

**early childhood center**

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# Infant Program Guide



**sabes jcc**

[www.sabesjcc.org](http://www.sabesjcc.org)



**Welcome to Ahavah**  
**The Infant Program at the Early Childhood Center**

The infant years are a wonderful part of any child's life. These years are filled with challenges and amazing developmental achievements! The Infant Room staff is committed to providing your child a safe, stimulating and developmentally appropriate environment where your child can learn and grow. Also, we look forward to sharing and talking with all of our parents about the daily joys of your child's growth. You are an integral part of your child's education here at the Early Childhood Center (ECC) and at home. Thank you for letting us travel on this journey with you.



**Components of the Infant Program**

The children enrolled in this program are from six weeks to sixteen months old, and our program accommodates a maximum of sixteen infants at a time. The classroom has teachers, assistant teachers and aides to maintain the appropriate child to teacher ratio of one adult to four infants. Because the Infant Room staff follows stringent state safety guidelines, you can be assured of a safe, secure, and positive environment where your child can grow and develop a sense of identity and self-confidence.

**How to Reach Us**

|                    |                                                                                                   |                     |
|--------------------|---------------------------------------------------------------------------------------------------|---------------------|
| <b>Jill Madsen</b> | <b>Early Childhood Director</b><br><a href="mailto:jmadsen@sabesjcc.org">jmadsen@sabesjcc.org</a> | <b>952-381-3430</b> |
| <b>Shay Elam</b>   | <b>Lead Infant Teacher</b><br><a href="mailto:selam@sabesjcc.org">selam@sabesjcc.org</a>          | <b>952-381-3445</b> |
| <b>Amy Rodich</b>  | <b>Lead Infant Teacher</b><br><a href="mailto:arodich@sabesjcc.org">arodich@sabesjcc.org</a>      | <b>952-381-3445</b> |

**During Program Hours**, to reach a staff member regarding any urgent needs, please call 952-381-3445.

For all non-urgent needs, please contact one of the Lead Infant Teachers via e-mail (listed above). You should expect a response within 48 hours or less.

**Department of Human Services Contact Information**

If you have any concerns with regards to the licensing of this program, please contact: Department of Human Services  
Division of Licensing  
(651) 296-3971

## The Daily Schedule

Infants and young toddlers find consistent routines comforting. The Infant Room staff typically serves breakfast between 8:00 A.M. and 9:00 A.M., lunch from 11:30 A.M. and 1:30 P.M., and snack from 3:30 P.M. to 4:00 P.M. **If your child arrives at or after 9 A.M. the Infant Room Staff will not feed your child breakfast. Staff are needed to diaper, play, and get children ready for naps after 9 A.M. in order to keep everybody on schedule.** Many of the older infants nap some time between 9:00 and 11:00 and between 1:00 and 3:00. Of course, this schedule varies depending on the age and the individual needs of each child. For example, children closer to six weeks old sleep and eat on their own schedules, while children closer to 16 months are gradually prepared for the meal and napping schedule of the youngest toddler room.

Each day when you drop off your child, please fill out the top part of the daily sheet. This gives the Infant Room staff an indication of your child's mood before they come to school, when to start the first feeding, and when to change the first diaper. (Diapers are changed every two hours and whenever a child has a bowel movement.) Also, please indicate who will pick up your child and the approximate time. At the end of the day you will receive this daily sheet with a record of when your child slept, how much and what they ate, when they were diapered, and any other notes we may make over the course of the day. **By reading our notes daily you will be aware when your child needs supplies. It is extremely helpful to Infant Staff when you bring additional supplies the day after we request them.**



Please bring your child to the Infant Room each day in a clean diaper and with some food (or milk or formula) in his/her stomach. We cannot guarantee that a staff person will be available to feed and/or diaper your child immediately upon arrival.

## Dropping Off and Picking Up

### **Daily Routine**

Please try to drop off and pick up your child around the same time each day. This helps your child adjust to group care more easily by developing a routine. The ECC is open from 7:00 A.M. to 6:00 P.M. Monday-Thursday, and 7:00 A.M. to 5:30 P.M. on Fridays.

