



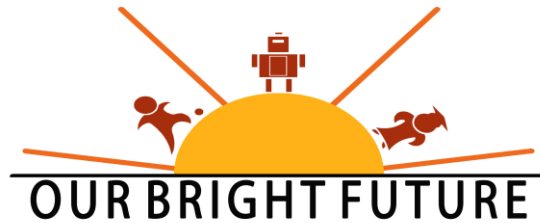
**Our Bright Future inc.
STEMing into Sports Program
Parent Handbook**

Our Bright Future STEMing into Sports Program is under Occasional Care of the Department of Early Education and Care Executive Office of Health and Human Services of The Commonwealth of Massachusetts

Welcome to Our Bright Future inc. STEMing into Sports Program. We are happy to have your child in our program. I hope his/her experience is enriching, positive, and productive. Should you have any questions or concerns regarding Our Bright Future policies or programs, know that we are always available and value your input.

Kwasi Acheampong: Executive Director
Peter Kariuki: Program Director
(774) 578-5111

Department of Early Education and Care Central Office
1441 Main Street
Suit 230
Springfield MA 01103
(413) 788-8401



Mission Statement: Our mission is to empower youth and develop bright leaders through robotics, sports training, and guidance in academics.

STATEMENT OF PURPOSE/ PHILOSOPHY: The purpose of Our Bright Future STEMing into Sports Program is to provide Robotics and sports for youth ages 9 years old to 17 years old in a safe, caring, and supportive environment. Our Bright Future is structured to develop and implement programs and activities that prepare youth for success. Members are encouraged to participate in all 5 core areas of programming: Character & Leadership Development, Education & Career Development, Health & Life Skills, The Arts, Sports & Fitness, and Recreation. Children within Our Bright Future STEMing into Sports Program receive the benefits of a structured child care program within a full-functioning safe environment. Members of Our Bright Future STEMing into Sports Program participates in programs that promote and enhance the development of youth by instilling:

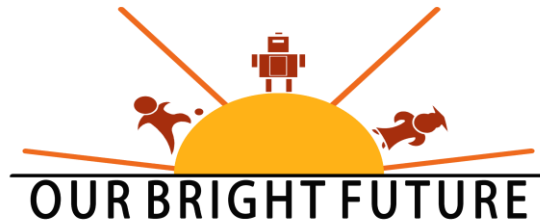
A Sense of Competence: The feeling that they can do something well.

A Sense of Usefulness: The opportunity to do something of value for other people.

A Sense of Belonging: Knowing they have a place where they fit in and are accepted.

A Sense of Power or Influence: A chance to be heard and to influence decisions. When this strategy is fully implemented, children's self-esteem is enhanced, and an environment is created which allows them to achieve their full potential.

NON-DISCRIMINATION POLICY Our Bright Future STEMing into Sports Program is open to all families, regardless of race, color, ethnicity, religious affiliation, cultural heritage, political beliefs, national origin, disability, marital



status, financial status, gender, sexual orientation, gender identity or expression, or citizenship status. Our Bright Future embraces the differences of our community and strives to foster understanding and appreciation of all.

OCCASIONAL CARE AGENCY Our Bright Future STEMing into Sports Program is under occasional care of the Department of Early Education and Care (EEC) and is mandated to uphold all of the rules and regulations set forth by that agency. The STEMing into Sports Program has students at a child/staff ratio of one educator for every 13 children. Parents may contact the Department of Early Education and Care (EEC) for information regarding Our Bright Future Occasional Care regulatory compliance history.

STEMING INTO SPORTS EDUCATORS We believe the success of our Program, and ultimately your child's experience lies in the quality of our educators. Our educators are carefully selected based on their experience, education, talents, and interpersonal skills. Our educators' priority is to ensure the safety, care, and welfare of your child as they take part in the Program. We aim to help your child achieve educational and personal goals. The STEMing into Sports Program is run by the Program Director. Educators are required to attend in-depth training in areas such as program goals, emergency procedures, creating a positive climate for growth, developmental characteristics of children, recognizing child abuse, and educational enhancement projects. All educators and volunteers undergo an extensive criminal and sex offender background check, as well as a national background check. Educators are certified through the Department of Early Education and Care (EEC) and certified in First Aid, AED & CPR.



