



# Obama Extended Day Program 2023-2024

Contact us at: 412-441-2423  
[DeakingsDaycare@gmail.com](mailto:DeakingsDaycare@gmail.com)  
DeakingsDaycare.com

Greetings Pittsburgh Obama Families!

My name is Victoria Deakings. We are excited to return to Obama EEC Program to offer you and your child(ren) before and after school care via Deakings Daycare for the upcoming school year. We are excited about helping your young learners to shine brightly in our classrooms. It will be a year of magical wonder and amazing growth for your young stars. We have 20+ years of childcare experience and currently operate daycare programs at five locations that are state registered and Keystone Stars enrollment. We have been serving children of the east end, and Pittsburgh Schools for many years, transporting children between Pittsburgh Obama and our facilities.

Our mission at the Deakings Daycare is to provide safe and nurturing childcare that enhances the educational, social and emotional well- being of all children.

While we are not owned, operated or funded by Pittsburgh Fulton or Pittsburgh Public School District, our longstanding relationship and common love of and commitment to children, makes this a natural partnership that we're sure will enhance the work we all do with and for children.

**We will reopen on the first day of school!** Before school care is available from 7:30am – breakfast, after school care will operate from dismissal – 5:45 p.m. You will also have the option to enroll your child(ren) in both the before and after school program. Staff will provide homework assistance & tutoring, as well as assistance with long term assignments, such as science projects upon request. Healthy snacks will also be provided daily.

ELRC will be accepted and there will be a sliding fee scale depending on your childcare needs. Please do not contact the school. If you have any questions please contact me, Victoria Deakings directly at (412) 441-2423 or via email at [Deakingsdaycare@gmail.com](mailto:Deakingsdaycare@gmail.com) Space is limited so please register (using the enclosed pre-registration form) as soon as possible. Thanks so much for your interest. We look forward to working with you and your child(ren).

Sincerely,  
Victoria/ Jeffrey Deakings- Owners Deakings Daycare

# Extended Day Program Information Guide

*Welcome to the Deakings Daycare at Pittsburgh Peabody ECC. We are excited to bring a fully licensed and regulated program this school year that meets or exceeds all DHS licensing standards. In this Information sheet you will find program details that support our daily activities and logistics.*

## Contact Information



**Victoria Deakings, Director**

**Extended Day Phone:** (412) 529-8716

### Main Location:

5446 Jackson Street

Pittsburgh PA, 15206

**Phone:** (412) 441-2423

Email: [Deakingsdaycare@gmail.com](mailto:Deakingsdaycare@gmail.com)

*If at any time you are unable to reach us, please leave a message. We check our messages several times per day and we will return your call promptly.*

## Drop Off and Pick Up Location

Please use the Head start Entrance door for the Extended Day Program.

**\*Please be sure to Sign-In or Sign-Out using the Procare App**

## Tuition



Tuition is due every Monday regardless of operation status.

Various Scholarships and subsidy programs including ELRC and ACCM are available to help reduce this cost. Fees and Co-pays are to be paid via ProCare. Should there be some reason as to why you are unable to pay through ProCare, please notify your Director before payment is due. Please note that payments on ProCare will be charged a 3% processing fee.

**There will be a \$10.00 per day late payment fee. If your fee is not satisfied by the end of business on Monday your family will not be able to return on Tuesday.**

**There is a \$10.00 per minute late pick up fee starting from the first minute of closure. Late fees are to be paid in cash. After your third late pickup your contact is subject to termination.**

To avoid paying late fees of please make your payments and pick up your children on time

## Absences

If your child attends the morning session and will not be attending on a day he or she is scheduled to attend, please notify the program and your child's teacher on or before the morning of the absence.

## **Schedule Changes**

In an effort to be as flexible as possible for our families, we are able to accommodate most changes throughout the school year with a two-week advance notice in writing. All changes must be sent via email to [deakingsdaycare@gmail.com](mailto:deakingsdaycare@gmail.com) or phone @ 412-441-2423. You will receive a confirmation of your change from our office. Please do not assume we have made your schedule change unless you receive a confirmation from our office. Due to staffing and material constraints, we cannot make exceptions to this policy.

