



PARENT HANDBOOK



monticello

Church and Preschool



Montlifeumc.org

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Monticello Preschool
23860 W. 75th Street
Shawnee, Kansas 66227
(913) 441-1473
Monticello-umc.org
Rheannam@montlifeumc.org

Mission Statement: To provide a safe and loving environment in which young minds are nurtured, supported, and educated while developing self-esteem and Christian values.

Hours of Operation: Monday-Friday 7:00-5:45

Services: Monticello Preschool is open to children in the proper age category regardless of race, religion, national origin, ancestry, sex, or physical handicap.

Classes:

Part-Time Preschool for children ages 3-5 years old. Part-time is 2 ½ hrs. on any given day.

Full-Time Preschool for children ages 3-5 years old. Full-time is more than 2 ½ hrs. on any given day.

Flexibility with days and times is available for full-time and part-time.

Our school sessions run from August to May with a summer session in June-July. Your child will remain in the same class for the duration of each session. A meet and greet will be scheduled before the start of school in August. Each May we will hold a graduation ceremony for those leaving Monticello Preschool and going on to kindergarten. Please call the Preschool office if you have any questions about placement for your child.

Enrollment: Enrollment begins in January for current students. Enrollment forms are available to print online at MontLifeUMC.org and can be submitted to the preschool office, along with the \$150.00 annual, non-refundable enrollment fee paid with check, cash, Venmo, or Vanco. The preferred method of payment is cash or check so we do not incur processing fees. Enrollment for the public will be after the current family enrollment. We will have an optional wait list for classes if needed.

Required Forms: The following forms are *required* for admission and must be turned in no later than the first day of school. Your child will not be able to attend without these forms:

1. Enrollment Form
2. Medical Record Form (signed by parent)
3. Child Health Assessment Form (signed by physician)
4. History of Immunization Form (signed by parent)
5. Authorization for Emergency Care (signed by parent)

****Please notify the office if any updates need to be made to any of these forms throughout the school year.**

Payment Policies: Preschool fees are expected to be paid on the first of each month, with equal payments from August-May. A late charge of \$15.00 will be added if paid after the 15th. If you know your payment will be late, please contact the office to make arrangements. Payments for May must be made by the 15th and must be up to date in order to graduate and/or attend the summer/fall session.

Regular monthly tuition rates still apply during vacations, illnesses, and district closures and special circumstances that would require a closure. Monticello reserves the right to dismiss any family not keeping an account current. We accept check, cash, Venmo, and Vanco. Our preferred methods of payment are check or cash, so we do not incur processing fees.

Drop Off/Pick Up Procedures: We have a coded door to enter the school. You will receive the door code at meet and greet. A student ID card will also be provided for checking in/out. It is imperative that your child is signed in/out every day. If you lose your card or need extra cards, please let the office know.

On the enrollment form there is a place for you to authorize friends and family members to pick up or drop off your child. Please make sure those authorized to drop/off and pick up know the door code and ID number. No child will be released to another person not authorized by the parents to take the child. If last minute changes occur, we still must have the change/authorization in writing by either text or email. Please include the name of the person and phone number picking up your child. We reserve the right to ask for identification and verification. If any legal custody arrangements are in place, we will need a certified copy to keep in the office to be able to honor such arrangements.

Communication: Please be sure to sign up for Parent Text Alerts at MontLifeUMC.org. Go to the Preschool tab, then scroll down to Information and choose Sign-Up Text Alerts. This will ensure you are kept informed of weather closures, emergencies, school closures, and updates from the Director.

Your child's teacher will primarily use texts and emails for class communication to keep you informed. In addition, a weekly "What We Did this Week" letter will be sent home with your child. Each month a school Newsletter will be given to you that will have reminders of any events, changes, or closures for the month. The Director will send out emails for important announcements and information throughout the year. Please be sure to check your emails.

We are unable to give out family email/phone numbers. We are happy to put birthday party invitations or other correspondence in backpacks.

Some of our curriculum goals include...