HOURS OF OPERATION The STEMing into Sports Program is open Monday through Friday from 9am until 5:00pm. Children who are being dropped off by parents/guardians may not arrive earlier than 8:45am.

WEEKS OF THE PROGRAM

Week 1: July 12, 2021 to July 16th, 2021.

Week 2: July 19th, 2021 to July 23rd, 2021.

Week 3: July 26, 2021 to July 30th, 2021.

Week 4: August 2nd, 2021 to August 6, 2021

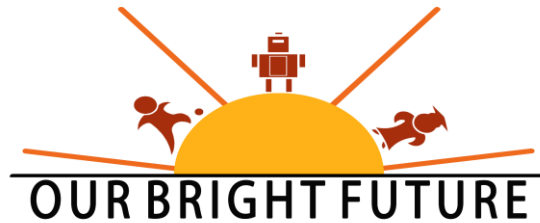
Week 5: August 9th, 2021 to August 13th, 2021

TUITION: First Child: \$450/week

Second Child: \$400/week

TUITION COLLECTION Membership fees are due prior to children attending the program. Payment is due with the registration packet.

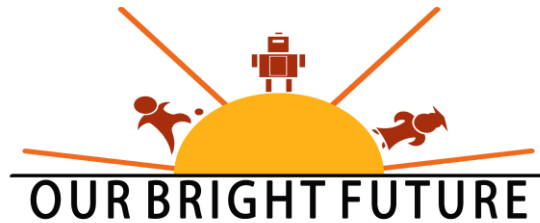
PICK-UP AUTHORIZATION A Pick-Up Authorization Form must be completed by the parent/guardian prior to the child's enrollment. Children will only be released to people named on this form. If a child is to be picked up by someone other than an authorized person, Our Bright Future must be notified in writing. Parents or designated persons picking up children are required to come inside the building to pick up their child. For your child's safety, we will not allow your child to leave the site with an unauthorized person. All people, including parents, picking up children should have picture identification available. We will not release a child to anyone we suspect to be under the influence of drugs or alcohol.



CHECK-OUT/LATE PICK-UP FEES During the program days, the STEMing into Sports Program closes at 5:00 pm. If your child has not been picked up by 5:30 pm, a telephone call will be made to the parent/guardian. If the parent/guardian cannot be reached by utilizing all known contact numbers, emergency contacts will be called. If contact is made, we will ask the emergency contact to come to pick up your child. If there is no response, steps #1 and #2 will be repeated at 6:00 pm and again at 6:15 pm. If contact has not been made with the parent/guardian or emergency person, Our Bright Future staff will call the Department of Children and Family (DCF) Emergency Unit or the police station. The report of the action will be placed in the child's file. If you are late to pick up your child, late fees will be applied to your account: The first time you are late, you will be given a written warning. Following this, the charges are as follows; 5:45 pm: \$10.00 6:00 pm: \$25.00 6:15 pm: \$50.00 If parents/guardians are consistently late (3 times or more), they may be subject to termination of child care services.

REGISTRATION & ENROLLMENT CRITERIA Enrollment is now open. You can enroll your child online at www.ourbrightfutureinc.org or print and email enrollment form to ourbrightfutureinc@gmail.com.

ABSOLUTELY NO CHILD WILL BE ALLOWED TO BEGIN THE STEMING INTO SPORTS PROGRAM WITHOUT CURRENT REGISTRATION FORMS ON FILE.



