ seat belts in the back seat(s) of my car. Everyone over 13 years old is buckled at all times. If your child is under 13 years old, please provide a car seat/booster seat on planned field trip days.
5. Children's emergency contact and medical release forms and medical/immunization records, a first aid kit my first aid/CPR certification, and any medications needed by individual children will be taken on all field trips. Any medication administered will be recorded.
6. Parents who volunteer on field trips will not have unsupervised access to the children (excluding their own child) unless they have been pre-qualified with a criminal background check.
7. No school age programming available School age children will be transported to and from school in the following manner: School bus, or parent drop off

There is no smoking, vaping or using any form of cannabis while on field trips by parents, staff or other adults. We maintain our ratios on field trips.

Field trips will generally include walks around the neighborhood, or out for ice cream. We do not plan field trips where children will need to be transported by vehicle.

Transportation to/from School:

NONE PROVIDED

School	Transportation Method

Nighttime Care, Overnight Care and Staffing (WAC 110-300-0270)

All parents that would like to have overnight care must sign permission and documentation that you are aware that the provider is sleeping while their children are in care and have read the facilities policies and procedures for overnight care.

Currently, We do not provide overnight care.

Dental hygiene practices and education (WAC 110-300-0180(2))

Children will brush their teeth after meals. Please provide your child with a toothbrush and age appropriate toothpaste. These will be stored in a baggie in your child's cubby. Infants are also required a toothbrush or gum cleaner to promote healthy gum development.

Health Care Practices (WAC 110-300-0500)

The health of our children and staff is of utmost importance to us. We have established policies for caring for children with special needs or health needs, including allergies, food brought from home, dental hygiene practices and education. We have written policies that cover contagious disease notification, medical emergencies, injury treatment and reporting as well as Immunization tracking, and medication management, storage, administration and documentation. We have established handwashing and hand sanitizer use, the observation of children and staff for signs of illness daily, an exclusion and return policy for both children and staff. We have established plans for the prevention of exposure to blood and body fluids. Our health policy includes general cleaning guidelines and how areas such as food contact surfaces, kitchen equipment, toys, toileting equipment, and laundry will be cleaned, sanitized and disinfected. Our policy includes hand washing and hand sanitizers. We have a pest control policy, the care for pets and animals that have access to licensed space policy and the health risks of interacting with pets and animals documented.

Emergency preparedness and Evacuation Plan (WAC 110-300-0470, 0166)

You will find our programs evacuation plan posted at the front door . We will practice and document monthly fire drills, quarterly emergency/disaster drills, and an annual lock down drill. Please refer to my posted evacuation plan for a full list of details, floor plan, and gathering place outside of my home so you are aware of our emergency and natural and unnatural disasters /evacuation procedures.

I have practiced turning off water, power and gas. Shelving, furniture and heavy objects on high shelves have been secured to protect against falling. I continually check my home for potential hazards on a regular basis.

Should my home become inhabitable in a disaster, the children and I will be located at _Lakewood Area Shelter Association two houses to the right with an iron fence. if possible.

My emergency preparedness includes developmentally appropriate training with the children on how to respond in an emergency such as calling 911 and when it is appropriate to evacuate (WAC 110-300-0470(1)(c)).

Our emergency disaster kit, it includes battery-operated flash light and radio. Our kit includes a 60 serving meal plan, as well as water, and formula.

Earthquake Plan (WAC 110-300-0470)

When Indoors:

- Move away from windows, tall furniture, and heavy appliances
- Everyone in the program will be instructed to:
 - **DROP** to floor
 - **COVER** head and neck with arms and take cover under heavy furniture or against internal wall
 - **HOLD ON** to furniture if under it until shaking stops
- A head count of the children will be taken to ensure all children are present and adults will talk to children in a calm reassuring tone until it is safe and the earthquake is over

When Outside:

- Move to clear area, as far as possible from glass, brick, and power lines.
- **DROP & COVER.**
- Adults will talk to children in a calm reassuring tone until it is safe and the earthquake is over
- A head count of the children will be taken to ensure all children are present

After earthquake:

- Account for all children, staff, and visitors
- Check for injuries and administer first aid as necessary. Call 911 for life-threatening emergency
- Determine if evacuation is necessary and if outside areas are safe. If so, we will evacuate building calmly and quickly to our designated meeting spot located:

If gas is smelled; the main gas valve will be immediately turned off

- We will monitor our portable radio or cell phone for information and emergency instructions
- Our designated out-of-area contact will be notified of our status when possible and if needed.
- We will remain outside of building until it has been inspected for re-entry and determined safe.

