

Loudoun County Department of
Parks, Recreation & Community Services

STAFF

CAMPS-CASA-CASA ACADEMY-CHILDCARE-PRESCHOOL-YAS

Handbook



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Introduction to Loudoun County Parks, Recreation & Community Services (PRCS)

Vision Statement

To make Loudoun the community of choice through outstanding experiences.

Mission

Connect all communities through exceptional people, parks and programs.

Equity

We promote diversity, equity, and accessibility to remove barriers and create a welcoming environment that celebrates uniqueness and collaboration.

Values

Excellence – *We give our best every time.*

- Staff demonstrate their **passion** for nurturing young hearts and minds by approaching work with enthusiasm, knowing all staff play a vital role in shaping the future of our participants.
- Staff **celebrate diversity**, whether cultural, linguistic or ability related, and ensures that every child feels welcome, respected, included and has a safe space.

Collaboration – We create more, do more, and achieve more together.

- Staff model **problem-solving**, showing children that setbacks are opportunities for growth.
- Staff operate in the **team mindset**, sharing ideas, supporting one another, celebrating victories together, and creating a positive environment for everyone.

Innovation – We reach forward with the willingness to learn, grow, and improve.

- Staff **embrace creativity** as a superpower, fueling emotional growth and fostering a sense of wonder for the participants.
- Staff recognize **learning never stops**, modeling a growth mindset by seeking professional development, learning from mistakes, and encouraging children to embrace challenges.

Integrity – We lead with honesty and respect through accountability and transparency.

- Staff acts with **integrity** and demonstrate the importance of honesty and trustworthiness to participants, families and other staff.
- Staff practice **heartfelt gratitude** in shaping young lives daily for the small victories, the laughter and the moments when a child's eyes light up.

Resilience – We rise to the occasion, and we find a way.

- Staff practice **compassion and empathy**, understanding that each child comes with their own joys, struggles and emotions.
- Staff **celebrate progress**, not just perfection.

Staff Responsibilities

All staff are expected to read and abide by PRCS and Human Resources policies, PRCS Code of Conduct, and each site's Emergency Preparedness Plan, Customer Service Handbook, and Standards for Licensed Child Day Centers, which can be found here:

[Loudoun County Parks, Recreation and Community Services](#)

[Loudoun County Human Resources Policies](#)

[PRCS Code of Conduct](#)

[Emergency Preparedness Plan](#)

[PRCS Customer Service Handbook](#)

[PRCS Family Handbook](#)

[Professional Development and Required Certifications and Documents for PRCS Staff](#)

[Department of Education Standards for Licensed Child Day Centers](#)

Additionally, all staff are expected to review and abide by program staff addendums in the program areas they work.

[After-School Staff Handbook Addendum](#)

[Camps Staff Handbook Addendum](#)

[Early Childhood Staff Handbook Addendum](#)

Core Expectations of All Staff

Safety

- Accounting for children at all times and ensuring their physical and emotional safety is our primary priority. Physical contact with participants should only be used when applying direct care such as First Aid and CPR, providing personal care, or ensuring a participant's immediate safety. When assisting with personal care needs, two staff members should always be present.

Professionalism

- Staff is expected to represent the department in a positive, professional manner according to the County and Department's code of conduct. Staff serve as a representative of the Department when in uniform and should act accordingly.
- All site staff are expected to wear PRCS branded apparel and county issued badges at all times. Subs must wear emergency information badge with their county issued ID badges at all times. Please review [PRCS Policy and Procedures Manual HR-23](#) for additional dress code requirements.

Confidentiality

- All information contained in the participant and staff files is confidential and for staff use only. In addition, once outside of the program, no staff shall discuss any information pertaining to the participants including posting online in chat rooms, on blogs, websites, and personal social media. This includes posting photos of participants, disclosing participants' and/or families' names.

Accommodations and Inclusion

PRCS programs are inclusive and support the participation and success of all students. Individuals with special needs may need additional support or adaptations when participating in the daily schedule of activities.

Loudoun County Parks, Recreation and Community Services is committed to complying with the Americans with Disability Act (ADA). If staff observe and have concerns about a participant's development, speech, hearing, socialization skills or abnormal behaviors they should voice these

concerns to the parent. However, staff should not diagnose the problem or suggest there is a disability. ***Simply document and state the behaviors you have observed to the parent.*** Notify your supervisor of any needs for accommodations.

Parent Involvement

PRCS staff values the knowledge and expertise families have about the participant and understands the importance of partnering with families. We encourage open communication and invite families to share information that might support the growth, development, and wellbeing of the participant in our programs.

Additionally, PRCS adheres to the custodial parent's right to be admitted to the center as required by § 22.1-289.054 of the Code of Virginia. While a custodial parent shall be admitted to any participant day program, such right of admission shall apply only while the participant is in the program (§ 22.1-289.054 of the Code of Virginia). Denying a custodial parent visitation to the program must be supported by official court documents.

Custody Documentation

In cases of custody documentation, both parent names must be entered in the student record unless legal documents show that parental rights have been terminated through the courts. Appropriate notices denoting physical/legal custody issues will be placed in the student record.