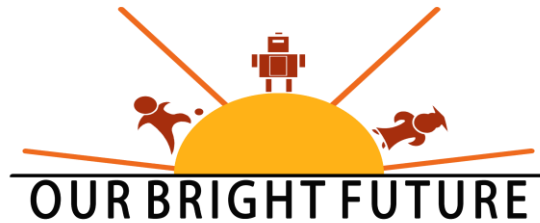
DAILY SCHEDULE

8:45am to 9:15am Arrival
9:15am to 10am Ice Breakers
10am to 11:30am Robotics
11:30am to 12:30pm Lunch
12:30pm to 1:30pm Sports
1:30pm to 2:30pm Music class
2:30pm to 4pm Robotics
4pm to 4:45pm Arts and Crafts
4:45pm to 5pm Wrap up
5pm Pickup

LUNCH Students are responsible for bringing their own lunch.

PLAN FOR MILDLY ILL CHILDREN In an attempt to safeguard all the children attending the STEMing into Sports Program from various types of contagious illnesses, the following health policies will be followed. Mildly ill children are monitored by educators to ensure their condition is not worsening. The child may choose to remain with the group for non-strenuous activities. If a child experiences any of the following symptoms, the parent/guardian will be contacted to pick the child up as soon as possible, to prevent further spread of illness and to provide comfort to the child:

- Temperature of 100° or more
- Vomiting with other symptoms (which include but are not limited to muscle soreness, sore throat, headache, and cough)
- Diarrhea or loose, inconsistent bowel movements
- Any type of contagious illness



- Any symptoms requiring individual care and/or causing discomfort
 - Any illness accompanied by open or oozing sores, bloody gums or feces.
- While waiting to be picked up, the child will stay with the front desk staff until a parent arrives. Please keep your child at home if he/she seems restless or unusually irritable; complaints of a stomach-, head-, or earache; has a fever or seems to be unusually pale or flushed. If a child becomes ill (i.e. fever, vomiting, diarrhea, rash, etc.) during their time at the Program, parents will be asked to pick up their child. Please notify Our Bright Future immediately if your child is exposed to a contagious disease. A note from a doctor may be needed before the child can be readmitted to the Program. All parents will be given notice if a child in the program has a contagious disease. Notices will include information on symptoms and general information on the contagion.

POLICY ON PRESCRIPTION MEDICATION All prescription medications administered must be provided by the child’s parent. A medication consent form signed by the parent or guardian and the written order of the physician is required (the physician's order may be the original pharmacy label on the prescription medication. The note must specify the dosage, the time, date and the days to be administered. A new note is needed each time a medication is prescribed. The medication must have a current pharmacist’s label and be in its original, dispensed container. The label must include the child’s name, dosage, date, and the name and phone number of the prescribing physician. The medication will be administered according to the directions on the original container unless otherwise authorized in writing by the child’s licensed health care practitioner. Any medication without clear instructions on the container must be administered in accordance with a written physician or pharmacist’s descriptive order. All educators administering medication are trained and annually evaluated on their ability to follow the proper procedures of administering medication as required by



the Department of Early Education and Care (EEC). No educator shall administer the first dose of any medication to a child except under extraordinary circumstances and with parental consent. The Medication Consent Form is kept in the child's file and all medications are logged according to EEC guidelines. Parents are notified as required by EEC before staff administers medication. All medications are stored out of reach of children and under proper conditions for sanitation, preservation, and safety while the children are in the Program, unless otherwise specified in a child's Individual Health Care Plan.

POLICY ON NON-PRESCRIPTION MEDICATION All non-prescription medications must be provided by the child's parent and be in the original manufacturer's packaging. Written parental consent and a physician's authorization are required and must be renewed weekly for oral, non-prescription medications. Unanticipated non-prescription medications used for mild symptoms such as acetaminophen, ibuprofen, antihistamines, and topical non-prescription meds that are applied to open wounds or broken skin require written parental consent or physician's authorization and are to be renewed annually. Only parental consent (written) is required for topical, non-prescription medications that are not applied to wounds or broken skin. Educators will inform the child's parent/guardian at the end of each day whenever topical medication is applied. All educators administering medication are trained and annually evaluated on their ability to follow the proper procedures for administering medication as required by the Department of Early Education and Care (EEC). No educator shall administer the first dose of any medication to a child except under extraordinary circumstances and with parental consent. The Medication Consent Form is kept in the child's file and all medications are logged in accordance with EEC guidelines. Parents are notified, as required by EEC, before administering medication. All medications are stored out of reach of