### **Arrival and Departure Times**

**If you are going to bring your child to school much earlier or later than usual, please let the staff know ahead of time so that the room is properly staffed for your arrival.**

### **Pick Up by Person Other Than a Parent**

Please let the Infant Room staff know if someone other than yourself will be picking up your child. This person needs to be on the child's list of people allowed to pick up the child. Let staff know the approximate time this person will arrive, and please tell the person who is picking up to bring a photo ID as Infant staff *will* ask unfamiliar individuals for identification.

**If someone who is not listed comes to pick up your child and we have no note/message, and cannot reach you, we will refuse to release your child.**

Children will not be released to anyone under the age of 16, including siblings.



In order for us to legally stop a non-custodial parent from taking a child, a copy of the court order must be on file.

### **Late Pick Up**

If you pick up your child after 6 P.M. (or 5:30 on Fridays), you will be charged a **\$1 per minute per child late fee**. Out of respect for the staff and their time, please call if you know you are going to be late.

If we have not heard from you and cannot reach you by 15 minutes after the program end time, your emergency contacts will be called.

If we have still not heard from you or your emergency contacts and cannot reach you by 45 minutes after the program end time, the St. Louis Park Police will be notified.

It is understood that conditions beyond one's control exist. If these conditions arise, you must notify the Infant Room as soon as possible, and make arrangements for your child to be picked up.

**Continued late pick up *may* result in the termination of your registration.**

### **Absence**

If you will be going on vacation, please let the Ahavah staff know the dates your child will be gone so we can staff the room appropriately. If your child is ill, please call and let us know. **It is extremely important to let us know if your child has a contagious illness. The ECC is required, by law, to post information regarding all communicable diseases to which children have been exposed.**

### **Security**

The ECC has a key card security system installed. Parents will be given one key card at no additional cost and then they will be assessed \$25 per each additional card ordered. As you understand, the security system will only work if we are all (staff and families) diligent. It is imperative that anyone dropping off or picking up your child from the building have a key card.

## **Visitors to the Infant Room**

Parents are always welcome to visit the Infant Room. We have an open door policy for all parents of children currently enrolled in our program.

If you think a family member or friend will be visiting the Infant Room, please let us know who will be coming and give written permission that the person may visit your infant. Approved visitors are welcome to visit the Ahavah Room at any time.

However, visitors are not allowed to wake sleeping children, enter the nap room or alter the child's schedule in any way. It is recommended that visitors call the Infant Room at 952.381.3445 before coming to visit. If somebody will be making regular visits to your child in the Ahavah Room, please request an additional key card for this individual. As you know, our staff are very busy and it can be challenging to get to the door in the midst of feeding, diapering, etc.



## Feeding and Supplies



While in the Infant Room, your child will transition from being fed using a bottle, to feeding him/herself finger food. Please let the Infant Room staff know your child's feeding requirements and nutritional needs verbally, and make sure our feeding board in the kitchen accurately reflects your child's ever-changing needs.

### **Bottle Feeding**

While at the ECC your child may be fed using a bottle. You may choose for your baby to be fed formula or breast milk, however **all bottles must be made of plastic**. By labeling all parts of your child's bottle (excluding the nipple) we can ensure that no part of your baby's bottle will be used to feed another child. **Label makers are recommended for bottle labeling as permanent markers rub off after a few uses/washes.**

#### **1. Breast Milk**

If you choose breast milk:

Please express the breast milk, put it in bottles in a lunch box, and bring the lunch box to school every day when you drop off your child. **All breast milk bottles must be labeled with the date on which you bring them to the center.** The milk will be stored in your child's assigned place in our refrigerator. The Ahavah staff encourages breast feeding. Please help your child become acclimated to bottles well before they transition to group care. Not all babies are able to latch onto bottles without assistance. Introducing your baby to a bottle well in advance of childcare minimizes the stress your child may experience when transitioning to group care.

**Ready-to-feed plastic bottles are required. Milk storage bags are flimsy, which make it easier to spill milk and contaminate it when transferring the milk to a bottle.**

All bottles containing breast milk will be sent home unwashed at the end of each day. Childcare licensing standards do not allow staff to have direct contact with breast milk.

