

Welcome to



Infant Classroom



Dear Parents,

Welcome and thank you for choosing YPW Spanish Immersion School for your infant. Feel free to ask us for help if you have questions about the program or your responsibilities. We encourage parents to participate and visit as often as possible. We know that parents are the most essential people in a child's life; growing a relationship between home and school is an important goal in the Infant Class. We encourage active "family" participation in a variety of ways. We will schedule organized family events, we may ask you to provide family photos and family information and we welcome your visitation in the classroom.

Since strong communication is the key to a positive, successful relationship, we encourage you to ask questions, make observations and share your ideas. Infants learn by experiencing the environment through their senses, by physically moving around and through social interactions. Adults enhance and augment this process when they talk and sing to infants about what is happening and provide appropriate objects to see and manipulate.

Through social interactions with caring, affectionate adults (parents and caregivers), infants begin to develop their first positive relationships. This development of trust and emotional security comes about when babies learn to expect positive experiences. All infants are unique individuals whose needs and moods vary from moment to moment. Adults must be sensitive and respond appropriately to a child's changing signals. What is being taught? Human kindness, respect for other's needs and trust.

Sensitive, knowledgeable caregivers will ensure that a good balance is maintained between active and quiet levels in intensity of play. Certain basic care - giving experiences are as much a part of the curriculum for infants as counting is for older children. In the first few years of life, children relish and learn from social contact and from varied sensations as they experience changes in temperature, texture, position, sight, sound and smell. This stimulates learning in a perfectly natural and informal manner. Helping children get along with each other cooperatively, yet hold their own, is a basic curriculum goal.

Caregivers take time to understand situations and to teach "turn taking," playing together in pairs or playing in a large group. Our program is successful in providing a very fine curriculum for life's first years because it will:

- Protect children in a safe environment
- Guide positive social behavior with clear expectations and a cheerful attitude
- Help children understand their feelings and those of others
- Help children without using threats, hostile remarks or physical punishment.

Certainly, children learn to feel good about themselves when treated in a positive, caring manner. A daily activity report is kept for each child so you are informed about your child's daily activities.

Please provide any special instructions for the caregivers in the form of a written note. It is helpful for the staff to have a current feeding/nap schedule. A form for this is attached. Kindly sign and date this form. Be as broad or as specific as you wish.

Please familiarize yourself with our Illness Exclusion Policy and Parent Handbook (available on our web site: www.YPWKids.com). Additional information about feeding your baby and helpful hints about infant care are also available from the staff.

Your feedback is always welcome. We look forward to having you with us!

The Infant Center Staff

Infant Parent Responsibilities

Clothing and Supplies

Your child will be assigned a cubby where you can store all belongings.

Please bring the following labeled items to be stored in your child's cubby:

- ◆ Three complete changes of clothes (including socks) in his/her cubby.
- ◆ Jacket Hat Mittens for the cold weather (As needed)
- ◆ Sunscreen (for children over six months) and Sun hat for hot weather. (As needed)

For feeding needs:

- Extra Empty Bottle (unbreakable)
- Extra Formula (in original sealed container)
- Bottles with pre - measured water (we will mix formula as needed)
- Cereal
- Jars of Food

For diapering needs:

- Large bag of diapers to be replenished upon request
- Diaper rash cream / ointment
- Baby wipes

Optional items:

- Extra Pacifier
- Personal Sleep items

The School provides crib/cot sheets, which are laundered at least once weekly, or as needed.

Food and Bottles

At the infant center, it will be your responsibility to provide your baby's daily bottles and food.

Each child will have a tray in the refrigerator for storing perishable food and a cubby for storage of non-perishables. Bottles of water or breast milk must be pre-made, labeled with the baby's name and date made. Breast milk will be stored in the refrigerator. Breast milk can be stored in the freezer and must be dated and labeled with child's name and date expressed. Premeasured water bottles will be stored at room temperature.

When appropriate the children will be offered water at lunch.

Label every item with your child's name in permanent ink!