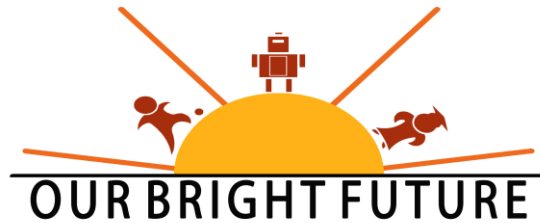


children and under proper conditions for sanitation, preservation, security, and safety while the child is in care unless otherwise specified in a child's Individual Health Care Plan.

FIRST AID Children experiencing minor injuries or illnesses such as bumps, bruises, bee stings, scrapes, and upset stomachs will be treated by educators who have First Aid certification. An injury report will be written by the educator performing first aid on the child. First aid box is located in the closet across from the arts and craft room. Children who need to be isolated from the other children will be in a separate room. Parents will be verbally informed that day upon pick-up and a written report will be given to parents within 48 hours, of all first aid given to their child. If symptoms persist, parents will be asked to pick up their child as soon as possible.

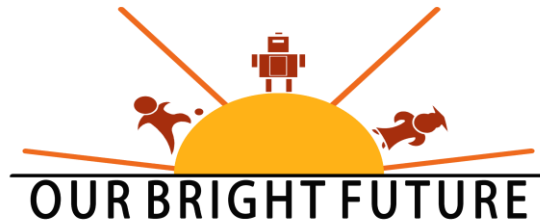
Minor cuts and scrapes: Minor cuts and scrapes that only require cleaning and a bandaid can be done by all educators. First aid box is located in the closet across from the arts and craft room. The action should be recorded in the injury log. A copy of the injury report will be provided to the child's parent/guardian. When the parent/guardian arrives to pick up their child, educators will inform them of any first aid administered to their child. They should also be handed a copy of the injury report which contains all necessary information and actions taken. A signed copy of the injury report will be kept in the injury log. If blood is present, no matter how little, educators will ALWAYS wear rubber gloves when administering first aid. This is for the protection of the educator as well as that of the child.

EMERGENCY PROCEDURES (Step-by-step procedures which will be followed by educators in case of emergency) It is the responsibility of all educators to minimize the risk of injury at all times, at every activity. If an incident does occur, educators will aid the injured individual and make sure



that the rest of the children remain safe, calm, and comforted. In case of a major emergency such as broken bones, puncture wounds, etc., the child will be taken by ambulance to the nearest emergency medical facility. Forms on file will include child and parent information, as well as emergency contact numbers if parents cannot be reached. In case of injury at the Program, educators will STAY CALM and keep everyone else as calm as possible. Staff will evaluate the child's condition before moving him/her. If the injury is minor (e.g. a cut, scrape, or bruise), the educator will accompany the child to the office or first aid box and administer first aid. If it is a disabling injury, or there is a risk of a broken bone, the staff member will remain with the child while another educator or older child alerts the Program director. If the educator who is comforting the injured child is certified in First Aid and/or CPR, then he/she should proceed with the relevant steps until a director and or an ambulance arrives at the scene. The Program director will call 911 and notify the parent/guardian. If the parent or guardian cannot be reached at that time, they will be contacted once the child is in the hospital. The After-School Program director or Program director will accompany the child to the hospital with the appropriate medical forms and emergency contact numbers. Educators who are not comforting the victim will focus on the rest of the children in the group. They will move the kids away from the injured child and engage them in another activity as soon as possible. If they have questions about the child's condition, they will be reassured that he or she is getting the best attention possible. Educators will take steps described below if they are involved in an emergency, whether they are trained in CPR and First Aid or not.