Unless we have documentation of court orders indicating termination of parent rights, the other parent is still entitled to visit the program, participate in program events, and may receive notifications about your child's program.

Arrival to/Departure from Program

Staff are responsible for greeting participants and taking attendance upon arrival. Most PRCS programs will use Brightwheel for all participant check-in and check-out. Programs not using Brightwheel will require parents to sign participants in and out each day on an attendance sheet. Participants must be signed out by an **authorized person**, at least 16 years of age, to leave the program.

Authorized Pickups

Anyone picking up a participant must be at least 16 years old and listed as an authorized pick-up on the participant's information form or in the participant's Brightwheel account. Individuals listed as an authorized pick-up must provide a government issued photo ID (ie-Military ID, Passport, DMV issued ID, school ID) upon arrival at the PRCS facility. A participant will not be released to an authorized individual if a photo ID cannot be provided. In an emergency when authorization cannot be made in writing, staff must notify their supervisor before the participant is released to discuss next steps.

Participants may be released to the listed parents/guardians on a participant's information form unless appropriate court documents can be provided which document a parent/guardian is not authorized to pick up or visit the participant.

PRCS Staff cannot be listed as an authorized pick-up or emergency contact in the program and site they work unless they are a parent/guardian of the child.

Daily Operations

Ratios and Cohorts

The following staff to participant ratios are followed:

- Preschool (2.5-3 years) - Ratio of 1:8, with a max group size of 24
- Preschool and Child Care (3-5 years up to school age eligibility) - Ratio of 1:10, with a max group size of 30
- CASA or Camps (school age eligibility) - Ratio of 1:18, with no max group size
- YAS (middle school eligibility) - Ratio of 1:20, with no max group size
- Adaptive Recreation Camp (5-21 years) - Ratio of 1:4, with no max group size

Late Arrivals/Absent Participants

Parents must inform the site staff through text, brightwheel, or phone that their participant will be arriving late or will be absent from the program. Participants arriving late to a program must be accompanied to the program and signed in by an adult.

Supervision of Participants

Staff should take attendance frequently, using face-to-name verification, to ensure all participants are accounted for and safe at all times. Staff should always be aware of the head count of their group, conduct face-to-name recognition before and after each transition, and use their roster in Brightwheel (or paper roster if the program does not use Brightwheel).

Active Supervision

The safety and success of all our programs require **active supervision** by all staff. Active supervision includes knowing each child's abilities, being aware of and scanning for potential safety hazards, standing in a strategic position, scanning play areas and circulating around the area, and focusing on the positive rather than the negative to teach what is safe for the child and other children. While staff are assigned to cohorts, this does not limit their supervision to their specific cohort. Staff shall always be aware of their surroundings, what the children are doing, and take measures to intervene when appropriate, even if the situation is outside of the assigned **cohort**. A cohort is a regularly assigned group of children to a staff member that remain together for all activities in the program. At some times, cohorts can be mixed with one another, so long as the assigned staff are present and actively supervising.

Face-to-Name

Face-to-name attendance means matching each participant's name to their face. This is done in a roll call style where each participant's name is called, and the staff confirms the participant's name to their

face before moving on to the next participant on this list. Face to name attendance should be taken before and after each transition to different activities or areas in or out of the facility.

Participants must always be within sight and sound, except when participants are in the restroom. When participants are in the restroom, staff should wait outside the door but must be able to hear what is going on in the restroom and intervene if needed. Be mindful about the appropriate number of participants to send in the restroom at a time. Staff should check on a participant who has not left the restroom after five minutes. Staff may need to provide intermittent supervision of a participant in the restroom area to assure the safety of the participants and to assist as needed.

Transition Protocol when moving Participants to Various Locations

When transitioning to a new location (i.e., Going to the gym, bathroom, outside or leaving for a field trip) staff must verify that all students are accounted for before and after each transition. Staff are expected to do this by using face-to-name attendance for all children in their cohort before and after each transition.

Lost/Missing Participants

A **Lost Participant** is when a participant has arrived at the designated program, was checked-in and accounted for, and is suddenly unaccounted for in the program.

A **missing child** is when a child is expected to arrive to the program, no communication has been received from the parent indicating an absence, and the child cannot be located within 10 minutes of expected arrival.

In the event of a lost or missing participant, staff should follow their site/program's emergency action plan and initiate search and notification procedures.

1. Call Code Adam to all staff, immediately shelter in place and all staff do headcounts.
2. Designate one staff to report "Code Adam" to site manager (if Community or Recreation Center) or call Duty Phone (if CASA, YAS, Daze/Fest Camp)
3. If the child is still missing after a search of the program areas, 911 should be contacted by a manager.
4. Contact the parents and supervisor to inform them of the situation and what is being done. Continue searching.
5. Make sure you note all details of the incident as thoroughly as possible, as follow-up documentation with an incident/accident report will be required. If 911 was called, please check the corresponding box on the incident report.
6. Keep parents/guardians and supervisor notified of any updates as they occur.
7. All cases of lost or missing participants must be reported to the Licensed Programs Manager within 24 hours

Child who Elopes from the program

A **child elopement** is when a child runs away from the program or is known to run away from the program **PRCS Definition of elope**: an act or instance of leaving designated program area, out of sight and sound supervision without permission from staff.