#### **2. Formula**

If you choose formula you have two options:

1. Send a canister of formula, and two to three bottles and nipples, which will be kept for your child on a labeled shelf in the kitchen. We will let you know when your formula supply is getting low.
2. Prepare your child's bottles for the day at home and send them in a lunch box. Bring the lunch box to school every day when you drop off your child and it will be stored in your child's assigned place in our refrigerator. If you choose this option, please keep a back up supply of formula and a spare bottle on your child's shelf in the kitchen in case of emergency. Please note that all bottles prepared at home will be sent home unwashed per licensing standards.

### 3. Juice

Staff are not allowed to serve juice from bottles at the program. This is a preventive measure against baby bottle tooth decay. Unless your child is extremely constipated, and a pediatrician recommends it, we will serve only water and milk.

### Bottle Warming

Microwaves are **NOT** used for warming. Infant staff places all bottles in a cup of warm water to bring up the temperature of the milk. Babies drinking breast milk will have their own warming devices to prevent cross-contamination.

### Solids

In the Infant Room we expect all babies to start on solids around six months of age. We do recommend starting to introduce solids before six months so that your infant will be ready to eat at six months of age. We do not require that solids are given by our staff, but doctors recommend that infants start on solids at six months in order to keep them satiated longer and we strongly support this recommendation.

***Please try all foods at home with your baby for at least three days before asking us to serve them in case of allergic or adverse reaction to any foods. This is for your child's safety.***

### Cereal

If you choose to feed your child cereal, please bring a box of cereal to leave at school. The box will be stored on a shelf in the kitchen that is labeled with your child's name.

### Baby Food

When it is time to start baby food, please bring containers of fruit and vegetables to leave at school. These will be stored on a shelf in the kitchen that is labeled with your child's name. Unless your child consumes the entire container of baby food in one sitting, we will serve your child's baby food out of a bowl rather than the original container in order to keep the remaining portion fresh.

### Finger Food

When it is time to start finger foods (recommended between 7 and 9 months), please bring your child's food in a lunch box everyday. It will be stored in the refrigerator. Your child's spot is labeled with your child's name. Please take the lunch box home every day. Additionally, if you wish to provide snacks for your child, you may store non-perishables in your child's space in our kitchen cabinets.

It is extremely important for infants to learn to self-feed and, eventually, self-feed from a spoon. We strongly encourage children to pick up food and feed themselves, however if consistency at home does not exist, infants will take longer to learn this vital skill.



The infant room provides organic whole milk, Cheerios, and crackers for those who wish for us to do so. We serve only kosher snacks. If you prefer that we do not serve *anything* to your child, please let us know.



### **Transitioning to the Toddler Room**

As each child grows toward 16 months, the Infant Room staff works with each child to get them ready to move up to the toddler room. When they are in the toddler room, each child will feed her/himself while sitting at a table with her/his peers.



### **Diapering and Supplies**

Disposable diapers are required in the Infant Room. Typically, the Infant Room staff changes each child's diaper every two hours and when a child has a BM. If your child is sleeping, his/her diaper will be changed upon waking. If your child is on a stroller ride, in the tumbling room or the large muscle room, his/her diaper will be changed upon returning to the Infant Room.

#### **Disposable Diapers**

Please bring a pack of the appropriate size diapers for your child. When your child needs more diapers, the Ahavah staff will indicate this on your child's daily sheet. If you change your child's diaper while in the Infant Room, please follow the state licensing procedures for proper sanitation. Also, the Infant Room staff would be happy to change your child's diaper for you!

#### **Diaper Wipes**

Please bring a hard plastic container of wipes that can stay at school with your child. A note will be sent home when you will need to bring refill wipes.

#### **Diaper Rash Ointment**

Please bring a tube or container of diaper rash ointment to be kept in the Infant Room.



### **Clothing and Supplies**

Please bring three sets of the appropriate size clothing, including socks, to be left in your child's locker at school. Make sure to label all clothing items with your child's first and last name. If your child's clothing becomes dirty due to a messy meal, or because of a diaper leak, the Ahavah staff will put the dirty clothing in a plastic bag and place the bag in your child's locker.