- Spiritual:* To help children be aware that they are a child of God and therefore worthy of love, acceptance, and support. Children will be introduced to Bible verses, Bible stories, and Bible songs.
- Social:* To help children feel comfortable in a school setting, trust in their new environment, make friends, and feel like they are part of a group.

•*Emotional*: To help children experience pride and self-confidence, develop independence and self-control, and to have a positive attitude towards life.

•*Cognitive*: To help children become confident learners by letting them try out their own ideas and experience success. We will help them acquire learning skills such as the ability to solve problems, ask questions, and use words to describe their ideas, observations, and feelings.

•*Physical*: To help children increase their large and small motor skills and feel confident about what their bodies can do.

Daily Schedule: This is an example of what a day might look like for your child. Schedules will vary from room to room.

7:00-8:45	Before school activities and outside time.
9:00-9:30	Circle - greeting; hand out jobs; flag salute; calendar; weather; songs; bible verses; show/tell; fingerplays; introduction to projects; and new center items; book story time.
9:30-10:00	Projects - table time; letter of the week page; worksheets; craft/art projects.
10:00-10:20	Specials - special activities: Art, Spanish, and Bible Time with the Pastors.
10:20-10:30	Bathroom break/wash hands
10:30-10:45	Circle/Snack - birthday celebrations/snack/prayer.
10:45-11:10	Center time - children will go to areas in the room to play/work.
11:10-11:30	Recess - outdoor play or indoor activity.
11:50-12:55	Lunch/Rest Time Prep - book story time; prayer; lunch; load backpacks; setup mats.
12:55-1:30	Recess - outdoor time or indoor activity/bathroom.
1:30-3:00	Rest Time - quiet time on mats with a children's movie or music being played.
3:00-3:15	Rest Pack Up/Bathroom - pack sleep bags; bathroom break/wash hands.
3:15-3:30	Snack - prayer
3:30-4:30	Recess - outdoor play or indoor activity/bathroom.
4:30-Close	Classroom activities until dismissal.

School Closures/Late Start & Absences: Monticello preschool follows the DeSoto USD 232 school district calendar for part time students (2 ½ hrs per day). Full time students will receive a calendar that shows we are open nearly every day. During DeSoto's pre-planned closures, there are days that the preschool will remain open for the full-time students that need care. Part -time (2 ½ hrs. per day) will not have school on DeSoto's pre-planned days. Please refer to your child's preschool calendar for the open and closed days throughout the year.

Inclement Weather - If DeSoto is closed due to *inclement weather*, the preschool will be closed and you will receive a text alert.

Late Start - If DeSoto has a late start, due to weather/road conditions, preschool will be **closed to part-time students**. We will be **open at 10 am to full-time students** needing care. A text alert will be sent notifying families of the late start.

Absence - planned/unplanned - If your child is absent for any reason planned/unplanned, please call 913-441-1473 to let the office know or email rheannam@montlifeumc.org

Safety: We are a secure preschool facility equipped with coded locks for entry from the outside and from the upstairs. Monticello Preschool is licensed and in good standing by the state and is inspected annually to

ensure an outside organization provides oversight for safety and security. Staff have gone through extensive background checks, fingerprinting and are all CPR/First Aid trained.

Emergency Plans/Drills: The preschool practices Fire, Tornado, and Quiet as a Mouse drills (intruder/lock down) throughout the year. Specific procedures are posted in each classroom and Emergency Procedures and Continuity of Operations are posted on the hallway information bulletin board. A text alert will be sent immediately to inform you if there is an emergency.

Health: For any illnesses, we ask that you keep your child at home. Please refer to our Health Exclusion Policy. We follow the Johnson County Department of Health and Environment guidelines for all illnesses. If a child becomes ill while at school, we will remove the child from the classroom to monitor and care for until pick up. We will notify you and you will be expected to pick up your child within an hour. If for any reason we are unable to reach the primary contacts, we will then refer to the emergency contacts you have authorized on your enrollment forms. Please keep all emails, addresses, and phone numbers current so we can reach someone in an emergency.