Procedures when Elopement occurs:

1. Announce "CODE ADAM"-with which staff is following and location to all staff through walkie-talkies. At least one staff confirm message was received through walkie-talkies.
2. Immediately shelter-in-place with all children in current location of specific program, while one staff member follows the child to keep them in sight or sound supervision. Keep communication through walkie-talkies.
3. CASA/YAS/Camps Call duty phone to report "Code Adam". Centers notify manager or supervisor on duty.
 - a. Duty phone staff or manager/supervisor on duty will determine if 911 should be called based on where the child is, and whether they are in sight or sound supervision. 911 should be called if the child leaves the property. If 911 is called, manager/Supervisor on duty or duty phone must notify Division Manager immediately.
 - b. Any updates in the location of the child should be communicated through walkie-talkies.
 - c. If 911 is called, manager/supervisor or duty phone will ensure parents are notified of the situation immediately after calling 911.
 - d. Once child is returned to site, duty or manager/supervisor instructs site staff to call parents to send child home, and to complete an incident report. The parents need to be notified that the child cannot return until a safety plan meeting has been held and documented with parents.
 - e. Incident report must be signed by parents at pick-up. e. Debrief is held immediately or by end of day/shift, with all staff involved and manager/supervisor to collect all information.
 - f. Prior to the child's return to the program, make a plan to meet with parents and items to discuss during the meeting. This includes development of a safety plan.
4. Coordinator or Program Manager arranges a meeting within 24 hours with the parents, specialist and lead staff to develop procedures to help the student. Student cannot return to site until the meeting is held. (can consult Adaptive Recreation if needed). Parent meeting must be documented and a summary emailed to parents, coordinator and program managers.
5. Safety plan is put into place with all staff on-site. If behavior continues after meeting and safety plan implemented, safety risk of the student, other students, and staff will be evaluated to determine if the student can be supported in the program.

Daily Program Expectations

Outdoor Play/Weather

Outdoor play is an important part of our daily schedule, and all programs will go outside a minimum of 15 minutes per day for a 3-hour program, 30 minutes per day for program length between 3-5 hours and 1 hour per day if program length is over 5 hours. During periods of extreme cold or extreme heat, PRCS

staff will alter outdoor activities. PRCS will follow advisory warnings issued by the [National Weather Service](#). When any group or groups of children go outside, two staff must always be present. PRCS staff cannot make individual accommodation requests for children to remain indoors, unless the request is submitted with medical documentation from a physician's office.

Food/Snack and Menus

PRCS licensed programs must comply with the following food policies:

- Participants and staff must wash their hands before and after snack with soap and water or disposable wipes
- Participants must be seated during snack time and are not permitted to walk while eating or drinking
- Staff must be aware of all participants' food allergies and read labels to ensure that participants do not encounter a food or an ingredient that could produce an allergic reaction. Site staff may consider seating arrangements
- Participants are not allowed to share food
- Participants are allowed to have second helpings of snack
- Staff are encouraged to sit with participants and model appropriate social interactions during snack and clean up
- Participants are permitted to bring a food from home. However, it must be clearly dated and labeled with the participant's name
- All snacks/food brought to site for events should be store bought, have nutritional information and allergen information available
- Programs that provide snacks must have menus, which shall:
 - a. Be dated
 - b. Be posted in a location conspicuous to parents or given to parents
 - c. List any substituted food
 - d. Be kept on file for one week at the center
 - e. Lists foods to be served during the current one-week period

Handwashing

Participants and staff must wash their hands frequently, for at least 20 seconds with warm water and soap, rubbing hands vigorously including back of hands, wrists, between fingers, under and around any jewelry, and under fingernails. Hand sanitizer may be used only if warm water and soap are not available. Examples when participants and staff are expected to wash hands include but not limited to:

- Upon arrival to the program
- Before and after eating meals or snacks
- Before and after feeding a child
- After using the toilet
- After contact with bodily fluids
- Before and after administering medication
- After handling garbage or cleaning
- After coming back to the designated room from outdoor play
- After water table play, sand table play or playing in the dirt

Facility Appearance and Cleanliness

Sites should be respected by both participants and staff. **It is the responsibility of program staff on duty to inspect the classroom at the close of the program day to ensure the room is clean and neat.**

- All equipment, games, crafts, supplies and projects shall be put away at the end of the day.
- Bulletin boards remain current, attractive, and neat.
- Closets are organized and orderly.
- Tables and high traffic spots used regularly shall be cleaned and disinfected at the end of the day.
- Check bathrooms daily for trash or messes and clean as needed.
- Trash removed at the end of the day per your program requirements.