***While the Infant Room staff tries to make sure that your child stays clean during the day, please note that it is an important part of a child's development to explore and get messy. Hands-on activities are essential at all stages of a child's life. Consequently, staff recommends sending your child in clothing that stands up to a little wear and tear. Infant clothing may become stained.***



## **Outdoor Attire for Spring, Summer and Fall**

### **Spring and Fall**

Please bring a hat, mittens and a coat so that the Ahavah staff can take your child on stroller rides outside, weather permitting.

### **Late Spring, Summer and Early Fall**

Please bring a hat to protect your child from the sun when we go outside. If you would like your child to wear sun glasses, please bring those as well. Also, please bring sun block of at least **SPF 45**.



## **Preparing Your Infant for Group Care**

There are a few things you can do in advance to prepare your child for the transition to group care:



### **Socialize Your Baby**

Expose your baby to other family members, children, friendly adults or babysitters. This will help your child enjoy and look forward to interactions with other people.

### **Sleep**

Let your baby learn to sleep around conversation, music or other daily activities. During group care some infants will enjoy a restful sleep while others are playing, eating or engaged in a developmental activity.

### **Becoming Familiar with Bottle Feeding**

If you are breast feeding at home, you must acclimate your child to drinking from a bottle.\* Not all babies are able to latch on to the bottle without assistance. Introducing your baby to a bottle well in advance of his/her transition to group care will set him/her up to succeed while here at the ECC.

**\*If your infant begins care and refuses to take a bottle, we may have to ask you to pick up your child or come to the center for feedings until your infant is able to take a bottle.**

## **Infant Room Curriculum**

The infant classroom provides activities to fit the developmental level and needs of each child. The major developmental areas are: Cognitive and Language Development, Social Development and Group Playing; Large Motor; and Small Motor Development. The children have the opportunity to explore and learn in a secure and safe environment.

### **Social Development and Group Playing**

Group playing refers to the ability to interact socially on a nonverbal level. The idea is to have fun, learn about relating to others by playing with them



and, incidentally, develop motor and social skills. With social development, sharing is an important skill to be mastered because children are naturally egocentric. This skill mastery does not occur in the Infant Room; however we do lay the foundation for this developing skill.

### **Gross Motor**

Gross Motor refers to activities using large body muscles. Activities that encourage children to use their large muscles are an important part of brain development. These activities include large block play, music and movement, crawling, walking and climbing both indoors and outdoors.

Balance is the basis of all large muscle movement. Balance games that encourage postural awareness include tiptoe walking, rocking, or walking with something on the head.

Eye-foot coordination happens when the feet respond to information from the eyes. Eye-foot coordination helps us to avoid tripping and stumbling over things in our path. Dancing and clapping encourage rhythm and a sense of timing.



Motor planning refers to the ability to plan movements, even if a person is only subconsciously aware of this planning.

Finally, the spatial sense has to do with knowing where one is in space and how physical objects relate to one another. Good games for this include getting into boxes, crawling through tunnels, and going through obstacle courses.

### **Fine Motor**

This term refers to the manipulation and strengthening of the small muscles of the hand and foot. Children need to learn how much muscle strength to use to accomplish different tasks. For instance, children practice using their hands and fingers while playing with interactive toys in our classroom. Hand-eye coordination is developed by playing games such as throwing and catching, and playing with cause-and-effect toys.

### **Cognitive and Language Development**

Children learn to recognize their name. They will begin to understand the concept of objects. They learn what is/is not food. They will begin to understand me, you, him/her, and yours/mine. They will begin to understand when an activity is ok, or when to stop an activity. Sensory activities are a fun and excellent stimulus for brain development. Participating with music will encourage memory, imagination, and language. Staff will read with the children, and will encourage touch, playing and nurturing, which are all necessary experiences for your child's healthy development.

### **Baby Sign Language**

In the Infant Room we work with the infants to communicate their basic needs without whining or tears. Giving infants the proper tools to communicate will cause less frustration for them and for you! As soon as your baby can wave goodbye, he/she can begin to sign other things, too. The basic signs we use here include, but are not limited to: milk, water, eat, drink, more, all done, play, please, and thank you. The signs we use hang on the wall in the Infant Room. Please ask your primary caregiver if you have additional questions about sign language.

