

27 Crane Road, Scarsdale, NY 10583

Dear Parents,

We are thrilled that your child will be joining Yellow Acorn Montessori for the 2024-2025 school year. Enclosed are our mandatory student health forms and enrollment forms that must be completed and signed by parents, as well as all providers involved in the health and well-being of your child. Forms must be submitted prior to your child's attendance to our program and should be received no later than June 1, 2023. Forms should be submitted directly to Yellow Acorn Montessori.

The following is a list of all required forms along with an explanation as to their purpose. All forms may not pertain to all children, but we ask that if your child does not have a specific need outlined on these forms, please indicate the term **NON-APPLICABLE (N/A)** on that form so we may be sure each form has been returned and the response may be documented for future reference. All forms are available at www.yellowacorn.org.

HEALTH FORMS

- Child in care medical statement (LOSS 4433) ALL STUDENTS
- Health care plan for a child with special health care needs (LOSS 7006) IF NEEDED
- Medication consent form (LOSS 7002) IF NEEDED
- Individual Allergy and Anaphylaxis Emergency Plan (OCFS 6029) IF NEEDED
- FARE (Food Allergy & Anaphylaxis Emergency Care Plan) IF NEEDED
- Asthma action plan IF NEEDED

ENROLLMENT FORMS

- Daycare Enrollment Form (OCFS 0792) ALL STUDENTS
- Emergency Release/Contact Form ALL STUDENTS
- Class List and Release ALL STUDENTS
- Photo Release Form ALL STUDENTS
- Parent Questionnaire ALL STUDENTS
- Tuition Agreement ALL STUDENTS
- Tuition Schedule ALL STUDENTS
- Acknowledgment of Receipt of Parent Handbook ALL STUDENTS
- Submit a photo of your child and each parent ALL STUDENTS

FOR REFERENCE

- EPA Lead Poisoning Brochure
- Parent Handbook

We will be hosting a mandatory parent orientation during the last week of August. We will share the date soon, but please mark your calendars. You will also receive a phase-in letter regarding your child's first few days of school, which include modified school hours so please be prepared to have a parent or caregiver available during the first week of school in September to accommodate shortened days. We look forward to a wonderful school year!

Warmly,



Yellow Acorn Montessori Administration

Medical Forms Guide

CHILD IN CARE MEDICAL STATEMENT/REQUIRED IMMUNIZATIONS (LDSS 4433)

As per the Office of Children and Family Services of NYS, all children must have an updated annual physical exam throughout their attendance in any Daycare program. This ensures that your healthcare provider acknowledges that your child is free from all communicable disease and is able to fully participate in all age-appropriate activities. All medical information on this form must be completed and signed by your healthcare provider. In addition, all required immunizations must be up to date prior to entering the program. Enclosed is the NYS required immunizations schedule for Daycare. Immunization received during the school year or any change of medical condition must be forwarded to Yellow Acorn Montessori upon receipt of your documentation. Please be aware that no child will be admitted to our program If they do not have the required age-appropriate immunizations. Children who may be on a delayed schedule or have a medical exemption from getting all or certain immunizations must meet certain criteria outlined by NYS. Your healthcare provider will need to complete a form provided by the NYS Department of Health, which must be placed with the child's file in school. There are no religious exemptions.

INDIVIDUAL HEALTH CARE PLAN FOR A CHILD WITH SPECIAL HEALTH CARE NEEDS (LDSS 7006)

If your child requires any special need to include any chronic medical condition such as asthma, food or environmental allergies, seizure disorder, etc. requiring emergency medications, please read the form carefully and have it completed by all providers in the care of your child.

This form is intended to provide evidence that whatever special need your child may have, there is a collaborative effort by all providers to acknowledge these needs and to ensure they are executed accordingly.

MEDICATION CONSENT FORM (LDSS 7002) AND EMERGENCY CARE PLANS

If your child has documented allergies or an underlying medical condition and emergency medication is prescribed, both parents and healthcare providers must complete and sign the <u>MEDICATION CONSENT FORM</u> for each medication prescribed. These forms must be renewed every 6 months unless there is a change of prescription, prompting a replacement of the Medical Consent Form.

*PLEASE BE SURE THAT THE NAME OF THE MEDICATION STATED ON THE MEDICAL CONSENT FORM IS IDENTICAL TO THE MEDICATION GIVEN TO THE SCHOOL.