Field Trips

Field trips that take participants away from their designated/regular site must be approved by your supervisor. Trip details such as transportation, trip hours, destination, any items needed—for example swim attire for a pool trip, must be shared with the parents prior to the start of the trip.

Staff-to-participant ratios must be maintained. Attendance rosters must be kept both in the office and with supervisors on the trips. Trip rosters must contain guardian and emergency information. Children must be dropped off before the field trip departure time on field trip days. Children who arrive after the bus has left must be dropped off by families at the field trip location and signed in with staff. Trip staff will notify facility staff of any changes in attendance and update Brightwheel and/or rosters as needed.

Parental permission for transportation and field trips shall be secured before the scheduled activity. Participant Emergency Form (downloaded from ePact) completed upon registration and/or specific Field Trip permission forms suffice.

- If a **Participant Emergency Form (from ePact)** is used: Parents shall be notified of the field trip in writing and given the opportunity to opt out. If waivers for certain activities exist, they are filled out in addition as required by the trip location.
- If a **Participant Emergency Form** is NOT used: Staff will send home written notification and Field Trip Permission forms, which include an emergency release, emergency contact names, and phone numbers, to all parents. Signed permission slips must be returned for all participants or the participant can't attend the trip. Permission slips are filed after the trip is completed.

**See program specific addendums for more information.*

If parents choose to opt out of sending their child on a field trip, their child will not be able to attend the program that day. Some program may have alternative options for days there are field trips. Please see specific program addendum for more information.

Before, during and after field trips, follow **Transition Protocol** for head counts. Determine and communicate cohort assignments prior to the trip, ensuring all staff understand who they are supervising during the trip. Rosters of cohort assignments should be used on the trip for each staff. When transitioning to a new location (i.e., on or off a bus, before leaving for a field trip) staff must verify that all students are accounted for before and after each transition. Sites do this by a standard roll call, a name to face roll call, or both. You will review the program-specific attendance and tracking procedure at your program orientation.

Position staff throughout the bus at the back, front and middle. Staff should always be supervising children. They should not be on their phones and must be awake and alert during bus rides. Upon arrival at field trip location or back to the facility, one staff will be first off the bus and one staff will be last off the bus or vehicle. Staff last off the bus will verify all children have exited the bus or vehicle. The first staff off the bus will ensure the children's safety as they are exiting the bus by checking surroundings and designating a spot for all children to line up for face to name check.

Check List for Field Trips

- Each child's emergency information should be available throughout the entire field trip. Best practice is to print the participant short forms and file in a folder (or downloaded to the site ipad) if a cell phone with Box or brightwheel is not available.
- Fully charged iphones and ipads provided by the county.
- Permission slips completed and reviewed
- Exchange contact information with bus driver and each other
- Ensure staff have contact information for the facility
- Bring extra water for participants
- Ensure staff and children have Items for trip: i.e: lunches, sunscreen, hats, etc.
- Backpack with: first aid kit, medication, rosters, working & charged Phone, walkie-talkies
- Consider giving field trip bracelets with facility phone number to each child

Soiled Clothing Procedures

- Parents should be notified immediately if a participant has an accident.
- Provide participant with their change of clothing and encourage them to change their clothing independently.
 - If the participant does not have a change of clothing and your center or program has extra clothing, provide the participant with that clothing.
 - If needed, two staff will provide the participant assistance, ensuring the safety of the participant and the staff.
- Soiled clothing should be double bagged in plastic bags.
- An accident report must be filled out and signed by the parent at pick-up on the day of the incident

Accident/Incident Reports

Staff are required to promptly document all accidents and incidents that occur in our program on a [PRCS Accident/Incident Form](#). This form must be presented to the parent for explanation and signature on the day of the event. Accident/Incident Forms should be completed with relevant, factual information and exclude names or personal identifiers of other participants.

When completing the submission, staff must choose whether the report is accident related or incident related. Accidents are typically injuries where first aid treatment was given. Incidents are typically situations that non-injury related.

Accident/Incident reports should be completed and submitted to document the following instances: Injury, head injury, challenging behaviors including but not limited to: physical/verbal altercations, disrespectful behavior, bullying, lost or missing participant, a participant that was left out of sight or sound supervision for any amount of time, a call has been made to 911 or emergency personnel, child elopement, property damage, or an unusual situation has occurred.

If the report is due to a head injury, communicable disease, emergency situation where there is a visit by first responders, please inform your supervisor immediately via phone or text with confirmed acknowledgement.

If a parent refuses to sign or is not able to sign on the day of the incident, two staff signatures must be added to the report before clicking on "submit". Parent/guardian may request a copy of the report.

In the event of a head injury or a participant receives outside medical treatment, next day follow up with parents is required. The Licensed Program Manager must be informed within 24 hours of any participant injury that occurs during our programs and requires outside medical attention. Make sure to communicate all relevant information to your supervisor.