ABDOMINAL THRUSTS (HEIMLICH MANEUVER) If a child or another staff member is choking and unable to speak, cough, or breathe, educators will perform abdominal thrusts: Place thumb-side fist against the middle of the child's abdomen, just above the navel, and grasp the fist with the other



hand. Give quick upward thrusts. Repeat until the object is coughing up or the person becomes unconscious (those trained in CPR should then begin administering it.)

Note: Encourage a choking person who is coughing forcefully to continue coughing.

CONTROLLING BLEEDING If a child or another educator is bleeding and cannot be taken to the office, educators will attempt to control the bleeding and send someone to get a director. (Note: non-latex gloves will be used) Educators will cover the wound with a dressing and press firmly. The wound will be elevated above the level of the heart, if possible. The dressing will be covered with a roller bandage. If the bleeding is from the leg, staff will press hard where the leg bends at the hip with the heel of the hand, to minimize the flow of blood. If the bleeding is from the arm or hand, educators will squeeze the arm's artery against the bone, to minimize the flow of blood.

EMERGENCY PROCEDURES IF PARENTS CANNOT BE CONTACTED

Educators will call the emergency contact on the child's medical form in their file, as well as those on their authorized pick up list. Educators will continue to call these numbers until someone can be reached.

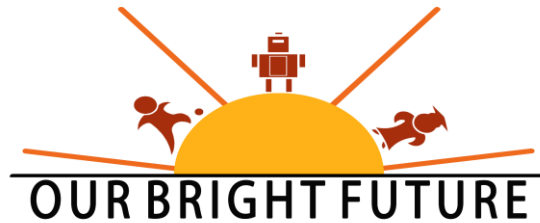
PROCEDURE FOR UTILIZING FIRST AID EQUIPMENT Location of first aid kits: first aid box is located in the closet across from the arts and craft room and one is kept with the After-School Program director. Contents of the first aid kit: bandages, gauze pads, first aid cream, gauze roller bandage, disposable non-latex gloves, cold pack, thermometer, tweezers, scissors, CPR mouth guard. First aid is administered by all Program educators.



PLAN FOR INJURY PREVENTION AND MANAGEMENT First aid training that has been approved by the Program's health care consultant is required of all educators caring for the children. At least one person trained in CPR is required to be on the premises at all times. Educators are trained on health, safety, and emergency procedures upon hiring. Basic guidelines for prevention include providing adequate supervision at all times, avoiding clutter, and checking equipment, toys, and the general environment for safety and health hazards. Each area is checked for hazards daily. The Program Director will be informed right away of any repair of hazards. Children are not allowed in the area of any potential hazard until it is repaired or removed. The Program is arranged into learning and activity areas, allowing separate areas for quiet and noisy activities and to accommodate groups of various sizes. Educators provide adequate and constant supervision. Areas are kept organized, clean and sanitized daily according to guidelines. Equipment is safe and developmentally appropriate and checked routinely. Proper handwashing and health procedures are utilized when dealing with this situation. All hazardous items are kept locked in the Program closet, which is not available to children.

PROCEDURE FOR MAINTAINING AND MONITORING A CENTRAL INJURY LOG When any child is injured, and/or first aid is administered, an injury report form is filled out. This report is then filed in the injury log, located in the Program Director's office. When the parent/guardian arrives to pick up their child, they will be informed verbally of any first aid administered to their child. A signed copy of the injury report form must be given to the parent within 48 hours of the incident.