Proper trained authorities will be called in to assess the facility to assess if it is safe to re enter. You can reach our out of state emergency contact Rachel Anderson at 1 719-322-6307 emergency

Earthquake and fire drills will be preformed monthly and records can be found along with the emergency information posted next to the front door.

Evacuation Plan: (WAC 110-300-0470)

When On-site:

- All children will be gathered and escorted to the designated meeting spot located: Depending on the circumstances and events, we may be located at LASA or Walgreens. Addresses can be found in the parent handbook, will be given verbally, and will be posted. We will use our best judgement in choosing the safest place to locate during evacuations.
- A head count of the children will be taken to ensure all children are present and adults will talk to children in a calm reassuring tone
- If safe to do so, the whole home will be checked, to ensure that all children have left the building safely.

When Off-site:

- All children will be gathered and escorted to the designated meeting spot with the grab and go bag and our daily attendance log
- A head count of the children will be taken to ensure all children are present and adults will talk to children in a calm reassuring tone
- All areas will be searched (including bathrooms, playground structures, etc.), to ensure that all children are safe and accounted for

- Once out of danger, families will be contacted. If we are unable to make contact by phone, we will then call the identified out-of-area emergency contact or 911 to let them know of our location
- If an earthquake takes place while transporting children, we will remain in the car until it is deemed safe to get out.

Evacuation drills are practiced monthly. All children in care will participate in evacuation.

Fire Evacuation Plan: (WAC 110-300-0470)

- We will activate our fire alarm or alert staff that there is a fire (yell, whistle, etc.).
- We will evacuate the building quickly and calmly:
 - If anyone's clothes catch on fire they will be instructed to STOP, DROP, & ROLL until the fire is out
- We will take our grab and go bag including attendance sheets and emergency forms as we are exiting the building
- A designated staff member will check areas where children may be located before they leave the building
- Once everyone has evacuated the building safely a head count of the children will be taken to ensure all children are present and adults will talk to children in a calm reassuring tone
- We will call 911 from outside of the building and will not re-enter the building until it has been cleared by the fire department.

Fire drills will be conducted monthly including all children. Records of Fire drills will be located next to the front door

Lockdown Plan: (WAC 110-300-0470)

- We will lock outside doors and windows, close and secure interior doors, all windows will be covered or made to not be able to be seen through, and all lights will be turned off;
- We will keep everyone away from doors and windows. Stay out of sight, preferably sitting on floor;
- When possible, we will bring attendance sheets, first aid kits, pacifiers and other comforting items, and books to our safe lockdown area;
- To maintain a calm atmosphere in the room we will read or talk quietly to children;
- If a phone is available, we will call 911 to ensure emergency personnel have been notified;
- We will remain under lockdown until the situation is resolved or we are notified that it is safe to resume the daily routine;

- We will notify parents and guardians about any lockdown, whether practice or real. If real we will notify parents and guardians when it is safe to do so.

In the case of a disaster of any kind, I have prepared my home for evacuating the children and have a three day/72-hour supply of food and water for each child and staff. Please bring a three-day supply of any required medications for your child/children. We will keep the children at our facility until the parents are able to safely arrive to pick up their children after a disaster, and will not leave your child unsupervised.

Wac 170 or medical emergency response and reporting (WAC 110-300-0475)

1. My staff and I have First Aid, Child CPR, and HIV/Aids/Blood Borne Pathogens Prevention training.
2. Minor cuts, bruises, and scrapes will be treated. Parents will be notified with an injury report. With some minor injury's parents may be called to help decide whether the child should go home.
3. Head injuries, sever bleeding or other serious injuries we will contact the parent immediately and write an injury report.
4. In the event of a serious injury or emergency, I will call 911 and administer first aid or CPR if needed. I will notify you as soon as safely possible.
5. If injury results in medical treatment or hospitalization, I am required to immediately call and submit an "Injury/Incident Report" to my Department's Licensor and child's social worker, if any. You will be given a copy.
6. All injuries that the child arrives with will be documented and an injury report will be written.