Medication: If your child requires any medication to be given while at school, we will need you to fill out a Long-Term or Short-Term medication form to be kept in the office. All medications given at school must be in their original packaging and if it is a prescription, it must have the pharmacy label attached. Directions must be left with all medications. The medications will be locked in the office for safe keeping. Members of our staff have been trained in administering medications. We are unable to apply any ointment, ChapStick, or lotion unless you bring them to the office and complete a Long or Short-Term medication form. We do use soap for cleaning hands. If for any reason your child needs special soap for sensitive hands, please talk with the office. With completed forms you can bring in special soap to be kept in the restrooms for your child to use.

Nannying: We really value the time and care we dedicate to our staff and their roles here. For that reason, we prefer to keep their focus on our classroom and not have them take on nannying duties for other families, especially during the summer when we're all working hard to keep things running smoothly.

Preschool Illness Guidelines

In order to prevent the spread of illnesses and keep our children and staff as healthy as possible, we ask that you call (913) 441-1473 or email the preschool at Rheannam@montlifeumc.org report any absences. The office can let you know if certain illnesses are currently in the child's classroom and give directions as to returning to school. We follow the Johnson County Health and Environment Disease and Exclusion Guidelines.

Guidelines for a few common illnesses:

- Fever - must be fever free <99.0 for 24 hours without the use of medication.
- Cough - a persistent cough is grounds for exclusion until seen by a doctor or brought under control with medication.
- Diarrhea - 2 or more loose watery stools per day - must be diarrhea free for 24 hours without the use of medication.
- Vomiting - must be free of an upset stomach and vomiting for 24 hours.
- Lice - once treated with proper solution can return as long as no live nits. Exclude if live nits.
- Eye - pink in color and/or thick mucus or pus draining from the eye. Can return after visiting the doctor to determine if it is contagious. If medication is given, you can return 24 hours after the start of medication.
- Respiratory Virus Illness
(Flu, Covid 19, RSV)- a doctor diagnosed case, Symptoms should be improved AND no fever for 24 hours without the aid of medication.

What to bring to school: Please label all items clearly with your child's name

- A large backpack with a change of clothes and underwear.
- A lunch box and water bottle. Please take home and wash the water bottle daily.
- The provided rest bag with a beach towel, a small blanket, pillow, and one small stuffed animal to be brought home and washed weekly. We ask that you do not send toys.

We will have outdoor recess if temperatures are at **least 35 and up to 95**. Please send weather appropriate items such as jackets/coats, gloves and hats. Please make sure to label all outerwear with your child's name.

Supplies: A list of school Fall and Summer supplies is available on our website. Please bring the supplies when you come to Meet and Greet, before school starts in August. Please do not need to label the supplies with your child's name. Summer supplies can be dropped off in the Art room on the first day of school.

Wish Lists and Donations: From time-to-time teachers will make a wish list for items that they might need for the classroom. You are welcome to donate items on the lists, as you are able.

The classrooms have treasure boxes for the children to earn small trinket toys for sticker job rewards. If at any time you would like to contribute small gently used trinkets/toys, we would love to have them. The children work hard to earn the stickers so they can get in the treasure box for their special surprise. We accept donations of gently used toys, art supplies and DVD's. The children love new toys to play with and anything not used is then donated to various stores, locally.

Breakfast, Lunch, Snack and Birthday/Party Treat Information

Monticello Preschool is a **nut free** preschool.

Breakfast: Monticello Preschool does not provide breakfast. If your child arrives early, you are welcome to bring a simple breakfast for them to eat upon arrival.

Lunch: Children will bring lunch from home, which they will eat in their classroom. Please label all items with your child's name. Milk will be provided by the school. If children forget their lunch we will provide cheese, crackers, yogurt, a fruit and a vegetable (canned or fresh). Please send the lunch with cold packs and/or an insulated lunchbox. Refrigerator space and a microwave will not be available. Many children bring Bento style lunch boxes. These allow children to be successful in opening their own lunch and have all their food easily accessible. Lunches should be peanut/nut free. Please do not bring any peanut butter/nut butters or nuts of any kind in lunches.