Important Infant Center Guidelines

- Please enter the room quietly and slowly. Some of the children may be sleeping or playing behind the door.
- When entering the Infant Center, either slip on shoe covers or take off shoes. This helps to keep floors clean for your child.
- Please close the classroom door or gate and/or the bathroom door behind you. This is a very important safety issue. Infants are quick and eager to explore different areas.
- Please wash your hands when you enter the Infant Center.
- Siblings must also wash their hands when entering the room. Siblings must stay by the entrance door and we ask that they not touch any of the infant toys.
- Older siblings must always use walking feet. Running and jumping are natural for 2 to 5-year-old children, but very dangerous in an environment where several infants do not move, move very slowly or trip and fall easily.
- Personal toys are best left at home. If they must come to school, they need to be stored in your child's cubby.
- Please do not sit on the shelves or tables. We as adults are important role models for children. If they see adults sitting on the furniture the children get the idea that this is an appropriate behavior.
- In the Infant Center the children must always be seated when they are eating or drinking. This is a safety precaution we take to prevent choking.

If you have any questions or comments, the staff of the Infant Center will gladly discuss them with you. We have your family's best interest at heart and hope to serve you in all areas.

Thank you for your cooperation

The Infant Center Staff

INFANT CENTER HEALTH PRECAUTIONS

This summary will inform you about the precautionary measures we take, and those that you can take, to minimize illness and ensure a healthy environment for all the children in the classroom.

Hand washing plays a crucial role in our environment. We wash our hands literally dozens of times each day:

- When entering and leaving the room
- After each diaper change and clothing change
- After wiping a runny nose
- Before and after checking a child for illness
- After cleaning a child who has spit up
- Before feeding or preparing food
- Before and after giving medication

-We use several disposable items to help eliminate transmission of germs, including: disposable vinyl gloves, disposable paper squares, which are placed on the changing pad for each diaper change, and the plastic changing mat surface is disinfected after each use.

-The children's hands are washed before and after eating, diaper changes and other times as needed.

- Toys are rotated regularly and are cleaned with disinfectant daily.

- The refrigerator is cleaned out and disinfected at the end of each week.

- The sinks and faucet are treated four or five times daily.

- Carpeted floor areas are vacuumed nightly, spot cleaned as needed and professionally cleaned at least twice a year.

- Tile floors are mopped completely each night and are spot cleaned as needed throughout the day. The bed linens are laundered once a week or more often if soiled.

- Soiled diapers are placed in a plastic bag before disposing of them in a container with a tightly closing lid.

- Children's soiled clothing is likewise placed into plastic bags to be sent home.

Here are ways you can help us achieve our goal for a clean and healthy environment for your child:

- Please wash your hands and your child's hands when entering the classroom.
- Cleaning diaper bags at least once a week reduces the spread of germs.
- Take home and wash personal bedding items every week.
- Take home, wash and disinfect all bottles and food containers daily.
- Please be considerate of other children. If you believe your child may have a communicable illness please keep him/her at home.
- Don't leave your diaper bag at the school.

Your cooperation and assistance in this matter is greatly appreciated. If you have any questions or suggestions, please feel free to communicate them to us.

THANK YOU FOR FOLLOWING OUR "ILLNESS EXCLUSION POLICY."

Infant Classroom Philosophy

Our classroom philosophy entails the developmentally appropriate practices which are consistent with the basic principles of Magda Gerber's philosophy. We believe that adhering to these principles promotes a respectful approach to raising children.

- Basic trust in the child to be an initiator, an explorer, and a self-learner
- An environment for the child that is physically safe, cognitively challenging, and emotionally nurturing
- Time for uninterrupted play
- Freedom to explore and interact with other infants and toddlers.
- Involvement of the child in all care giving activities to allow the child to become an active participant rather than a passive recipient
- Sensitive observation of the child in order to understand his/her needs
- Consistency and clearly defined limits and expectations to develop discipline

Ten Principles of Care Giving

There are no easy steps to anything in this life that is really worthwhile. The following are ten principles which are intended to clarify the foundation of the respectful approach to infant caregiving "Is respect different from kindness and warmth? The answer is yes. What does it mean to 'respect' infants and toddlers?... The beginning of the answer lies in these ten principles..." (Gonzalez-Mena and Byer, 1989, p.3)