Medicine Management and policy (WAC 110-300-0215)

1. **Reasonable accommodations:** We will make reasonable accommodations for children requiring medications for disabilities and other medical conditions.
2. **Nonprescription medication** including over-the-counter oral medication, will be given to children on a case by case bases. If the medication, ointments or creams can be used or given at home we recommend doing this. If the medication has been approved by myself the parents or guardians must bring the medication in the original packaging. The medication will need to be labeled with child's first and last name and accompanied with a medication authorization form that has the start date, the expiration date, medical need, dosage amount, age, and length of time to give the medication. We will follow the instructions on the label or the parent must provide a medical professional's note. The Medication must be labeled by the manufacture for the use that it is intended for and will not be used for any other symptom or

reason.

3. **Prescription medication.** Prescription medication must only be given to the child named on the prescription. Prescription medication must be prescribed by a health care professional with prescriptive authority for a specific child. Prescription medication must be accompanied with medication authorization form that has the medical need and the possible side effects of the medication. Prescription medication must be labeled with: The child's first and last name; the date the prescription was filled; the name and contact information of the prescribing health professional; the expiration date, dosage amount, and length of time to give the medication; and instructions for administration and storage.
4. **A detailed medication log,** inclusive of documentation of when a medication is given or not given as prescribed, or as indicated on the permission form will be kept with all medicines given out at our child care facility.
5. **Storage:** Medications must be stored in the original container. The container must have the patient's name, instructions and date of expiration. It will be stored out of the reach of the children. Medication will be stored according to its label including medication that states it must be refrigerated. Controlled substances will be locked up.
6. **Oral medication:** Any medicine taken by mouth for children under two will need written permission from your doctor and stored separate from topical medications.
7. **Permissions:** Doctor's permission is required for all prescription medication and is not required for non-prescription drugs (parent permission is required for all medication, both prescription and non-prescription).

These medications will not be used at our child care facility, if the medication is not due to a medical condition or disability: diaper cream, cough syrup, lotions and herbal remedies...WAC: 170-300-0215(3)(iii)

8. **Training:** a child's parents or guardian (or an appointed designee) will need to provide training for special medical procedures that are part of a child's individual care plan. This training must be documented and signed by the provider and the child's parent or guardian (or designee).
9. **Unused medication:** All unused medication must be taken home by the parent or guardian.

Exclusion/Removal Policy of Ill Persons (WAC 110-300-0500)

1. Each child will be observed daily for signs of illness. If ANYBODY in your home is unwell, your child needs to stay home from care. We follow a healthy household policy. If we message you about your child, you must respond. .
2. Children who are contagious must stay at home. All parents of children in my care, will be notified by phone within 24 hours of communicable diseases or food poisoning. The health Department will be notified of food poisoning and of all reportable diseases at the facility.

3. Please call me if your child will not attend due to illness. If you are unsure if your child should come or not, please call. If you do not update us by 7pm we will assume your child will not be attending the next day, and children need to be back to their normal selves, eating, and illness free for 24-48 hours.
4. If a child should become ill during the day, you will be notified immediately and will be expected to pick up the child as soon as possible. In such event, we will reasonably prevent contact between the ill child and other children until you arrive.
5. The parent is responsible for finding substitute care in case of the child's illness.
6. Children and staff who are exhibiting the following symptoms will be excluded from child care per instruction of the Department of Public Health. A doctor's letter may be required to return to child care.

Diarrhea: where stool frequency exceeds two stools above normal per twenty-four hours for that child or whose stool contains more than a drop of blood or mucus; children must be diarrhea free for 48 hours and have one solid poop.

Vomiting: Vomiting on two or more occasions within the past 48 hours.

Rash: Body rash not associated with diapering, heat or allergic reactions.

Eyes: Thick mucus or pus draining from the eye, or pink eye.

Appearance/Behavior: A child who appears severely ill, which may include lethargy, persistent crying, difficulty breathing, or a significant change in behavior or activity level indicative of illness. unusually tired, pale, lack of appetite, difficult to wake, confused or irritable.

Sore Throat: Especially if associated with fever or swollen glands in the neck.