If the medication is generic (e.g.: Acetaminophen) the medication name on the consent form MUST be Acetaminophen, not TYLENOL.

Along with these forms you will find an <u>INDIVIDUAL ALLERGY AND ANAPHYLAXIS EMERGENCY PLAN</u> (ELIJAH 'S LAW) (OCFS 6029), a <u>FOOD ALLERGY & ANAPHYLAXIS EMERGENCY CARE PLAN (FARE)</u> and an <u>ASTHMA ACTION PLAN</u>. If your child has a food allergy, and an Epi Pen and an antihistamine is prescribed, you and your healthcare provider must fill out <u>BOTH the <u>INDIVIDUAL ALLERGY AND ANAPHYLAXIS</u></u>



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<u>EMERGENCY PLAN</u> and <u>FARE Action Plan</u>. Although this may seem redundant, the new NYS Elijah Law Emergency Plan does not include the use of antihistamine. To accommodate the use of an antihistamine which is often used, we will be using both forms to comply with both state and physician orders. If your child has asthma, and will have emergency medications at school, the Asthma Action Plan must be filled out by both you and your healthcare provider.

OTHER MEDICATION INFORMATION

PLEASE NOTE: WE ARE NOT LICENSED TO ADMINISTER ANY MEDICATION WITH THE EXCEPTION OF EMERGENCY MEDICATIONS

These emergency medications will be only CHILD-SPECIFIC. We do not keep non-specific medications or over-the-counter medications on hand.

These emergency medications must be accompanied by the child's prescription. They should be sent in the original unopened packaging, with the child's name, dose, and the schedule the medication is to be given clearly written on the label. Emergency Action Plans and Medication Ended Forms, completed and signed, must accompany the medication. No child-specific medication will be kept on site if the above-mentioned forms are not completed or have expired. Medications will also be checked for expiration dates.

**ALL MEDICATIONS MUST BE DELIVERED AND PICKED UP BY PARENTS OR GUARDIANS. CHILDREN ARE NOT PERMITTED TO CARRY MEDICATIONS IN THEIR BACKPACKS AT ANY TIME.

CHILDHOOD LEAD POISONING PREVENTION

NYS mandates that parents/guardians be given information and resources about lead poisoning and its prevention. See Attached.

GENERAL ILLNESS GUIDELINES

Please assess your child for signs and symptoms of illness before the start of the school day. If your child presents with symptoms of illness, you MUST keep them home.

Children will have their temperatures taken and given a daily health check before entering the building. They will be screened for signs of fever >100.0, cough shortness of breath, nasal congestion, sore throat, nausea, vomiting, diarrhea, abdominal pain, lethargy, irritability, eye irritation, rash, headache, loss of taste or smell. This health assessment will also continue throughout the course of their school day. If your child is exhibiting any of these symptoms, they will be unable to enter the program, or will be sent home immediately. While awaiting pick- up, your child will be kept in an area designated as isolation for the protection of others within our school community and building. For any absence for more than 3 days, a doctor's note will be required upon their return stating that your child is free of communicable disease, and able to return to school.

NOTE: if a child has had a fever, please keep your child at home until they are fever free for at least 24 hours without the use of any medication.

If your child exhibits symptoms of an allergy or a chronic medical condition, please have your health care provider document that your child's symptoms are specific to the child's underlying condition.



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It is of the utmost importance that all emergency contact numbers are updated, and individuals designated to pick up your child during the school day be available within short notice. It is our policy that children be picked up within 30 minutes. Should your child's symptoms become worse, and we cannot reach parents, guardians or emergency contacts, 911 will be called.

If your child is diagnosed or suspected of having COVID-19, follow all directives issued by your healthcare provider and the Westchester County Department of Health

Yellow Acorn Montessori School is mandated to follow all directives and recommendations issued by the NYS Department of Health, the Westchester Department of Health, and the Centers for Disease Control. Control. As these guidelines often change, we are in constant contact with the regulatory agencies and adhere to the most current guidelines.

Our priority is to provide a healthy and safe learning environment for every child and staff member. Knowing your child's needs and making our families aware that Yellow Acorn Montessori follows all required protocols will help us provide the best environment for your children.