When to Notify Leadership:

Staff must notify their supervisor, who will inform the Division Manager, with confirmed receipt of information, in the event of the following situations:

- Head injury
- Suspicion of child abuse/neglect
- Lost or missing participant
- Authorities/EMS notified
- Injury requiring outside medical treatment-if a parent/guardian takes child to receive medical care due to an injury that occurred during program hours
- Death of a participant while in care
- A child elopes from the program area without permission from staff

Behavioral Management

Effective guidance and discipline focus on the development of each participant, therefore we strive to first understand the function behind behaviors. PRCS staff provide positive reinforcement for appropriate behaviors and offer suggestions for replacement behaviors. Clear and consistent rules and

expectations are shared with participants, supporting a safe and predictable environment. Behavioral guidance shall be age and developmental stage appropriate, constructive in nature, and shall be intended to redirect participants to appropriate behavior and resolve conflicts.

Cause and Procedure for Suspension or Dismissal

Behaviors that may lead to an incident report, possible suspension, or termination from the program include:

- Refusing to follow basic safety and program rules
- Stealing or defacing property
- Engaging in verbal or physical fights or being physically aggressive
- Repeated disrespect towards staff
- Rude and inappropriate behavior towards others by participants or parents/guardians
- Bullying: Definition-Bullying is the systematic and chronic inflicting of physical hurt or psychological distress on another person. The Code of Virginia at § 22.1-276.01 defines bullying as:
 - Any aggressive and unwanted behavior that is intended to harm, intimidate, or humiliate the victim
 - Involves a real or perceived power imbalance between the aggressor or aggressors and victim
 - Is repeated over time or causes severe emotional trauma
 - "Bullying" includes cyber bullying
 - "Bullying" does not include ordinary teasing, horseplay, argument, or peer conflict

Immediate removal from the program may occur if administration feels they cannot maintain the safety and welfare of the participant or other participants in the program, or the participant engaged in behaviors associated with the zero-tolerance policy. PRCS will call parents/guardians to pick up any participant who is a threat to the safety of themselves or others.

PRCS staff are pledged to make every effort to maintain a participant's enrollment and engagement in the program. Only after all the procedures have failed on the part of the administration staff and parent/guardian, will dismissal be considered. If, in the opinion of the program administration, a participant's behavior presents a physical danger to themselves or others, or if the participant fails to follow rules, then an immediate suspension from the program may result. PRCS staff are trained to use discipline techniques that are constructive, age-appropriate, and that focus on redirection and positive reinforcement. Participants contribute to the establishment of site rules and are expected to follow them. Staff will set clear expectations.

In the event of inappropriate behavior, the following steps may be taken:

- Incident Report(s)
- Parent/guardian Meeting(s)
- Suspension
- Dismissal/Expulsion

Other potential causes for dismissal from PRCS programs:

- Failure to pay tuition as required.

- Failure to provide all necessary paperwork for registration, including any required medication documentation.
- Failure to comply with program policies, procedures, and rules of behavior

Procedures for recommendation of suspension or dismissal from a program:

1. Collect all documents to support your recommendation.
2. Communicate with parents that you will be discussing the situation with management, and that a suspension or expulsion may be considered.
3. Notify your supervisor or manager of the situation.
4. Fill out and attach supporting documents in the [Child Suspension/Expulsion Recommendation Form](#).
5. Division Manager will review supporting documents and make a recommendation to approve or deny request.
 - a. Suspension recommendations for 1 day can be approved by Division Manager
 - b. Suspension recommendations for 2 or more days are approved by a Division Manager and Department Director
 - c. Expulsion recommendations are approved by a Division Manager and Department Director.
6. Once the recommendation is approved, you will be sent an email with a letter template to fill in the information. Once completed, send the document to your Division Manager for review and signature.
7. Division Manager or manager will notify you of final decision, and when to schedule meeting with the parents to inform them of the department decision.
8. Parents will be provided a copy of the decision letter at the meeting.

Zero Tolerance Policy

PRCS does not permit the use of weapons, tobacco products, alcohol, drugs, or fireworks during our programs or in our facilities. In addition, theft, violent behavior, or destruction of property will not be tolerated. Any violation may result in immediate dismissal from the program with no refund of fees. Parents/guardians will be expected to provide immediate transportation home, should an incident occur on or off site.

Health, Safety, & Risk Management

Ill or Injured Participants

If a participant becomes sick or injured while at the program, contact the parent immediately. If the parent is not available, contact emergency contacts. If necessary, take the sick participant to the center/site office or isolate him/her until he/she is picked up. Complete an incident/accident report if necessary.

Daily Health

1. Participants may not attend if they have:
 - a. Temperature of 100°F
 - b. Recurring vomiting and/or diarrhea
 - c. A communicable disease
2. Participants who have been sick should remain home for at least 24 hours and be symptom free (without the aid of medication) before returning to program.
3. If a participant becomes sick, contact the parent immediately to pick up the child. If the parent is not available, call the emergency contact person.
4. Isolate and provide the participant with a comfortable, quiet place to sit or lie down. Ensure supervision.
5. Unless otherwise directed by a physician, you are required to exclude a participant from the program if they have a communicable disease that is listed on the [Communicable Disease chart](#). If a participant enrolled in the program or any member of the immediate household has a communicable disease, the parents must notify the program staff immediately so parents of the other participants can be notified. Communicable Disease Chart recommendations will be followed for when participant can return to the program.
6. Participants with active infestation of head lice will be sent home. Parents will be provided information on accepted methods of treating their participant. They will not be allowed to return to care until a prescribed lice treatment is successful, making them no longer communicable. This is determined by the absence of both lice and the nits (eggs). Staff will monitor participant for a period of 7-10 days to check for possible re-infestation. Parents of enrolled participants will be notified of possible exposure.
7. Any additional procedures that may change due to any local or national health mandates will be addressed with staff and parents as they occur with an addendum.