1. **Do** involve the infants in care giving routines (such as diapering).
Instead of distracting or working around them so you can get the job done faster.
2. **Do** invest in quality time when you are totally available to the infants.
Don't settle for constant time when you are only half there.
3. **Do** respect the infants as individuals.
Instead of treating them as cute, empty-headed dolls to be manipulated.
4. **Do** learn the infant's unique system of communication (cries, sounds, words, movements, gestures, facial expressions, body positions) and teach them yours. **Don't** underestimate their ability to communicate.
5. **Do** be honest about your feelings.
Instead of pretending to feel something you don't or not need feeling something you do.
6. **Do** invest in the time and energy to build human relationships and the infant's personalities.
Don't focus just on cognitive development or look at it as separate from overall development.
7. **Do** build security by modeling trust.
Instead of modeling distrust by being undependable or often inconsistent.
8. **Do** worry about quality of development in each stage.
Don't worry about reaching developmental milestones in a hurry.
9. **Do** model the behavior you want the infants to learn.
Instead of preaching.
10. **Do** let infants learn to solve their own problems.
Don't take away valuable learning opportunities from them.

From the RIE Manual: For Parents and professionals. Magda Gerber, Editor

Assigning Caregivers to Babies (Primary Caregivers)

Having caregivers assign themselves primary responsibility for the babies they are to care for serves many purposes.

In the beginning of a program, it allows each caregiver to narrow her scope somewhat, to concentrate on getting to know a few babies rather than an entire group. As the principal caregiver for a particular baby, she is one who talks with the parents at the beginning and end of the day, feeds the baby and, as much as possible, is the main person who interacts with the baby. This arrangement not only facilitates this specific caregiver becoming an "expert" on that baby but it helps the baby to adapt to the new situation. The child learns to expect certain kinds of responses and gets use to a new style of care giving. In short, the baby learns to make sense of his or her world more easily when it is predictable and consistent.

Getting to know and trust all the caregivers is important for the baby too, since the principal caregivers will not be accessible all the time, and in reality, all caregivers will eventually care for all the babies. If a baby needs to be comforted, for example, whoever is free should comfort him or her. When there is a choice, however, and especially when a baby is new to a program, he or she should be cared for by his or her principal caregiver.

Long after the babies feel comfortable with all the caregivers, and each caregiver knows all the babies very well, the caregiver's feelings of being the authority on a baby, the person in the program who knows the child best and to whom he or she "belongs," seems to last. Often some babies do continue to show a preference for their principal caregiver.

Caregivers themselves should make the decisions about which babies they are assigned to. They will base that decision on compatibility between themselves and the baby as well as the baby's parents and the degree to which the baby is difficult or easy to care for. If there are several babies in a group who demand a lot of care giving time, they should be assigned to different caregivers.

From A Good Beginning for Babies - Guidelines for Group Care
By Anne Willis and Henry Ricciuti

BABY TALK

By gesturing and using sign language, some infants and young children are learning how to communicate before they learn to speak, researchers say *Healthy Living: Your Tuesday guide to medicine and health care.* **Anne Fawcett – Atlanta Journal Constitution**

Joseph Pabian is only 4 months old, but he already knows the word "milk" in sign language.

When he's hungry, he opens his mouth and squeezes his fist to resemble the motion for milking a cow, mimicking the sign his mother uses every time he nurses. Although he can hear Lily Pabian speak, signing is another way for them to communicate. "When I lift my hands, he's focused on them," she said.

Pabian, of Tucker, is among an increasing number of parents across Atlanta and the nation who are communicating with pre-verbal, hearing infants using sign language. And what they and researchers have learned

---That babies have the intellectual ability to understand and use language months before they speak --- has challenged some common views of early child development, says Joseph Garcia, a longtime researcher on the subject. "Maybe the muscles in the mouth haven't developed until 20 months, but babies have the cognitive ability to understand communication through shared gestures much earlier," said Garcia, who started his research in the 1970s, when he noticed that deaf infants were using sign language to communicate on a more sophisticated level than hearing infants of the same age.