Open sores or wounds: discharging bodily fluids that cannot be adequately covered with a waterproof dressing or mouth sores with drooling;;

Cough/ Runny nose: Due to being a high touch environment, we require children with snotty noses or coughs to stay home. If your child is coughing to the point of gagging due to the amount of snot, this is a "stay home" day.

Fever: A fever 99.9 degrees Fahrenheit for children over two months (or 99.9degrees Fahrenheit for an infant younger than two months) by any method, and behavior change or other signs and symptoms of illness (including sore throat, earache, headache, rash, vomiting, diarrhea);

Lice, ringworm, or scabies: Individuals with head lice, ringworm, or scabies must be excluded from the child care premises beginning from the end of the day the head lice or scabies was discovered.

Children must be free of lice, nit and scabies before returning to care.

Whooping Cough: Prolonged cough that may cause a child to vomit, turn red or blue or inhale with a whooping sound

Chicken Pox: Children may return when the blisters have dried and formed scabs.

An Illness or condition: that prevents your child from participating in normal activities such as outdoor play.

Antibiotics: Children need to stay home for 24 hours after beginning antibiotics. **You must wait 24 hours from the first dose before returning to care.**

Medical and Dental Procedures: Must wait 24 hours before returning to care.

Emergency Room Visit: 48 hours out of care

Allergic Reaction: 48-72 Hours Depending on Factors related to emergency reactions

Ingestion of foreign materials. If your child ingests any non food items, such as toothpaste, non edible items, or feces they must stay at home for 48 hours for observation.

Other: Your child needs to be well to attend school. Please do not send in your child if they are feeling unwell, snotty, and needing extra TLC. This can fall under many conditions, illness or ailments. If your child has been absent due to illness, please update us the evening before care how they are doing and if they will be attending.

If you do not update us by 7pm we will assume your child will not be attending the next day, as children need to be back to their normal selves, eating, and illness free for 24-48 hours.

8. If you are communicated to pick up your child, you have **one hour** to pick up. After this late fees begin. We are unable to take care of sick children, and sick children in care expose germs to other children and care. After one hour, we will begin to call emergency contacts. After one hour, illness fees will begin.

Reporting and Notifying Conditions to Public Health **(WAC 246-110-010)**

I am required to notify the Department of Health, my licenser, and all families of children in my care within 24 hours in the event a licensee, staff person, volunteer, household member, or child in care is diagnosed with a notifiable condition (as defined in chapter WAC 246-110-010(3)).

Pesticide policy **(WAC 110-300-0255)**

We will take appropriate steps to safely prevent or control pests that pose a risk to the health and safety of adults and children in and around the licensed space. Our pest control steps include: Taking steps to prevent attracting pests including, but not limited to, identifying and removing food and water sources that attract pests; inspecting both the Indoor and outdoor areas in and around the licensed space; documenting and identifying the pests found in the

licensed space so the pest may be properly removed or exterminated with the date and location if evidence is found; we will document all steps taken to remove or exterminate the pests; and provide notification to all parents or guardians of enrolled children what pesticide will be applied and where it will be applied no less than forty-eight hours before application, unless in cases of emergency (such as a wasp nest). Pesticide will only be applied when children are not present. We will always comply with the pesticide manufacturer's instructions. We will emphasize prevention and natural, nonchemical, low-toxicity methods where pesticides or herbicides are used only as our last resort.

Hand Washing Practices and Hand Sanitizers (WAC 110-300-0200)

To reduce the spread of germs and infections we will help direct, assist, teach, and coach, your children to wash their hands. We will use the following steps

Wet hands with warm water, apply soap to the hands, rub hands together to wash for at least twenty seconds, thoroughly rinse hands with water, dry hands with a paper towel, single-use cloth towel, or air hand dryer, turn water faucet off using a paper towel or single-use cloth towel unless it turns off automatically; and properly discard paper single-use cloth towels after each use.

We will have all children wash their hands at the following times:

- (a) When arriving at the early learning premises;
- (b) After using the toilet;
- (c) After diapering;
- (d) After outdoor play;
- (e) After gardening activities;
- (f) After playing with animals;
- (g) After touching body fluids such as blood or after nose blowing or sneezing;
- (h) Before and after eating or participating in food activities including table setting; and
- (i) As needed or required by the circumstances.