Dietary Restrictions

Dietary restriction: A limitation on what a person can eat. These can be due to preferences, intolerances or allergies.

1. **Dietary preference:** If a participant has a dietary restriction due to religious practices or ideological beliefs, then the parent will simply need to provide a written "action to take in case of emergency" in case the participant was to consume that food.
2. **Dietary Intolerance:** A participant may have a minor food sensitivity, such as lactose intolerance or celiac disease, where a participant could have a potential reaction to consuming a certain type of food. This involves a problem with the participant's digestive system. A written action to take in case of emergency will be required at a minimum. In some cases, a medication may be required.
3. **DIAGNOSED Food allergy:** A dietary restriction related to problems with the participant's immune system and vary from mild to severe reactions. ALL diagnosed food allergies will require a Food Allergy Action plan to be completed by the participant's physician.

It is extremely important that ALL staff are aware of the participants who have dietary preferences, intolerances, or allergies. Your program will have a program-specific allergy management system in place. Each program/classroom should have an allergy list. This should be stored in a cabinet or closet and covered with a sheet to maintain privacy.

Food Allergy Action Plan

All staff are expected to review and become familiar with their program's allergy list, food allergy action plans, and with individuals' signs or symptoms that may occur from an exposure and how to respond to different reactions. If a signs or symptoms of a food allergy occurs, staff must follow the action plan as determined by the parent and physician. If 911 is called, parents must always be notified immediately.

Medications

Medication Administration, Forms and Storage

Medications can ONLY be administered by a staff member certified in MAT (Medication Administration Training) or independent contractor who is licensed by the Commonwealth of Virginia to administer medications. If a participant must take medication during the program hours, the parent must complete a PRCS Medication form giving the staff permission to administer the medication. MAT trained staff must document all medications - time, the dose given, adverse effects on the Medication Administration Log Form.

Please note:

1. Medication shall be labeled with the participant's name, the name of the medication, the dosage amount, and the time or times to be given.
2. All medications shall be in the original container with the direction label attached. All medication should be stored in a locked place that prevents access by participants.
3. Staff that are not MAT certified are not authorized to administer medication to participants.
4. Any participant for whom emergency medications (such as albuterol, glucagon, and epinephrine auto injector) have been prescribed shall always be in the care of a staff member who is certified to administer medications.
5. Medication, except for those prescriptions designated otherwise by written physician's order, including refrigerated medication and staff's personal medication, shall be kept in a locked place using a safe locking method that prevents access by participants. If a key is used, the key shall not be accessible to the participants.

Medications for Participants

Staff do not need to be MAT certified to review and accept medication forms for a participant in care. If a parent is handing over a medication and authorization forms, please use the PRCS [Medication Intake Form checklist](#) to verify all requirements have been met. On the contrary, ALL staff must be aware of what forms can and must be used when a participant requires medications on site in your program.

Participants have various medication needs, so PRCS has developed multiple forms to address these differences. Here are the 4 forms that our programs use, depending on the participant's needs.

Short-term medication form

When participants require medications for a short period of time, the PRCS [short-term medication form](#) can be used. This form allows a medication to be authorized for up to 10 business days. The main benefit of using this form is that a doctor's signature is not required. It is important to remember that this form may only be used twice in one program year per medication. That information is listed at the top of this form.

Long term medication form

The PRCS [Long term medication form](#) is the most common medication form used in our programs. Any medication (prescription and non-prescription) that may need to be authorized for more than 10 business days must have this form completed. The parent will complete the top portion, "Section A", then sign and date. The doctor will complete, sign and date the bottom portion. IF the medication is for a diagnosed food allergy, then the Food Allergy Action Plan must be completed in addition to this form.

Food Allergy Action Plan (FAAP) form

The PRCS [Food Allergy Action Plan](#) form MUST be completed for any diagnosed food allergy. The doctor will complete the body of the form and sign and date it. The parent is required to sign and date this form as well. While parent/guardians are required to complete this form, if they choose not to provide the required medication to the program, they will ALSO need to complete the [No Medication will be provided form](#).

No Medication Will be Provided form

If a participant requires a medication, but the parent decides not to provide it for our program, they will need to complete this form. Please note that this cannot be completed instead of the Food Allergy Action Plan, but it can be completed in addition to it.