Hearing babies speak their first word, on the average, when they're 13 months old and speak two-or three-word sentences by the time they're 20 months old. In contrast, some babies can start signing words such as "more" and "milk" at 8 months and can build vocabularies of dozens of signs within months.

All babies are different, so others might not begin signing until their first birthday. Young babies such as Joseph might have learned to associate the milk sign with nursing, but he may not realize he's asking for milk, said Laura Namy, a professor of psychology at Emory University. Namy's research showing that young children learn signs as readily as spoken words suggests that humans are not necessarily hard-wired to communicate through speech.

"It's as if they're starting out not really knowing the right modality to communicate," she said. "As they figure out language over time, they learn primarily words, and gesture to supplement them." Although early communication can help children develop confidence and problem-solving skills, Garcia said, some parents might choose not to use signs because they don't want their hearing children to be perceived as deaf. Other parents could fear delaying their children's speaking skills. Pabian, who started taking infant sign language classes as an activity to share with Joseph, said other mothers she knows weren't especially interested in the concept.

"People are a little hesitant," she said. "The first thing my mom said was, 'He's not going to learn to talk.'" "Not true, says Sarah Preston, co-founder of Alpharettabased Little Signers, which teaches Pabian's class.

Research has shown that babies who learn to communicate with sign language are quicker to speak than their peers, Preston said.

Signing creates a more verbal environment, because babies initiate conversations about subjects that interest them, and their parents more consciously repeat words, she said. In addition, earlier exposure to successful communication drives babies to want to speak.

"Once (babies) figure out that 'I can do this and they understand me,' they'll figure out ways to communicate," Preston said. "This opens the door to communication."

And there is some evidence that signing can have long-term positive effects on children's intelligence. One study found that 19 8-year-olds who learned signing as babies had an average IQ score of 114, while a sample of 24 children who never learned signs averaged 102. Researchers Linda Acredolo of the University of California at Davis and Susan Goodwyn of California State University took into account family income, education and other factors that influence IQ scores. Garcia says the increased connection between signing parents and children creates these long-term IQ effects. "Parents tend to not fully engage in their children until there's two-way communication," he said.

But Acredolo insists that parents shouldn't look at signing as a vehicle to increase their children's intelligence.

"We've been painted as a 'better baby' institute," she said. "That's not what our research is for. The most important reason to do baby signing is to enrich the parent child relationship."

"It's wonderful to find another way to communicate with your child," said Dr. Michael Levine, a pediatrician with Northside Pediatrics in Atlanta. "Any way that parents can do that is great." A closer relationship is what prompted Belinda Carroll of Lawrenceville to sign with daughter Savannah, 15 months. "I bonded with her much better," Carroll said. "I don't get frustrated, because she's not frustrated. I get comments all the time about, 'Gosh, does she ever cry?'" "And more parents seem to be catching on.

Acredolo is co-author of "Baby Signs: How to Talk With Your Baby Before Your Baby Can Talk," which has sold more than 200,000 copies, and three message boards on the subject have popped up on Yahoo.com. "In the last year and a half, I've seen more inquiry from parents about the process," said Sherri Van Brunt, lead teacher with infant programs at Quality Times Child Development Center in Alpharetta. But such programs are not for everyone. "It's not for the busy parent who just has time to make sure the baby is fed and put to bed," Preston said.

Little Signers teaches Garcia's American Sign Language system, but researcher Acredolo encourages parents and children to make up their own signs. Either method is fine, Namy said. Made up signs are simpler, but ASL provides an opportunity to communicate with the deaf community later.

"What really matters is the interaction with the parents," Namy said. "If they're excited and using it in a frequent and consistent way, the kids are going to pick up on it."

Birthdays and Holidays

In the Infant Center we believe that birthday celebrations for one year olds are a celebration more for the parents and extended family. The infants are not yet aware of their birthdays or the reason for the party. While we respect the individual needs of families and would never tell you that you cannot celebrate your child's birthday, we do strongly discourage elaborate celebrations for birthdays in the school.