Snacks: Snacks will be provided by the school and are from two food groups. If you prefer to provide your child's snacks, please bring them in their original packaging to your child's teachers, who will label them and store them in the classroom. You will need to fill out a dietary restriction form for your child to have on file in the office first.

Snacks will be from two food groups and are a variety of packaged and fresh items; cheese sticks, yogurt tubes, apple slices, bananas, raisins, dried apples, juice, graham crackers, goldfish, Cheez-its, wheat thins, breakfast bars, cereal, pretzels, veggie straws and pirate booty,

Birthday/Party Treats: Treats must be **store bought** and clearly labeled with an **ingredient list**. They should be peanut/nut free and not be manufactured in a facility that processes peanut/nut products and should not be manufactured on equipment that also processes peanuts/nuts and should not say "may contain nuts". Contact your child's teacher so arrangements can be made before the day you wish to bring the treat. Please also remember any items that will be going home in a party favor bag should follow these same guidelines for the safety of some of our children.

Potty Training: All children must be potty trained to attend due staffing requirements. Our definition of potty trained is as follows:

1. Child can verbalize to the teacher the need to go to the bathroom.
2. Child is able to use the bathroom at designated class times.
3. Child is not having daily/weekly accidents.
4. Child wears underwear to school (no pull-ups are allowed at preschool).

If a child is not fully potty trained, we will follow our dismissal/ termination policy below to better meet the child's and preschool's needs. Please understand we do everything we can to help children succeed with potty training. Termination is not something taken lightly.

Potty Training Dismissal/Termination Policy:

- **First Step** - Written notice by text, email or letter of concern will be sent to the parents/guardian. If the first step is a conversation, a follow up email will be sent.
- **Second Step** - A meeting will be scheduled in person or by phone if necessary, with parents/guardian to discuss ways to resolve the issue. A follow up email will be sent summarizing the meeting and the agreed upon steps/goals.
- **Third Step** - If a mutual agreement is unable to resolve the behavior and we feel all resolutions have been tried, we will ultimately do what is best for all children and staff involved and termination will occur.

Discipline: We do our best to redirect and help children to make good choices in a positive way. Included you will find our Discipline Policy and our Behavior Guidance Guidelines from the Kansas Department of Health and Environment. If you have any questions or have any special issues that need addressed, please contact the Director or your child's teacher. We want to help your child succeed.

If a situation arises, we will follow our dismissal/termination policy below to better meet the child's needs.

General Discipline Policy

- First Step: Redirect the activity.
- Second Step: Suggest a positive alternative.
- Third Step: Time away from the activity - one minute per year of age.
- Fourth Step: The child will visit the office for some time to reflect and discuss ways to improve the situation.

*If the situation warrants an email or call home, we will notify the parents of the issue.

Dismissal/Termination Policy: We reserve the right to dismiss any child when we feel it is in the best interest of the safety and well-being of the other children and staff without notice. Please be assured that we do all we can to prevent a child from being dismissed. Our teachers will work with parents to do all they can to find solutions to solve the problem. We will follow our discipline policy for resolution. However, the final decision will be what is best for all children and staff involved. ALL children are the #1 priority.

If there are any issues that are unable to be remedied in the classroom, we will follow these steps:

- First Step - Written notice by text, email or letter of concern will be sent to the parents/guardian. If the first step is a conversation, a follow up email will be sent.
- Second Step - A meeting will be scheduled in person or by phone if necessary, with parents/guardian to discuss ways to resolve the issue. A follow up email will be sent summarizing the meeting and the agreed upon steps/goals.
- Third Step - If a mutual agreement is unable to resolve the behavior and we feel all resolutions have been tried, we will ultimately do what is best for all children and staff involved and termination will occur.

BEHAVIOR AND GUIDANCE

Kansas child care regulation (K.A.R. 28-4-132) requires that providers develop a written discipline policy indicating methods of guidance appropriate to the age of the children enrolled. Parents must be informed of the policy. The suggested guidance on the back of this page may be used to develop written policies. If this guidance is adopted as a written discipline policy, providers are required to read, understand, and practice.