Staff will wash their hands

- (a) When arriving at work;
- (b) After toileting a child;
- (c) Before and after diapering a child (use a wet wipe in place of handwashing during the middle of diapering if needed);
- (d) After personal toileting;
- (e) After attending to an ill child;
- (f) Before and after preparing, serving, or eating food;
- (g) Before preparing bottles;
- (h) After handling raw or undercooked meat, poultry, or fish;
- (i) Before and after giving medication or applying topical ointment;
- (j) After handling or feeding animals, handling an animal's toys or equipment, or cleaning up after animals;
- (k) After handling bodily fluids;
- (l) After using tobacco or vapor products;

- (m) After being outdoors;
- (n) After gardening activities;
- (o) After handling garbage and garbage receptacles; and
- (p) As needed or required by the circumstances

Please set a good example for your child and help them to wash their hands with the steps above.

Hand sanitizer will be used in accordance with WAC 110-300-3650 and will not be substituted when regular hand washing procedures can be practiced, and can only be used by children over twenty-four months and for whom I have a signed parent permission on file. Hand sanitizers will not be within reach of the children.

Cleaning, Sanitizing, and Disinfecting Procedures (WAC 110-300-0240,0241)

Cleaning, sanitizing and disinfecting practices include sanitizing all toys and eating utensils that are mouthed by children daily. Tables, kitchen equipment and all food contact surfaces are cleaned and sanitized before and after each meal, snack or other messy play activity. Carpets within the child care space are vacuumed daily and undergo a deep clean at least once a year. Bedding, blankets and other laundry will be cleaned, sanitized and disinfected weekly or more often if soiled. If a bleach solution is used for sanitizing or disinfecting, our facility will use one that is fragrance-free and follow department of health's current guidelines for mixing bleach solutions for child care and similar environments.

Blood Borne Pathogen Plan (WAC110-300-0400)

All staff caring for children in my program have completed the Blood Borne Pathogen training. When staff comes in direct contact with bodily fluids, we will wear disposable gloves, follow proper cleaning procedures and disinfect the items and surfaces that are contaminated. We will properly dispose of all waste and send soiled clothes home in double plastic bags. All persons exposed will wash hands before returning to care. Our Bloodborne Pathogens Policy can be found in the parent resource closet

Injury Prevention (WAC 110-300-0475)

I will check daily to make certain that both the indoor and outdoor play areas are safe for children and families – free from broken glass, toys and equipment are safe and the area is free from hazards. All cleaning products, chemicals, and personal hygiene products will be inaccessible to the children and stored. We will provide close supervision and have a program that is developmentally appropriate for your child to reduce injuries while your child is in our care.

Pets (WAC 110-300-0225)

☐

I do have pets. All pets are current on immunizations and in good health. Child care staff will always be present when children interact with pets. Children and staff will always follow proper

hand washing after interaction with pets. List the health risks of interacting with the pet or animal, such as allergies_. Our file on our pets can be found, Our pets have an area separate from our outdoor play area to relieve themselves, located:

We have a dog, a German Shepard named Beesley. Beesley is 2 years old, she is very exciteable, playful and loving. She enjoys pets, kisses and playing in the water. Around children, Beesley is excited at first, because generally when there is a child, she knows she will get playtime and pets. Beesley has her own space, which is in an unlicensed room where she will retreat when she no longer wants to be around people. Her food and water are kept in her private space behind a closed door as well as a two gates. Beesleys food and water are inaccessible to children. Beesley uses the restroom out side of licensed space in the farthest corner of the yard. This space of yard is closed off to children by a 6 foot tall chain link fence. Children may not leave the lisenced space.

Photography, Videotaping and Surveillance (WAC 110-300-0450)

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☐

I do take pictures of the children for facility use only

I do take pictures of the children for social media post

☐
☐

I do take videos of the children for facility use only

I do take pictures of the children for social media post

☐

I do have surveillance video at our front door to see who is approaching.

Pictures are taken often. They are sent to parents, shared in portfolios and may be shared on our business page. Photos are taken for documenting learning experiences, to share with parents, and may be used to show our classroom activites.

A photo release will be provided to you

DO NOT SHARE PHOTOS OF OTHER PEOPLES CHILDREN.
This is grounds for immediate termination.