Seizure Plans

A written seizure plan by a physician will be required for all participants who have a seizure disorder. A seizure plan should include the following: seizure type, seizure frequency and duration, symptoms leading up to seizure, recovery time and plan, and medication administration procedure instructions.

Medication information and understanding what documents are required

It is very important that staff cross reference participants' registration forms with their physical examinations. There are many cases where this information will not match. Parents often will list a food as an allergy on the registration form to ensure that the participant does not consume it. However, if these forms do not match, it can be confusing to know what will need to be done next. This chart shows what action should be taken in those instances and should be available at your program site as a reference.

Medication information and documents required

	Physical examination No allergy listed*	Physical examination Allergy listed*
Child's registration No allergy listed	No additional documentation needed	All medication forms are required. If parent does not wish to provide medication, they can complete the "No Medication- exemption" form <u>in addition</u> to the other forms.
Child's registration Allergy listed	Check the dates of each form. Discuss with the parent to determine if it may be a food intolerance or dietary restriction	All required medication forms must be requested/obtained.

* If physical was completed a few years ago, parent may need to bring in updated physical to verify whether or not the child requires medication.

Topical Medications, Sunscreen and Insect Repellent Form

All nonprescription medications and over-the-counter skin products (such as bug spray, **sunscreen**, and ointments) shall be used in accordance with the manufacturer's recommendations and shall not be kept or used beyond the expiration date of the product. Staff members without medication administration training may apply insect repellent and sunscreen **if permission is granted on the participant information form**, unless it is prescription. **Per Licensing, we are required to assist children age 8 years and younger in applying sunscreen if they are to have it reapplied at the program. Children age 9 years and older may apply their own sunscreen with supervision.** If the intended purpose is medicinal, a MAT trained staff must apply it and it shall be stored with the other medications. Reference the participant information form for parent authorization and any notes about adverse reactions if sunscreen or insect repellent is used. Sunscreen and insect repellent must be kept in the original container and labeled with the participant's name. Sunscreen and insect repellent may not be shared between participants unless they are members of the same household and are in the same group the entire time, they are at PRCS programs.

First Aid Kits

First aid kits must be maintained on site and every classroom in a center should have a portable first aid kit. Each First Aid kit shall be easily accessible to staff but not to participants. All staff should be aware of the location of the First Aid Kit and make sure that it is kept out of reach of any participants.

State licensing requires that first aid kits shall include at a minimum:

Scissors	Tweezers
Gauze Pads	Adhesive Tape
Band-aids, assorted	Antiseptic cleansing solution/pads
Thermometer (working with spare battery)	Triangular Bandage
Single use gloves	First Aid Instruction Manual
Battery operated weatherband radio	Battery operated flashlight

Emergency Medical Care

Each participant's registration form requires an authorization for emergency medical care should an emergency occur when the parent/guardian cannot be located immediately. Exceptions to providing this authorization are limited to the parent/guardian stating in writing, an objection to the provision of such care on religious or other grounds.

Emergency Preparedness Plans and Procedures

Each location has a carefully drafted [emergency preparedness plan](#) specific to the location and program, which must be reviewed, updated and signed annually. All staff are responsible for reviewing the plan and what actions to take in various types of emergency situations. Each location is required to practice and document emergency drills monthly on the [PRCS Emergency Drills Log](#). Most emergencies fall in to three categories: Emergency Evacuation, Shelter-in-Place and Lockdown.

The Emergency Preparedness Plan covers evacuation and response procedures for everything from medical emergencies, weather-related emergencies, utility disruptions, and safety threats or violent situations, to missing participants. This plan includes responsibilities during emergency situations, where to evacuate, and who to notify and report to. Floor plans, evacuations plans, shelter-in-place locations should be posted in conspicuous location(s) throughout your program so make sure to review the primary and secondary evacuation routes and shelter-in-place locations as well.

If an emergency occurs, reference the site's emergency action plan. After addressing the situation, contact the affected participants' primary guardians and inform your supervisor. If emergency medical services are required and a participant must be transported by ambulance, staff should assess whether ratio will allow a staff member to ride in the ambulance with the participant and act accordingly. Staff must keep relevant participant families and their supervisor updated as the situation progresses and resolves. The Licensed Program Manager and Division Manager must be informed as soon as possible, not to exceed 24 hours after the incident. An incident/accident report must be completed. Administrative staff will check in with the family within 24 hours.

Fire/Emergency Evacuation Drills

Every staff person should be familiar with all exit routes (both primary and secondary) from the building as well as the procedures posted at each site. The Community Center Manager or Site Supervisor will select an appropriate space outside the building in which to lead students in case of fire/emergency. If evacuation of site will be for an extended period of time, transportation will need to be arranged to a site that has been previously designated in the center's Emergency Plan. It's very important to be familiar with your site's Emergency Preparedness Plan. Fire drills must be practiced and documented once a month.

Shelter in Place Drills

The Shelter in Place drill is similar to the fire drill in that staff and students are to practice reporting to a safe and secure area, except in this case, the group will go to a location within the building in the event of an emergency. This action may be taken in the case of a tornado, severe storm, or release of toxic chemical, biological or radioactive materials to the outside air or other emergency. If the outside air quality is threatened or compromised, sheltering in place keeps you inside an area offering more protection. Shelter in place drills must be practiced and documented twice per year.