## **Primary Care Groups**

The ECC follows a continuity of care model. Research has shown that providing infants and toddlers with a consistent caregiver allows children to maintain a sense of security that allows them to explore more freely the world around them. Your child will be assigned to a primary care group that is led by one of the Ahavah teachers. Infants need a loving, consistent caregiver to help them with their learning process.

## **Medication in the Infant Room**

If your child needs to take medication daily, it is preferable that you give the required doses at home before your child comes to school and when s/he gets home in the evenings. However, we understand that sometimes it may be necessary for the Infant Room teachers to administer medication. **We follow very strict guidelines for medication administration, and your adherence to these rules is of the utmost importance to your infant's health and safety.**

Parents are required to complete a Prescription Medication Authorization/Administration Form or a Non-Prescription Medication Authorization/Administration Form. This form is valid for two weeks from the date of completion. **A separate authorization is required for each medication and each episode of illness.** Forms are available in the Ahavah classroom and the ECC office upon request. This form is also available on our website.

### **Non-Prescription Medications**

- The medication must be in its original container, labeled with the child's first and last name.
- Medications are to be given only to the child indicated on the container (twins and siblings **cannot** share).
- **Since medication containers typically do not identify a dose for specific ages under two, a physician/nurse practitioner's written authorization is required for group care providers to administer it.**
- Parent/guardian is required to give as many doses as possible at home.

### **Prescription Medications**

- The medication must be in its original container, with a legible label from the pharmacy indicating the child's name, date (covers period when medication is to be given), name of medication, dosage, instructions for use (consistent with parent's request), doctor's/nurse practitioner's name, pharmacy name and telephone number. (This label constitutes the physician's/nurse practitioner's order.)
- Samples must be accompanied by a doctor's written prescription.
- Medications are to be given only to the child indicated on the container (twins and siblings **cannot** share).
- Parent/guardian is required to give as many doses as possible at home.

### **Nebulizers**

Children who require nebulizer treatments are, by law, only allowed to have two treatments per day in the child care setting. Any child who is still wheezing or having respiratory distress *after* a nebulizer treatment *will be* excluded until his/her condition improves.

All medication administered in the Infant Room will be documented on the Medication Authorization/Administration Form. Medication will be returned to parents or thrown away at the end of the two week period for which the medication form is valid.

### **Administering First Aid and Sources of Care in Case of Emergency:**

We make every effort to maintain a safe environment for all participants in the Infant Room. A staff person trained in CPR, first aid, and general emergency response (fire, tornado) will always be present.

Additionally, there is always staff in the Sabes JCC building trained in the use of an AED. Emergency contact information forms must be completed and signed when enrolling in the Infant Room. No child will be allowed to attend the Infant Program without a completed and signed emergency contact form.

If a child has a **MINOR INJURY**, first aid will be administered and a family member will be informed.

If a child has a **MAJOR INJURY**, which may need medical attention, the staff will contact a family member immediately so that the child may receive necessary medical treatment.

In an **EMERGENCY**, when immediate attention is needed, the staff will call 911 then immediately contact a family member. After the emergency services have been called it is up to EMS personnel to decide on appropriate action. If the child needs emergency treatment, it will be at the nearest available facility. The family will be responsible for all medical charges.

## **Toddler Development**

### **Exploration and Language**

As infants enter the toddler years, they begin to perceive themselves as separate from other people. They are beginning to become more independent and able to do things for themselves. They are rapidly developing expressive language and becoming better able to convey their likes and dislikes.



### **Transition to the Toddler Room**



As each child grows toward 16 months, the Infant Room staff works with each child to get them ready to move up to the Toddler Room.

1. First the child visits the Toddler Room briefly with a staff member.
2. Next, the length of the visit increases.
3. The child visits the toddler room alone.
4. The child eats lunch in the toddler room.
5. The child naps in the toddler room.
6. The child is completely transitioned and becomes a part of the toddler program.