PROCEDURE FOR INFORMING PARENTS WHEN FIRST AID IS ADMINISTERED TO THEIR CHILD, INCLUDING TIME FRAMES AND DOCUMENTATION A copy of the injury report, which details the injury, when it occurred, how it happened, and what first aid was administered, is



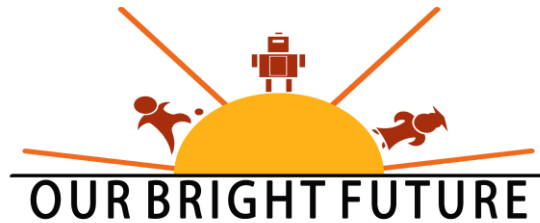
made for the parent/guardian after it is filled out by an educator. When the parent/guardian arrives to pick up their child, they will be informed verbally of any first aid administered to their child. A copy of the injury report must be given to the parent/guardian within 48 hours of the incident.

PROCEDURES WHEN INFORMING EEC OF EMERGENCY INJURY, MEDICAL TREATMENT, DEATH OF CHILD WHILE IN PROGRAM CARE

EEC will be called IMMEDIATELY for any of these instances as soon as the child has been taken care of by the proper medical personnel and the parents have been notified. If the EEC has closed for the day, the office will be called as soon as it opens the next morning. Furthermore, a letter or fax regarding the situation will be mailed as soon as possible.

PLAN FOR INFECTION CONTROL Hand washing procedures for educators and children: All educators and children must wash their hands with soap and warm water and dry them with paper towels before and after handling food, before and after dispensing medication, after using the restroom, after cleaning, and administering first aid. **PROCEDURES FOR WASHING AND DISINFECTING SPECIAL EQUIPMENT ITEMS, OR SURFACES** All equipment used for cleaning and disinfecting items and surfaces will be maintained in the Program closet in a locked cabinet where it will be out of reach of children.

SPECIAL NEEDS AND DISABILITY OF A CHILD The STEMing into Sports Program will review the information given by the parent related to special needs for the child's participation in the Program. Identification of specific accommodations required to meet the needs of the child, which would include a modification in the child's participation in regular activities, will be reviewed. In addition, identification of any special equipment, materials, ramps, or aids will be discussed, if such accommodations will cause a burden on the Program. Parents or guardians will be notified of the

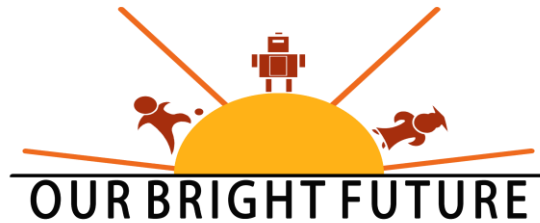


decision in writing, including reasons for the decision. Parents may contact the Department of Early Education and Care to review the decision.

PROCEDURES FOR REPORTING SUSPECTED CHILD ABUSE CASES

As an Occasional Child Care program, we are mandated by Massachusetts state law to report all incidents of suspected child abuse or neglect to the Department of Children & Families. If a case of child abuse is suspected by an educator, it will be reported immediately to Our Bright Future Executive Director, and the Program Director. The person receiving the initial report will be responsible for confirming the facts reported and the condition of the child on the same day the first report is made.

- Data concerning the child will be obtained within the Program for the discussion with the initial reporter and other staff.
- After the information is secured, the executive director will call the Protective Services Unit of the Department of Children & Families to report the case. Within 48 hours, a 51A report will be filed with the Department of Children & Families.
- The Department of Early Education and Care will be notified immediately after filing a 51A, or learning that a 51A report has been filed, alleging child abuse or neglect of a child while in the care of the Program-related activity.
- In the case of a disagreement or uncertainty concerning the need to report an incident, the Program director may not substitute his/her judgment for any mandated report within the Program. While agreement of all professionals involved is desirable, the director must report to the Department of Children & Families even if he/she believes the mandated reporter is incorrect.
- If a staff member is suspected of child abuse or neglect, and they are named in a 51A report, the executive director will notify the Department of Early Education and Care and Department of Children & Families. The staff



member will be suspended from working with children until the Department of Children & Families investigation is completed.