## **What to Bring Daily**

A portion of the time spent in Extended Day will be working on academic studies. It is important that your child bring any assigned school work that may need special attention, including homework. Your child should also bring tennis shoes for athletic activity.

## **Breakfast and Snacks**

Children may bring breakfast from home if parents wish for them to eat breakfast at the program however school breakfast will begin promptly at 7:55am. In addition, an afternoon snack will be provided for the children directly after school. All of our snacks are peanut/tree nut free and include items such as yogurt, pretzels, animal crackers, goldfish, cookies, etc.

## **Medication and Illness**

Parents may not send a child to the program if:

- The child has a strep throat which has not been treated by an antibiotic for a minimum of 24 hours
- The child has any rash of acute onset associated with fever or symptoms of illness
- The child has an oral temperature of 100 degrees or greater
- The child has had persistent vomiting and/or diarrhea in the 12 hours prior to coming to the program
- The child has impetigo that has not been treated by an antibiotic for a minimum of 24 hours. Illness that prevents your child from participating in daily activities such as a persistent cough or runny nose.

***If a child is diagnosed with a contagious disease, the child will require a statement from the doctor indicating that the disease is no longer communicable upon return to the program.***

Children who develop any of the following conditions while at the program will be sent home:

- Oral temperature of 100 degrees or greater
- Vomiting Diarrhea Uncontrollable or persistent cough
- Appearance of acute illness or complaint of severe pain
- Uncontrollable cough or runny nose

***A staff member will notify the parent of a child's illness. If a parent cannot be reached, the child's emergency contact will be notified to pick up the child. It is expected that the child will be picked up as soon as possible. Until the parent arrives the child will be excluded from activities with other children and will rest quietly under the supervision of a staff member.***

If an accident or medical emergency occurs, the staff member in charge will administer the necessary first aid immediately and call an ambulance if the child's injury requires emergency room treatment. Staff will also call the parent or emergency contact and stay with the child until either arrive.

### ***School Delays and Early Dismissals***



The Extended Day Program will operate on regular school days as well as early dismissal days only for morning care. On days when school is delayed due to snow, the program will only operate the afterschool program. Our program does not operate during school holidays, vacations, or days when school has been cancelled due to snow or inclement weather and emergency closings. Payment is due even when the program is closed. \*Please remember you are paying for the space that we are holding for your child not his or her attendance. \*

### ***Program Expectations***

Children are expected to be able to:

- Follow program rules
- Participate appropriately in planned activities within a group of 12 children and 1 staff member
- Communicate with staff members and other children
- Cooperate with transitions in activities
- Stay within the activity area and not wander away from the group
- Be cooperative
- Follow staff directions
- Respond appropriately to a variety of staff members
- Treat others with respect
- Play cooperatively with other children
- Behave in a manner that does not pose an unsafe situation for themselves, other children, or staff
- Be independent for personal care needs such as washing hands and toileting

### ***Questions***



Please email [deakingsdaycare@gmail.com](mailto:deakingsdaycare@gmail.com) or contact us at (412) 441-2423

## Child Behavior / Dismissal Policy

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### CHILD GUIDANCE POLICY

Deakings Daycare guidance policy is designed to help children become independent and caring by learning self-control, decision making skills and responsibility for their own actions. Our goal is to help children develop positive self-esteem and respect for themselves and others. At no time will corporal punishment be used at this facility!

Our staff uses the following guidelines and techniques to discipline your child:

- Use of praise through kind words and actions to reinforce desirable behaviors.
- Use of problem solving instead of punishment.
- Redirection to another activity when a child displays undesirable behaviors.
- A cool down will be used as a last resort when the previous techniques fail to change inappropriate behavior.