Lockdown Drills

Licensing defines "Lockdown" as a situation where participants are isolated from a security threat and access within and to the facility is restricted. Although similar to a Shelter-in-place drill, there are other things staff should keep in mind when conducting these drills.

- Facility containment procedures, such as closing of fire doors or other barriers
- Scenario applicability (if there is an intruder, where would they likely enter the building? How does this affect the route to the secure area?)
- Assembly points, and methods to account for all participants at the safe locations

Lockdown drills must be practiced and documented twice per year.

Injury Prevention Plan and Preventing Abusive Head Trauma procedures

All programs must post an [injury prevention plan](#) which shall be updated at least annually based on documentation of injuries and a review of the activities and services. Post this plan on the parent board.

This plan outlines PRCS Program safety best practices and includes:

1. All staff shall follow Virginia Department of Education, Office of Child Care Health and Safety Standards for Licensed Child Day Centers.
2. Each site shall establish safety rules that pertain to their program, layout, and special circumstances
3. Each site shall establish a playground safety plan, posted in plain sight, that includes provisions for active supervision to include positioning of staff in strategic locations, scanning play activities and circulating among children, and method to maintain resilient surfacing if located at a PRCS owned facility.
4. Staff will review CDC Preventing Abusive Head Trauma resource in Collaboration

Playground Safety Plan/Rules

Each center shall follow playground safety procedures that shall include:

- Safety checks of equipment
- A list of areas/equipment that is off limits to participants
- Provision for active supervision by staff to include positioning of staff in strategic locations, scanning play activities, and circulating among participants
- Method of maintaining resilient surface.

Be sure the participants are aware of and understand all the playground safety rules as most accidents occur on the playgrounds.

- Slides are for going down only
- Keep a safe distance around a participant using a swing.
- Safe practices on the playground equipment.
- If an emergency arises, follow staff instructions.
- Both staff and participants should use sports' equipment and games in a responsible and respectful manner.

Staff must situate themselves so participants are within sight at all times. Areas not suitable for play:

- Picnic Tables Parking Lots Trees, tall weeds/grass
- Fences
- Playground equipment that is not age appropriate
- Cement bases for light poles
- Areas where participants cannot be seen

Daily Site Safety Checks

Prior to the program start, each site must conduct a daily site safety check to confirm whether any hazards are present before the children arrive. This is done with the [Daily Site Checklist](#). If there are any hazards, staff will remove or correct them immediately or develop a plan to keep children away until it can be fixed.

Mandatory Reporting of Child Abuse and Neglect

All staff are mandated reporters and must take the [Mandated Reporter Training](#) prior to their first day of working with children. Per § 63.21-1509 of the Code of Virginia, any paid staff who have reason to suspect that a child is an abused or neglected child, shall report the matter immediately to the local department of the county or city wherein the child resides or wherein the abuse or neglect is believed to have occurred or to the Virginia Department of Social Services toll-free child abuse and neglect hotline. If you suspect child abuse or neglect, you must immediately report it, along with details, to your supervisor. Your supervisor will work with you to complete the [CPS Reporting Form](#) to ensure all details needed for CPS are included in your report.

Once the report is complete, using the information entered and with the support and presence of your supervisor, you will report the suspected abuse to the Loudoun County Department of Family Services. Additionally, the supervisor must notify Division Manager and the Licensed Programs Manager when a report has been made.

Please do not take it upon yourself to investigate suspected child abuse or neglect. Child Protective Services will investigate, and ask you questions as needed for their investigation. Your only role is to ensure it is reported immediately.

Any reports made to CPS or Licensing will remain anonymous and shall remain confidential. Pending, current and closed investigations shall remain confidential, including final reports.

State Licensing

PRCS Licensed and Licensing Exempt programs must meet the standards promulgated by the Virginia Board of Education. [The CDC regulations](#) can be found online at the VDOE website, www.doe.virginia.gov

VDOE enforces these standards by inspecting centers at least twice a year as well as investigating complaints or self-reported incidents.

The purposes of the standards are:

1. To ensure that the activities, services, and facilities of participant day centers are conducive to the well-being and development of participants
2. To reduce health and safety risks in the caregiving environment.

Licensing Inspections

Licensed program staff will work with the Licensed Program Manager to document and communicate all licensing visits, subsequent violations, and if there are no violations listed on the Licensing Inspection Summary. A Licensing Checklist should be used regularly to ensure your program is meeting licensing compliance.

Programs exempt from Licensure

The following PRCS Programs have filed an exemption from licensure, however, all programs are expected and will be held accountable to follow Virginia Department of Education, Standards for Licensed Child Care:

Camps•CASA•CASA Academy•YAS

Programs that are exempt from Licensure will have at minimum, two compliance inspections, from the PRCS Licensed Programs Manager annually. Visits are documented and sent to the Supervisor and Manager of the particular location.