1. The goal of discipline is to help children learn self-control. Providers help teach children about appropriate behavior and how to get along with others.
2. Be consistent. Children are confused when providers respond in different ways to similar behavior.
3. Appropriate guidance needs to follow a child's misbehavior immediately so that the child understands why he or she is being corrected. Never threaten to do something that the provider would not or could not do.
4. Be a good role model. Act with kindness and patience toward each child. Respect and talk to children about their feelings.
5. Talk with children about their behavior and what is expected. Tell children what they can do rather than what they can't. "Please walk" is more effective than "don't run".
6. Follow a consistent daily schedule so that children know what to expect and are prepared for changes in activity throughout the day.
7. Give children choices whenever possible.
8. Praise good behavior often. Children (and adults) need to hear that the good things they do are appreciated!
9. Talk to parents about both the good things their child(ren) has done while in child care and those things that require additional attention. Include parents in making decisions about effective ways to provide guidance for their child(ren). Consistency between the child's home and the child care home is most effective. Never spank or use another method of punishment that is prohibited by law or regulation, even if parents give permission.

See back side for examples of age appropriate child care practices.

BEHAVIOR AND GUIDANCE

Suggested Guidance for Infants and Toddlers

1. Remove tempting items that are off limits to infants/toddlers. By nature they are curious about people and things. They are just learning.
2. Distract (this is also called redirection) the infant/toddler away from the activity that is not desired by attracting the child with a better choice.
3. Ignore the behavior, if the child is not in danger or causing someone else to be in danger.
4. Use the word "NO" sparingly. "NO" should be used only when the infant/toddler is approaching danger. Over using the word "NO" may result in the child learning to ignore you.
5. Provide duplicates of popular toys. Infants and toddlers do not understand the concept of "sharing".
6. Place a toy or item in "time-out"-not the child. Infants/toddlers have short attention spans and are naturally active. Time out for infants/toddlers is not appropriate.

Suggested Guidance for Preschool Age Children

Any of the above methods of guidance PLUS:

7. Allow preschool age children to make acceptable choices and let the natural consequence of the decision be the teacher (as long as the consequence is not dangerous). Be sure to offer choices you can live with!
8. Help children learn to solve problems. Offer suggestions when necessary and allow the child to decide.
9. Talk about the "rules" of the child care home. Remind the children. Children learn by repetition. Allow the preschool age children to help set the "rules".
10. Time-out should be used sparingly. Over use of "time out" or any other method of guidance causes the method to become "old hat" which causes it to lose its effectiveness. Time out provides the child the opportunity to think - cool off - calm down. Time out is not about your ability to control the child. Provide a "time out space" for the child that is nearby and which allows you to clearly supervise the child. Invite the child to rejoin the group when he/she is ready. Talk about the behavior, feelings and reassure the child when he/she rejoins the group. Never place a child in time out for long periods of time.

Suggested Guidance for School Age Children

Any of the above methods of guidance PLUS:

1. Involve school age children in planning activities.
2. Involve school age children in setting their own guidelines.
3. Allow school age children to suggest consequences when rules are "broken".

**Guidelines for Exclusion of Children (or Staff Working With Children) Who Are Ill
As Recommended in *Caring for Our Children: National Health and Safety
Standards: Guidelines for Out-of-Home Child Care Programs (Third Edition)***

When formulating exclusion policies, it is reasonable to focus on the needs and behavior of the ill child and the ability of staff in the out-of-home child care setting to meet those needs without compromising the care of other children in the group.

Children with fever are managed differently in child care. The presence of fever alone has little relevance to the spread of disease and may not preclude a child's participation in child care. A small proportion of childhood illness with fever is caused by life-threatening diseases, such as meningitis. It is unreasonable and inappropriate for child care staff to attempt to determine which illnesses with fevers may be serious. The child's parents or legal guardians, with the help of their child's health care provider, are responsible for these decisions. Parents should be notified anytime a child has a fever.