### CHRONIC DISRUPTIVE BEHAVIOR

The safety and welfare of all the children at our center are very important to us. While the staff will make every effort to work with children and their parents to promote appropriate behaviors, there are situations when additional action may become necessary.

**Initial meeting:** If a child's extreme, uncontrollable behavior, continues to physically or emotionally endanger staff or other children at the center, a parent meeting will be requested by the management staff and the child's teacher. The problem behavior will be discussed and recorded, and goals for correction will be established.

**Second meeting:** If, after a predetermined time frame, the initial goals for changing the child's behavior fail, a second meeting will be requested by the management staff. The behavior correction goals will be discussed again, and a new behavior plan will be defined.

**Suspension/Dismissal:** If no progress occurs within the established timeline, a suspension will result. Parents will be responsible for payment during the length of the suspension. Dismissal of the child will occur after three suspensions, or immediately if the child's behavior severely injures a staff member or another child.

### DISCHARGE POLICY

Deakings Daycare reserves the right to cancel the enrollment of a child for the following reasons:

- Non-payment or excessive late payment of fees
- Failure to submit required information or forms
- Failure to comply with the policies of the center
- Physical or verbal abuse of staff or children by a parent or child

## **COVID PROTOCOL**

Due to Covid we have introduced new protocols and procedures to better protect our families and staff from the spread of the corona virus. As suggested by the global health organization, all students & staff will be required to:

- Wear a face covering, either a mask or face shield, that covers their nose and mouth
- Complete tasks in assigned work areas that will be at a distance of 3ft from others
- Practice social distancing when not in designated work spaces
- Sanitize their hands when transitioning from one space to another
- Practice healthy hand washing after using the restroom, before eating and after touching their face
- Bring their own supplies such as pencils, crayons, etc. to prevent cross contamination

Designated work spaces as well as shared play spaces, will be sanitized at the beginning of the day, end of the day and periodically throughout the day as the children move in and out of their spaces.

All surfaces will be sanitized with a disinfecting agent such as Clorox, Lysol, or any other CDC recommended, state provided sanitizing formula.

We will continue to update our policy as time progresses to ensure we are maintaining the health and safety of our staff and families. .

Should you or any household member have any of the following symptoms, we ask you to remain home and notify the childcare center until cleared by a medical professional:

- Fever of 100.1 or higher
- Cough
- Sore Throat
- Muscle Aches
- Difficulty Breathing

The household will be required to remain out of the facility for 14 days unless medical clearance is provided by a licensed physician, indicating that the presenting symptoms are not associated with Covid-19.

Should a child or a child residing in a household where someone is suspected of, having covid-19, being tested for Covid-19, or required to quarantine due to a Covid-19 exposure must remain home until all affected parties have been cleared. Children will not be able to return to the program without a negative Covid-19 test signed by a medical professional.

## Picture and Video Release Form

I, the undersigned, do hereby grant or deny permission to Deakings Daycare to use my child \_\_\_\_\_ images. Pictures may be used for multiple things including but not limited to: emailing parents, the Deakings Daycare website, memories, sharing with families, and posting throughout the daycare to generate a sense of belonging.

I grant permission for my child's images to be used by Deakings Daycare.

I do not grant permission for my child's images to be used by Deakings Daycare.

Signature \_\_\_\_\_

Date \_\_\_\_\_



**COVID-19 RELEASE AND WAIVER OF CLAIMS ADDENDUM  
("Release")**

The undersigned, in my capacity as parent or legal guardian, hereby acknowledge the health risks and dangers associated with the transmission of the COVID-19 virus, and other communicable diseases, and recognize that exposure to the COVID-19 virus, or other communicable diseases, could occur while my child is in the care of the Deakings Daycare LLC Program ("Program").