However, we do like to acknowledge each child's birthday by hanging up a banner in the classroom. If you wish to acknowledge the day in some way here at the center please make arrangements with your child's teachers in advance. In the past we have had families bring in simple vanilla cupcakes to share with the other children during lunch (provided the others are eating finger foods).

We approach holidays in a similar low-key fashion. Therefore, you will not see Halloween, Christmas, Hanukkah or other festive decorations or themes used in the Infant Center.

Communication

Communication between families and staff is essential for assuring your child's successful experience at the School. We need to let each other know when a change of behavior or attitude in your child is noticed, so we may problem - solve together to find the cause and brainstorm techniques to deal with this change.

- New baby
- Move to new home
- New caregiver
- New pet or pet death
- Car accidents
- Surgery or illness in the family
- Grandparents/Extended family visiting
- New house mates
- Vacations or business trips
- Changes in the home routine
- If child is on medication or has been given medication

Please contact us any of the following ways:

- 1) Personally, upon arrival/departure.
- 2) Written messages, especially if there is a change in diet, medical needs, additional authorized person picking up your child or a different telephone number in case of emergency.
- 3) Telephone, any time during the day.
- 4) If you feel we need to set up a private meeting to discuss your child's changing behaviors. (We offer Parent/Teacher conference twice a year, in October - November and again in May-June. If you feel you need another meeting, it can be arranged.).

It is our desire not to discuss behavioral issues in front of the children. We feel the children pick up on these types of discussions and it can affect their self-esteem. If we need to discuss sensitive issues about your child we can try to make arrangements to meet or have a private phone conversation.

We will contact you:

- 1) Personally, upon arrival and departure unless children's needs take precedence.
- 2) With notes on your child's Daily Sheet.
- 3) With reminders about items needed at school.
- 4) Phone calls from staff. We will call once every week or two the first month to let you know how your child is doing. After that you may receive a call if your child is ill, is having a difficult day or has a moderate injury during the day. If your child is having a challenging morning you can ask for a staff member to call and update you on their temperament. We will try to accommodate this request.

Information for Parents on Preparing and Serving

Bottles and Baby Food in the Infant Center

Formula Bottles

- All formula bottles need to be mixed at school from a factory sealed container. Parents are responsible for providing pre-measured water bottles to be mixed at school and a sealed container of formula.
- Formula must be discarded 60 minutes after being offered to a child.
- Formula should not be re-warmed.
- Formula can be stored in the refrigerator for a maximum of 24 hours. After 24 hours, the formula must be discarded. All unused bottles must be sent home daily.

Breast Milk

- Breast milk must always be heated in water that is no more than 120°, for no more than 5 minutes.
- Breast milk needs to be labeled with the child's full name and the expressed date.
- Breast milk can be stored in the refrigerator for 2 days.
- Frozen breast milk can be stored in the freezer at or below 0° for no longer than 3 months.
- Previously frozen breast milk can be stored for only 24 hours after defrosting. Never put previously frozen breast milk back in the freezer.
- Leftover breast milk is good for up to 24 hours after the first use. Leftover breast milk must be labeled with the time and date that it was first offered; the nipple must be replaced with a clean cap/nipple and the bottle stored in the refrigerator.
- Breast milk needs to be gently mixed and not shaken.
- Always check the temperature of the formula/breast milk before serving.
- Children under 7 months must be held while taking a bottle.
- Bottles must not be propped. If the child cannot hold the bottle, the caregiver needs to hold the bottle for the child.
- Bottle feedings cannot contain solid foods unless the recommended by the child's health care provider for medical reasons.
- Bottles must always be capped if not in use.
- Bottles must be labeled with the child's full name and the date it was mixed or expressed.

Baby Food

- Unless a child will eat a whole jar of baby food, the food must be put in a bowl.
- Baby food that has been contaminated with a child's saliva must be thrown out.
- Baby food can be stored for 24 hours after being opened.
- No infant foods can be warmed in the microwave.
- Homemade infant food needs to be brought to school in individual servings that can be warmed in water at no more than 120°
- Teachers do not offer cow's milk to children less than 12 months of age and only serve whole milk to children who are between the ages of 12 months to 24 months

Trying New Foods

If your child rejects a new food, don't force the issue but to reintroduce it at another time. Do you remember a time when you were dining out and a foreign or exotic dish was placed in front of you? Did you ever taste it gingerly or push it away? Each new food is exotic to a child. Some people are more open to novelty than others. Your child needs time to accept the new food into their eating repertoire.