A facility should not deny admission to or send home a child because of illness unless one or more of the following conditions exists. The parent, legal guardian, or other person authorized by the parent should be notified immediately when a child has a sign or symptom requiring exclusion from the facility, as described below:

- 1) The illness prevents the child from participating comfortably in facility activities;**
- 2) The illness results in a greater care need than the child care staff can provide without compromising the health and safety of the other children; or**
- 3) The child has any of the following conditions and poses a risk of spread of harmful diseases to others:**
 - A. An acute change in behavior including lethargy/lack of responsiveness, irritability, persistent crying, difficulty breathing, uncontrolled coughing, noticeable (spreading) rash, or other signs or symptoms of illness until medical evaluation indicates inclusion in the facility.
 - B. Fever (temperature above 101 degrees Fahrenheit orally, above 102 degrees Fahrenheit rectally, or 100 degrees or higher taken auxiliary (armpit) and behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea). Oral temperature should not be taken on children younger than 4 years (or younger than 3 years if a digital thermometer is used). Rectal temperature should be taken only by persons with specific health training.
 - C. Uncontrolled diarrhea, that is, increased number of stools, increased stool water, and/or decreased form that is not contained by the diaper until diarrhea stops; blood or mucus in the stools not explained by dietary change, medication, or hard stools.
 - D. Vomiting illness (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health care provider determines the illness to be non-communicable, and the child is not in danger of dehydration.
 - E. Abdominal pain that continues for more than two hours or intermittent pain associated with fever or other signs or symptoms of illness.
 - F. Mouth sores with drooling, unless a health care provider or health official determines the condition is noninfectious.
 - G. Rash with fever or behavior change, until a health care provider determines that these symptoms do not indicate a communicable disease.
 - H. Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge), until 24 hours after treatment has been initiated.
 - I. Untreated scabies, head lice, or other infestation.
 - J. Untreated Tuberculosis, until a health care provider or health official states that the child can attend child care.
 - K. Known contagious diseases while still in the communicable stage (chicken pox, streptococcal pharyngitis, rubella, pertussis, mumps, measles, hepatitis A).

2025 Disease and Symptom Exclusion Recommendations/Regulations

		Disease and/or Symptom	Exclusion/Readmit in accordance with <u>K.A.R.28-1-2,28-1-6</u> and <u>Kansas Statute 65-</u>	
Symptom		Diarrhea/Vomiting	Diarrhea-free for 24 hours without the aid of medication. No vomiting for 24 hours.	
		Eyes inflamed with purulent discharge	No exclusion. If bacterial conjunctivitis, allowed to remain in school once any prescribe therapy is implemented.	
		Fever with or without other symptoms	Fever-free for 24 hours without the aid of medication.	
		Rash	Consider exclusion pending a physician evaluation for explanation of rash.	
		Fifth Disease	Exclude until fever-free for 24 hours without aid of medication, no longer considered contagious once rash has appeared.	
Disease		Hand, Foot, and Mouth Disease (HFMD)	Exclude until fever-free for 24 hours without the aid of medication and no open lesions.	
		Hepatitis A*	<i>Childcare:</i> Exclude for 14 days after onset of illness or 7 days following onset of jaundi	
		Impetigo	Exclude until treated for 24 hours with appropriate antibiotic or physician note.	
		Measles*	Exclude for 4 days after onset of rash; susceptible contacts that are not age-appropriately vaccinated within 72 hours of first exposure shall be excluded for 21 days following the last exposure to an infectious case.	
		<i>Methicillin-resistant Staphylococcus aureus (MRSA)</i>	If lesions can be covered, then no exclusion; if lesions cannot be covered, exclude until lesions have crusted over.	
		Mononucleosis	Fever-free for 24 hours without the aid of medication.	
		Mumps*	Exclude for 5 days from onset of parotitis; susceptible contacts shall be excluded from day 12 after first exposure to day 25 after last exposure to an infectious case.	
		Norovirus	Laboratory confirmed cases shall be excluded until 48 hours symptom free.	
		Pertussis (Whooping Cough)	Exclude until completion of appropriate antibiotic therapy. Susceptible contacts not excluded, only monitored for 21 days after last exposure.	
		Respiratory Virus Illness (COVID-19, Flu, RSV)	Exclude until both are true: symptoms are getting better AND no fever for 24 hours without aid of medication. Upon return to normal activities, take <u>additional precautions</u> over the next 5 days.	
		Ringworm (Tinea)	No exclusion if receiving appropriate treatment; no activities involving skin-to-skin contact until lesions are completely healed.	
		Rubella (German measles) *	Exclude for 7 days following onset of rash; susceptible contacts shall be excluded for 21 days following last exposure to a case.	
		Scabies	Exclude until treated for 24 hours with appropriate anti-parasitic.	
		Shiga-toxin producing <i>Escherichia coli</i> (STEC)*	<i>Childcare:</i> Exclude until two negative stool cultures are obtained (must be 24 hours apart and 48 hours after discontinuation of antibiotics). <i>School:</i> Diarrhea-free for 24 hours without the aid of medication.	
		Shigellosis*	<i>Childcare:</i> Exclude until one negative stool culture is obtained (collected 48 hours after discontinuation of antibiotics). <i>School:</i> Diarrhea-free for 24 hours without the aid of medication.	
		Shingles	If lesions can be covered, then no exclusion; if lesions cannot be covered, exclude until lesions have crusted over.	
		Streptococcal disease (strep throat and scarlet fever)	Exclude for 24 hours following initiation of appropriate antimicrobial therapy; if not receiving therapy exclude for 10 days following onset of symptoms.	
		Varicella (Chickenpox)*	Exclude until all lesions have formed scabs or crusted over; each susceptible contact not age-appropriately vaccinated within 72 hours of first exposure shall be excluded for 21 days from the last exposure to an infectious case.	
	<p>*Please call JCDHE Disease Containment Hotline at 913-826-1303 for further guidance. JCDHE Child Care Licensing Hotline at 913-477-8361. Primarily used for school and childcare. Please call hotline for further guidance for public.</p>			