### **Tantrums and Biting**

The gap between what a child wants to do and what the child is capable of doing can lead to frustration and tantrums that are common during these years. It can also result in biting.

## **A Note to Parents about Biting**

Biting is a natural event that occurs in all childcare programs. It is unavoidable. When it happens, it can be frustrating and very stressful for children, parents and teachers. There are no quick or easy solutions.

Children bite for a variety of reasons: simple sensory exploration, over stimulation, teething, panic, crowding, seeking attention, cause and effect experimenting, or an intense desire for a toy. Repeated biting becomes a pattern of learned behavior that is often hard to extinguish because it does achieve results. In the Infant Room, staff applies the following deterrents:

### **Parent/Staff Communication**

The Infant Room staff works with parents to understand any biting event, and ask parents to reinforce non-biting resolutions at home.

### **Response to Biting**

When a child is bitten, the Ahavah staff avoids any immediate response that reinforces biting. This includes negative attention. The biter is immediately removed from the situation with no emotion. Caring attention is focused on the victim. The biter is not allowed to return to play for a moment and is talked to on a level that s/he can understand. S/he is redirected to another activity.

**Context**

The Ahavah staff discusses and examines the context and possible causes of each biting incident. In addition, the Infant Room staff tries to determine if the child who is biting is getting enough attention, care, appropriate stimulation and positive non-biting reinforcement. The staff works with the child on conflict resolution or expressing frustration in a positive manner.

**Environment**

The Infant Room staff tries to provide an environment that minimizes crowding and frustrations.

**Avoidance of Biting**

The Infant Room staff makes every effort to protect potential biting victims. Many times a staff person shadows the child who bites to try to avoid any biting situations by redirecting the child to other activities.

**Assessments and Parent/Teacher Conferences**

The ECC completes regular assessments to determine the developmental growth of each child on intellectual, physical, social and emotional criteria using The Ounce Scale. Conferences are scheduled twice during the school year. Please contact your child's primary caregiver if you would like to schedule a conference at a different time.

**Publicity**

Participants' images and names may be used in Sabes JCC publicity (including newsletters, brochures, websites and videos) and any media coverage of Sabes JCC programs and events. If you do not want your child's image or name used in Sabes JCC publicity, please contact the ECC office.

**Permission for Research**

In any case where a child will be used as a subject for research or experimental procedures we will require that there is a written parental agreement to any research taking place.

**Presence of Pets**

Due to allergies and health concerns, there are no pets allowed in the Infant Room.



# Infant Supply List

**Please label all items you send to the Infant Room with your child's first and last name.**

**We recommend Mabel's Labels! [www.mabelslabels.com](http://www.mabelslabels.com)**

Disposable Diapers

Wipes

Plastic Wipe Container

Extra Clothing (Seasonally Appropriate)

3 Photographs of Infant

Lunch Box/Cooler

Bottles (3 + appropriate nipples and covers)

Formula

Pacifiers

Ointment

Sunscreen (for spring/summer)

Sleep Sack (optional)

## **Lead Infant Teachers**

Shay Elam & Amy Rodich

[selam@sabesjcc.org](mailto:selam@sabesjcc.org)/[arodich@sabesjcc.org](mailto:arodich@sabesjcc.org)

952.381.3445

## **Billing Questions?**

Heather Saulsbury

[hsaulsbury@sabesjcc.org](mailto:hsaulsbury@sabesjcc.org)

952.381.3409

## **Membership Questions?**

Liz Gronert

[egronert@sabesjcc.org](mailto:egronert@sabesjcc.org)

952.381.3527

Please fax additional forms, permission to dispense, etc. to:

952.381.3401—ATTN: **Amy Dickes or Sam Gordon**



# ECC Infant Room: Ahavah

A Part of the Early Childhood Center at the Sabes JCC  
For Children Ages 6 Weeks to 16 Months

## Parent Acknowledgement of Policies and Procedures

I \_\_\_\_\_ the parent/guardian of \_\_\_\_\_ have  
read and understand the Infant Program Guide. I am aware that I am responsible for knowing the  
information contained therein.

**I agree to abide by all policies and procedures.**

Signed \_\_\_\_\_ Date \_\_\_\_\_