Springs of Life Infant Care Pr[*¦æ{ ENROLLMENT PACKET ADDENDUM 2019





Formula Decision Form

Childcare Center's Name: Springs of Life Children's Center

Infant's Name: _____ Date of Birth

Infants being fed formula must have this form completed and on file before the childcare center can receive reimbursement for the infant's meals.

If the infant is being fed breast milk, this form is not required.

Our center participates in the Child and Adult Care Food Program (CACFP). In order for our center to receive reimbursement for meals served to infants, the CACFP requires that our center provide the parent or guardian with an option of a milk-based, iron-fortified infant formula and/or a sov-based, iron-fortified infant formula.

In our center, the iron-fortified infant formulas available at no charge to you are:

(Milk based) Simply Right - Gentle (Off-brand version of Enfamil Gentlease)

(Soy based) N/A

You as a parent or guardian may decline the formula(s) provided by our center and supply your choice of iron-fortified infant formula for your infant and our center will supply the other food components specified on the CACFP Infant Meal Pattern when the infant is developmentally ready-to-accept them.

Please choose one of these options and fill out the following information:

When meals are served to my infant, effective _____

(Month/Year)

Yes, I accept the formula supplied by your childcare center as the iron-fortified infant formula my infant will receive.

No, I decline your childcare center's choice of formulas. I will purchase and provide the childcare center with iron-fortified infant formula for my infant.

Parent/Guardian's Complete Name (print)

Parent/Guardian's Signature

Childcare Center Representative Signature

Safe Infant Sleep in Child Care

Springs of Life Children's Center

Providing infants with a safe place to grow and learn is very important. For this reason, **Springs of Life Children's Center (SLCC)** has created a policy on safe sleep practices for infants up to 1-year-old. We follow the recommendations of the American Academy of Pediatrics (AAP) and the Consumer Product Safety Commission to provide a safe sleep environment and reduce the risk of sudden infant death syndrome (SIDS). SIDS is "the sudden death of an infant under 1 year of age, which remains unexplained after a thorough investigation." The staff, substitute staff, and volunteers at **SLCC** follow the AAP safe sleep policy.

Sleep Position:

- Infants will be placed flat on their backs to sleep every time unless there is a physician, practitioner or clinician signed sleep position medical waiver up to date on file. In the case of a waiver, a waiver notice will be posted at the infant's crib without identifying medical information. The full waiver will be kept in the infant's file.
- Infants will not be placed on their side for sleep.
- Devices such as wedges or infant positioners will not be used since such devices are not proven to reduce the risk of SIDS.
- Infants who use pacifiers will be offered their pacifier when they are placed to sleep, and it will not be put back in should the pacifier fall out once they fall asleep.
- Pacifiers will be cleaned between each use, checked for tears, and will not be coated in any sweet or other solution.
- Parents are asked to provide replacement pacifiers on a regular basis.

Sleep Environment:

- Our program will use Consumer Product Safety Commission guidelines for safety-approved cribs and firm mattresses.
 - Crib slats will be less than 2 3/8" apart
 - Infants will not be left in bed with drop side down
 - Playpen weave will be less than $\frac{1}{4}$ "
- Consumer Product Safety Commission safety-approved cradles and bassinets may also be used for sleeping if the infant meets the weight and height requirements.
- Infants will not be placed to sleep on any standard bed, waterbeds, couches, air mattresses, or on other soft surfaces.
- Only one infant will be placed to sleep in each crib. Siblings, including twins and triplets, will be placed in separate cribs.
- The crib will have a firm tight fitting mattress covered by a fitted sheet and will be free from blankets, loose bedding, toys, and other soft objects (i.e., pillows, quilts, comforters, sheepskins, stuffed toys, etc.)
- To avoid overheating, the temperature of the rooms where infants sleep will be checked and will be kept at a level that is comfortable for a lightly clothed adult.
- Sleep clothing, such as sleepers, sleep sacks, and wearable blankets, may be used as alternatives to blankets.
- Bibs and pacifiers will not be tied around an infant's neck or clipped on to an infant's clothing during sleep.
- Smoking will not be allowed in or near **SLCC**.

Supervision:

• When infants are in their cribs, they will be within sight and hearing of staff at all times.