Well-Child Health Information

Child Health Assessments

Your child should be seen during the preschool years by a health professional according to the following schedule:

At Birth	6 Months	18 Months	Then 1
1 Month	9 Months	24 Months	per year
2 Months	12 Months		until the
4 Months	15 Months		age of 20

Every child should be seen at least 13 times from birth to school entry. A careful examination of the eyes and ears should be included in the assessment.

Dental Health

A child's initial visit to a dentist should take place within 6 months after the first tooth can be seen, but no later than 1 year of age. Following the initial visit, regular check-ups should be scheduled every 6 months (or twice a year).

In communities where the drinking water is not fluoridated, a dentist should be consulted about an age-appropriate fluoride treatment plan.

Social-Emotional Health

Caring for your child's social and emotional health is also an essential part of raising a healthy child. To learn more about age-appropriate development tasks as well as ideas for encouraging healthy social and emotional growth, visit:
www.brightfutures.org/mentalhealth/pdf/tools.html#families.

Safety

Providing your child with a safe environment to grow is an important part of raising a healthy child. For information about safety precautions and more, visit: <https://www.safekidskansas.org/>

Well-Child Visits Should Include

- A. Discussion of your child's physical and behavior problems with the physician.
- B. A Health Assessment of your child by the physician or nurse approved to perform Health Assessments.
(Including important screenings such as vision, hearing and blood tests)
- C. Immunizations
 - Make sure your child has the necessary immunizations for his/her age. This is important for your child's health.
 - Many childhood diseases can be prevented with regular health care visits and up-to-date immunizations.
 - Discuss with your child's physician the appropriate course of immunizations.
 - Your child's physician will also provide you with Vaccine Information Statements (VISs) prepared by the Centers for Disease Control (CDC) regarding certain vaccinations your child will be given.
 - Repeat immunizations as recommended by the Kansas Department of Health and Environment. Your child's physician may also discuss new vaccines with you as they become available.
- D. Discussion of your child's health history since the last visit.
- E. Written instructions concerning your child's care, diet, and recommendations for the solution of any special health problems.
- F. Referrals when necessary to other persons for special services.
- G. Appointment for next Well-Child Visit.