Reintroduce the new food so many times that by the thirtieth time, it no longer feels new to them. Three or four times is not enough. A few months later you may be surprised to see that the new dish is your child's favorite. Never push, offer new foods when a child is hungry or thirsty. Then they may be more willing to try something new. Introduce each new food by itself for two weeks. If several new things are introduced at once, a child doesn't develop the habit of knowing, for instance, that if orange, it is carrots and if green, it's spinach. Predictability is important for young children. You can offer juice, milk or water in a cup.

Very mild chamomile tea, cooled, is soothing. It's helpful to pour the liquid into the cup using a small plastic pitcher, this way your child can see the process and learn how to do this later by herself. Pour only a small amount of beverage into the cup as spills are inevitable. Help your child as she learns how to hold the cup and drink from it drinking from a cup grasping it with the lips, consuming the liquid, and swallowing – are new skills that require practice. In time she will learn to hold the cup by herself. She may become playful and turn the cup over to watch the liquid spill, so leave only small portions of beverage in the cup.

When to End the Meal

When your child shows disinterest in eating by stopping, pushing the food away, or getting up from the table, it's time to end the meal. When a child starts to throw food or turn over the cup, she is showing more of an interest in playing. Playing with food should not be allowed. You can say in a neutral voice, "you turned over you cup. It looks like you're not thirsty anymore. I don't want you to play with the cup. I'm going to take it away." If she enjoys the activity, get her a basin of water and a cup to play with outside, or a little wading pool to splash in. Most children love water. Let her enjoy leisurely baths with plastic bottles and pails to pour and dump. She may be less likely to want to turn over her cup. When your child is finished eating, remove the foods and drink from the table and tell her it's time to clean up. Encourage her to help wipe the table off with the sponge and help wipe her hands and face with the towel. When she is done, let her get up from the table.

Refusing to Eat

Don't worry if your child goes through periods when she loses her appetites or refuses to eat. Except in cases of illness or emotional disturbance, no child who has food available starves. All children go through periods when their appetites lessen, typically in the second year of life when they begin to walk, talk and are busy exploring their world. It is also about this time that their rate of growth slows down and they might require less food.

The minute your child refuses food, I would refrain from offering more, this is hard on parents. But have you ever been not hungry? Would you like it if people around you forced you to eat? When your child doesn't have an appetite, assume she's not hungry and put the food away. One should eat only when one is hungry and not for other reasons, especially not to please one's parent. At the Emi Pikler Institute in Hungary children love to eat. But they are never pushed to eat even an additional spoonful if they turn away or show disinterest. Ideally, food should be eaten when a person wants it. Respect your child's internal guide to her appetite and satiation.

Taken from Your-Self Confident Baby
By Magda Gerber and Allison Johnson

When you leave, Mother

*You don't need my permission.
It's good for you and good for me
but tell me! Don't disappear.
Better I scream my disapproval,
than live in vague suspicion
that I'll find you gone again.
For then I'd have to "guard" you,
afraid to leave your side to play.
Don't disappear tell me
that you're leaving,
and that you are coming back!
In telling me, you're also teaching me
to feel all right one day,
when I leave you... for short times,
and longer, longer... times.*

*By Ruth Reardon from the book
"Listen to the Littlest"*

Family Information Sheet

Child's Name _____ Nickname _____

Languages spoken in the home _____

Sibling's names and ages _____

Describe your child's personality _____

What time of day is your child most active? _____

How does s/he react to new situations / people? _____

Does your child have allergies? (Explain) _____

What is your child's favorite book? _____

What is your child's favorite song? _____

What is your child's favorite toy? _____

What is your child's favorite activity? _____

What else would you like us to know about your child?

Does your family have any traditions that you would like to share with the class?

What types of parent involvement would you like to participate in this year?