As such, and in consideration for child care services to be provided by the Deakings Daycare LLC, the undersigned, for myself and my minor children enrolled in the Program **fully assume all of the risks associated with participation in the Program, including the possibility of COVID-19 (or the novel coronavirus) community spread.**

**I, AS PARENT AND/OR LEGAL GUARDIAN, HAVE READ AND FULLY UNDERSTAND AND ACKNOWLEDGE THE CONTENTS OF THE RELEASE AND AGREE THAT I AM VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING AND DISCHARGING DEAKINGS DAYCARE LLC. AND ITS OFFICERS, DIRECTORS, EMPLOYEES AND VOLUNTEERS FROM ANY AND ALL LIABILITY, DAMAGES, AND EACH AND EVERY ACTION (COLLECTIVELY, "CLAIMS") BY PARTICIPATION IN AND/OR ASSOCIATED WITH THE PROGRAM INCLUDING, BUT NOT LIMITED TO EXPOSURE OR TRANSMISSION OF THE COVID-19 VIRUS.**

I represent that I have full authority to sign on behalf of my child(ren) and that my signature binds each other person having authority to make decisions on behalf of the child(ren).

**MY SIGNATURE BELOW IS CONFIRMATION THAT I HAVE READ AND FULLY UNDERSTAND AND ACKNOWLEDGE THE CONTENTS OF THE RELEASE AND AGREE THAT I AM VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING AND DISCHARGING DEAKINGS DAY CARE LLC. AND ITS OFFICERS, DIRECTORS, EMPLOYEES AND VOLUNTEERS FROM THE CLAIMS.**

\_\_\_\_\_

Parent Name	Parent Signature	Date
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Child(ren) Names:

\_\_\_\_\_

\_\_\_\_\_

**DEAKINGS DAYCARE**  
**Parent Acknowledgement and Waiver of Liability**

I hereby certify that I have read the policies and procedures outlined in the Parent Guide of The Deakings Daycare. As the parent/guardian of:

Child 1: \_\_\_\_\_,

Child 2: \_\_\_\_\_,

Child 3: \_\_\_\_\_, we will abide by the policies and procedure set forth in this guide. We recognize our right to communicate with our daycare center provider on any concerns or issues surrounding our child(ren). We also recognize that failure to comply with policies may result in suspension or termination of services.

Waiver of Liability, Release, Assumption of Risk & Indemnity Agreement Notice: This is a legally binding agreement. I understand that by signing this Childcare Waiver of Liability, I release and hold harmless Deakings Daycare, and its owners, directors, officers, advisors, employees, agents, instructors, volunteers, childcare workers, and all other persons or entities acting for them from any and all claims, demands, suits, cost and charges, in connection with or arising out of Deakings Daycare, including but not limited to, personal injury, property damage, bodily harm, injury, liability, claims, demands, damages, cost, expenses, actions and causes of action in respect of death, loss or damage to the child, or by the child, regardless of cause or to arise by reason of or during participation of Deakings Daycare childcare.

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Parent Name: \_\_\_\_\_  
Parent Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_  
Parent Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

**OBAMA PRE-ENROLLMENT REGISTRATION FORM**

Thank you for your interest in the Deakings Daycare extended day program. Choosing a quality child care program is one of the most important decisions you will make. We take your decision seriously and are committed to living up to the important responsibility of caring for your child.

To register, you may drop this completed form in the basket in Dilworth’s main office labeled Deakings Daycare Registration forms, or you can contact me directly via phone or email at the bottom of the registration form.

Child’s Name: \_\_\_\_\_  
Child’s Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Parent Guardian Information:**

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Company Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Company Phone: \_\_\_\_\_

**Please Circle :**

**Before Only**

**After Only**

**Before and After**

What date would you like to begin? \_\_\_\_\_

**We will do everything possible to meet your needs, but we are unable to guarantee start dates. Enrollment is based upon availability and is subject to priority enrollment rules of the Program.**

\_\_\_\_\_  
(Parent Signature)

\_\_\_\_\_  
(Date)

**Thank you for choosing The Deakings Daycare.**

**Phone: 412-441-2423**

**E-mail: Deakingsdaycare@gmail.com**