DEFINITIONS OF ABUSE Abuse is the non-accidental commission of any act by a caretaker which causes or creates a substantial risk of harm or threat of harm to a child's wellbeing. Neglect is a failure by a caretaker, either deliberately or through negligence, to take those actions necessary to provide a child with minimally adequate food, clothing, shelter, medical care, supervision, or other essential care. Reasonable Cause is a basis for judgment that rests on specific facts, either directly observed or obtained from reliable sources, and that supports a belief that a particular event probably took place, or a particular condition probably exists. Reasonable Condition is a serious physical or emotional injury resulting from abuse or neglect, or the commission of any act by a caretaker with a child which constitutes a sexual offense under the criminal laws of the Commonwealth; or the physical dependence of a child upon an addictive drug at birth.

STRATEGIES TO HELP PREVENT CHILD ABUSE These preventive strategies are designed to protect the children in the Program and as well as educators and volunteers from being wrongly accused of incidences of child abuse. The Program has in place a comprehensive pre-employment screening procedure to screen out candidates not suited for working with children. The Program will take any allegation or suspicion of child abuse seriously. Educators understand their legal obligation to report suspected abuse. Policies, procedures, and training are available relating to discipline, supervision, educators' interaction with participants, educator and volunteer Code of Conduct, etc. Educators understand what practices may be considered abusive and the difference between appropriate and inappropriate touch. Defensive strategies have been identified for avoiding unfounded allegations. Educators communicate frequently with parents



regarding day-to-day activities and encourage parents to report or question any behavior or event their child may share that appears out of the ordinary. Parents are encouraged to visit, unannounced, any program in which their child participates. Educators try to identify stressed parents and offer support and referrals for help. Educators have learned how to discuss sensitive issues with children such as toileting, sleeping, and questions about sex. Educators protect themselves and Program by agreeing not to be alone with Program youth or program participants outside of the Program or facilities (i.e. babysit, take children on trips, have them in their homes when others are not present, etc.)

CHILD GUIDANCE/PROGRESSIVE METHODS OF DISCIPLINE Child guidance is accomplished through a positive approach which respects the child's individual needs to support the development of self-esteem, self-expression, autonomy, social competence, and school readiness. Educators will provide guidance to children in a positive and consistent manner, based on an understanding of the individual needs and development of the child, by helping children learn social communication. Educators will also explain rules and procedures to them, allowing children to participate in establishing the Program's rules, policies, and procedures. Educators encourage self-control and use positive child guidance techniques such as recognizing and reinforcing appropriate behavior, having reasonable and positive expectations, setting clear and consistent limits, and redirection. Basic rules include respect for each other, the property of others, Our Bright Future facility, the child's safety, and the security of their group. Children have input in deciding the rules for their group and in the establishment of acceptable group standards. Every program offered by Our Bright Future is guidance oriented. Our Bright Future uses its youth development strategy to give our members a sense of competence, usefulness, belonging, and influence. Discipline procedures prohibit corporal punishment, which includes cruel or severe punishment,



humiliation, verbal or physical abuse, neglect, abusive treatment, and disciplining a child for soiling, wetting, or not using the toilet. Educators will also discuss behavior management techniques among educators to promote consistency.

PERSONAL TOYS & EQUIPMENT We will have a fun-filled and fully equipped Program. Members will not be allowed to bring any electronics such as smart phones, iPads, laptops, tablets, etc. Our Bright Future will not be responsible for any lost, stolen, or damaged personal items brought to the program. Exceptions will be made on an as-needed basis

CONFIDENTIALITY OF RECORDS

All information contained in your child's records is privileged and confidential and cannot be released without written consent. Authorized representatives from the Department of Early Education & Care and the Department of Children and Families have the right and the responsibility to review all records upon request.

Acknowledgment form: I acknowledge that I have received a copy of Our Bright Future inc. Occasional Child Care Parent Handbook and understand its contents. I have reviewed the Parent Handbook and agree to abide by all policies and responsibilities as outlined in the Parent Handbook.

Child's Name: _____

Parent/Guardian Name(Print): _____

Signature: _____

Date: _____