- A staff member will visibly check on the sleeping infants frequently all sleeping infants must be physically observed at least every ten (10) minutes by a staff member.
- When an infant is awake, they will have supervised "tummy time." This will help babies strengthen their muscles and develop normally.
- Infants will spend limited time in car seats, swings, and bouncer/infant seats when they are awake.

Training:

- All staff, substitute staff, and volunteers at **SLCC** will be trained on safe sleep policies and practices.
- Safe sleep practices will be reviewed with all staff, substitute staff, and volunteers each year. In addition, training specific to these policies will be given before any individual is allowed to care for infants.
- Documentation that staff, substitutes, and volunteers have read and understand these policies will be kept in each individuals file.
- All staff, substitutes, and volunteers at SLCC will be trained on first aid for unresponsive infants as well as what to do when they have a question or need assistance before they are allowed to care for infants. There must be at least one (1) staff member on duty in each infant room at all times who holds a Department-approved First Aid and Safety certificate that includes CPR for all ages.

When The Policy Applies:

This policy applies to all staff, substitute staff, parents, and volunteers when they place an infant to sleep in **SLCC**.

Communication Plan for Staff and Parents:

Parents will review this policy when they enroll their child in **SLCC** and a copy will be provided in the parent handbook. Parents are asked to follow this same policy when the infant is at home. These policies will be posted in prominent places. Information regarding safe sleep practices, safe sleep environments, reducing the risk of SIDS in child care as well as other program health and safety practices will be shared if any changes are made. A copy will also be provided in the staff handbook.

Any individual who has questions may ask:

based on individual facts and circumstances.

Program Contact: Charlene McQueen, SLCC North Center Director

| Child's Name | DOB :// |
|------------------|--|
| Signed by: | Director/Owner |
| - | Staff Member |
| - | Parent |
| Date: | Effective Date and Review: |
| This policy is e | ffective1/1_/2019 and will be reviewed annually by12_/31/ |
| 19 or soo | ner if needed. Parents and staff will be notified of any upcoming policy review. |
| | |
| | n contained in this publication should not be used as a substitute for the medical care and pediatrician. There may be variations in treatment that your pediatrician may recommend |

Parent Permission for Pacifiers

In order to reduce the risk of Sudden Unexpected Infant Death, including Sudden Infant Death Syndrome, suffocation and other sleep related deaths, Colorado Rules and Regulations for both Family Child Care Homes and Child Care Centers require that infants one month and older be offered a pacifier for all sleep times with parent permission.

| Name of Child Care Facility | License # | | | |
|--|----------------|--|--|--|
| | | | | |
| Parent Permission: | | | | |
| Child Name | Date of Birth/ | | | |
| Pacifier: Colorado Rules and Regulations for Family Child Care Homes and Child Care Centers require that infants one month and older be offered a pacifier for all sleep times only with parent permission. | | | | |
| No pacifier at sleep time | | | | |
| I also understand that no infant will be forced to use a pacifier; the pacifier will not be placed back in the infant's mouth once the infant has fallen asleep and the pacifier falls out, the pacifier will not be coated in any sweet solutions and the pacifier will be cleaned and replaced regularly. Pacifiers will not be attached to clothing in any way and the use of pacifiers with attached stuffed animals is discouraged. | | | | |
| Parent or Legal Guardian Signature | // Date | | | |

SPRINGS OF LIFE CHILDREN'S CENTER INFANT + TODDLER PROGRAM PARENT HANDBOOK SIGNATURE PAGE & PERMISSION FORMS

| Child(ren)'s Name(s): | | | | |
|---|-----------------------------|--|--|--|
| Parent/Guardian's Name(s): | | | | |
| Home Phone: | Cell Phone: | Work Phone: | | |
| Please read carefully and initial each of the following statements: | | | | |
| I have read and agree to | the terms laid out in th | e Springs of Life Parent Handbook | | |
| I have read SLCC's television and video policy and giver permission for my child to watch director approved videos | | | | |
| I authorize the staff of SLCC to take photos of my child(ren), and release images to be used by SLCC for any and all classroom and marketing purposes | | | | |
| I authorize the staff of SL nap time | CC to set up my child(rei | n) to take a nap on an approved cot during | | |
| | d(ren) run out of sunscr | nscreen to my child(ren) for outdoor activities. een that I have provided, I authorize SLCC to enter | | |
| | out are not limited to) dia | ical preparations on my child(ren)'s healthy aper rash cream, lotion, baby powder, and | | |