Prohibited Substances: Tobacco, Vaping, Cannabis, Alcohol and Illegal drugs (WAC 110-300-0420)

The use and visual possession of tobacco, vaping, cannabis and illegal drugs, in any form and associated paraphernalia are prohibited on our property during business hours, including, but not limited to:

- Indoor and outdoor licensed space.
- Within twenty-five feet from any entrance, exit, window, or ventilation intake of the facility, or within view of the children.
- In motor vehicles while transporting children, on field trips, to and from school or other child care related activities.

This policy applies to all persons on the premises, regardless of their purpose for being there. Scientific

evidence has linked respiratory health risks to secondhand smoke.

No illegal drugs are allowed on the premises. Alcohol, vaping and Cannabis may not be consumed during business hours. The licensee, staff, volunteers, or household members must not, or allow others to:

- Have or use illegal drugs on the premises.
 - Consume alcohol or cannabis during operating hours.
 - Be under the influence of alcohol, cannabis in any form, illegal drugs, or misused prescription drugs when working with or in the presence of children in care.
 - Be impaired as to not be able to respond promptly and care for children.
 - The licensee must keep and store all alcohol, including closed and open containers, inaccessible to children and out of the view of children.
 - Cannabis and/or Cannabis products in a family child care home will be stored out of the licensed space and inaccessible to the children.
 - The licensee must keep tobacco and cannabis products, cigarettes, containers holding cigarette butts, lighters, pipes, cigar butts, ashes and residue and all paraphernalia inaccessible to the children.
 - All vaping devices will be stored inaccessible to children and out of the view of children.
 - Smoking or vaping tobacco products that are used during business hours must not be in a "public place" or "place of employment," as defined in RCW [70.160.020](#)., in a motor vehicles used to transport enrolled children. Used by any provider who is supervising children, including during field trips, and cannot be within twenty-five feet from entrances, exits, operable windows, and vents, pursuant to RCW [70.160.075](#).
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Retaining facility and program records **(WAC 170-300-0465)**

☐

I keep all required records for a minimum of five years.

☐

I will keep records from the previous twelve months in the licensed space and they will be immediately available for the Department or other state agency's review

All records are kept for a minimum of five years unless otherwise indicated and current records from the previous twelve months are kept in the licensed space and be immediately available for review. Records are accessible for your view, please ask for a copy. Copies will be made at your expense of 10 cents per page

PRINT AND RETURN

I, _____ (print name), have received and read the Parent Handbook and by signing I agree to adhere to all the policies stated within.

I _____ (print name) Have read and understand the policies of Tete and Zios place.

Parent/Guardian Signature and date of birth

Date

X

Parent full name

Date

Licensee Signature

Date

Program Name

8944 Gravelly Lake Drive Southwest Lakewood Washington 98499

Program Address

Childs Name _____

Date of Care Started _____

Family Handbook Acknowledgement

Please review the policies and procedures in the Sunflower Play School Parent Handbook online at www.teteandziosplace.com. Please sign this acknowledgement and return it to me with your complete enrollment package.

This handbook will be updated from time-to-time, and 30-days' notice will be provided as updates are implemented.

Thank you for acknowledging the policies and procedures I have established for the safety and welfare of all children in my care. I look forward to getting to know you and your family.

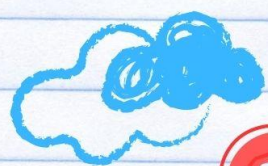
I have received and reviewed the Tete and Zios Place Handbook. I understand that it is my responsibility to review and familiarize myself with the Family Handbook and to ask for clarification of any policy, procedure or information contained in the Tete and Zios Place Handbook that I do not understand.

Recipient Name (printed)	Signature	Date
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Recipient Name (printed)	Signature	Date
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Ay Jay Goforth

Provider Name (printed)	Signature
Date	



Checklist infant



- ☐ Diapers 1 sleeve
- ☐ Baby Wipes
- ☐ Sleep Sack
- ☐ 4x changes of clothes (3
snaps max)
- ☐ Pre filled labeled bottles daily
- ☐ 3 day supply of milk
- ☐ Pacifier with Clip (if needed)
- ☐ Seasonally Appropriate
rain/sun gear

