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Classroom Guidance Policy/Procedure

The Center's daily schedule, curriculum plans, classroom arrangements, and staffing patterns are designed to promote positive and enjoyable learning experiences, including respectful and trusting relationships among adults and children. When guiding children's behavior the Lindgren Child Care Center helps children learn acceptable behavior and develop inner controls. A child's age, intellectual development, emotional make up, and past experiences will be considered in guidance, and consistency will be maintained in setting rules and limits for children.

The following is a list of some child guiding techniques staff members' use:

- Tell the child what she/he CAN do;
- Establish eye contact when speaking with the child;
- Give choices whenever possible, but only when the child really has a choice;
- Encourage children to solve their own problems and work out conflicts;
- Re-direct a child to another activity;
- Help children learn how to join play.
- Teaching staff never use physical punishment such as shaking or hitting and do not engage in psychological abuse or coercion.
- Teaching staff never use threats or derogatory remarks and neither withholds nor threatens to withhold food as a form of discipline.

Infant Guidance

You will mostly use one or more of these:

- Substitution.
- Redirect child to another activity.
- Remove child from a situation.
- Remove object from child.
- Saying in a positive way what you're doing.

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- Saying "no" from across the room is usually ineffective.
 - Instead of a number of staff saying the child's name, (which gives the child a lot of attention for the behavior) **one** staff person should move in physically close and take action.
 - Immediate **action** works better than giving directions verbally.
 - Staff should be down on the floor **close to the babies**, and move as the babies move, to **prevent situations**.
 - Develop the ability to watch the **entire** room.

Tips:

- Say things in the positive. "Out of your mouth", "use your fingers," etc.
- Be specific. Instead of "Be nice" say "Touch gently".
- Do not expect sharing of infants.
- Use "no" sparingly. Find positive ways to say what the child *should* do.
- Do not label a child ("naughty" etc.)

Sharing and Limit-Setting

The following are some basic guidelines for appropriate guidance for babies:

Be specific.

Tell the baby what he/she should do, not what he/she is doing wrong.

Do not expect babies to share.

Toddler Guidance

Conflict Resolution Policy for Toddlers

In the toddler room the staff is trained to do the following procedures to help toddlers in conflictive situations and to help the room operate more positively. I feel if a room is surrounded by positive remarks and is consistent, conflicts between toddlers are less.

- Staff are trained to have face-to-face interaction when setting limits, rather than talking from across the room
- Staff should tell toddlers what to do instead of what not to do. Say "walking feet inside". Instead of

“Don’t run or no running”.

- Limit the use of negative words such as “Don’t, Can’t, Won’t, and No” The word “no” sometimes has to be used, however, when a child is causing great harm to a child or to himself.
- The staff will praise the toddlers as much as possible, Catch them doing something good.
- Give choices to a toddler if they are refusing to do something. The choices that you give need to have the same outcome. Ex. Child does not want to wash hands. The staff can say “Do you want to put the soap on your hands or should I” either way the desired outcome will happen.
- If two children are fighting over a toy the staff will find another one of the same toy and give it to the child who wanted it.
- To avoid conflict between toddlers the room has two of every toy, because developmentally toddlers cannot share yet.
- If a child is hurtful with a toy, the child is first told what the toy is used for, but if they continue to hurt again with the toy, then they are removed from that area and redirected somewhere else to play. Ex. A child hits a child with a block; the child is told that blocks are for building only. Child hits again with the blocks, the child is removed to another area of the room
- Staff always show comfort to the child who was hurt first and then address the child who was hurting.
- Staff will teach toddlers to talk instead of hurting. Some words include: Move, My turn, Help.
- Sometime distraction still works, so use it if necessary
- Redirect toddlers when you see a conflict that might take place.
- When giving a direction keep it simple, 2-3 words work the best. Ex. Please walk, wash hands please etc...
- Give toddlers time to comply with requests and limits (about 10 sec)
- If a child keeps putting toys in their mouth, instead of continuously telling them to keep the toy out of their mouth, give them a teething toy from the refrigerator, they are probably teething.
- Acknowledge the child’s feelings and desires as legitimate even if you cannot give them what they want.
- If a child bites or has another form of consistent hurting behavior, the behavior is documented in a notebook. The staff are instructed to write such details as time, place, which child was hurt and how the staff handled the situation. The lead teacher shares this information with the parent at pick up.
- If a child does bite more than 2 times, then the lead teacher will sit down with the parent or parents and discuss writing up a behavior plan. The behavior plan will have both the teacher’s and the parent’s input. Once the plan is agreed upon by the parents, teacher and director, then the plan is discussed with the staff and implemented in the classroom.

Preschool Guidance

In the process of learning the complex life skills of cooperation, conflict resolution, and acceptable expression of strong feelings, children, like all of us, make mistakes. Guiding behavior is a big part of every teacher’s job.

-Dan Gartrell-

Child Guidance

The center’s daily schedule, curriculum plans, classroom arrangements, and staffing patterns are designed to promote positive and enjoyable learning experiences, including respectful and trusting relationships between adults and children. To provide for the safety of all children, as well as the individual development of each child’s self-help and self-control skills, teachers maintain daily routines and set limits within each age group. These routines and limits are frequently discussed and defined with the children. Consistency, or knowing what to expect throughout the day, helps children develop a sense of trust and understanding in their environment.

Positive, guiding communication with each child is our primary practice to help children develop a sense of independence, confidence, and competence in their own abilities to get along with peers and adults and to involve themselves positively in classroom activities. Teachers “model” language and appropriate ways for children to express their feelings and emotions. Our belief is that children might show “mistaken” behavior when they do not know how to do it right. Our efforts in guiding children will focus on showing children appropriate behavior.

Preschool Behavior Guidance Techniques

All children are encouraged to “talk” to explain how they feel. Appropriate and positive behaviors are recognized and reaffirmed daily. A teacher’s response to inappropriate or negative behavior may include: ignoring the behavior, reasonably discussing the problem, redirecting the child’s activity, and using clear, firm words to instruct the child about more positive ways to express him/herself. A preschool child might be invited to assist in restoring order as a consequence of some inappropriate behavior. For instance, a child might be asked to help rebuild the block tower of another that was knocked down. Consequences will be constructed with reasonable alternatives rather than punitive punishing responses.

Principles for Guidance of Young Children

Children playing in a group need help and guidance. We use these principles to guide the children:

- We face children when speaking to them.
- We make sure to have the child's attention before giving directions or making suggestions. Go to him/her; call him/her by name.
- We give positive suggestions. Such as "Please keep the crayons on the table", rather than "Don't put the crayons on the floor". This puts the child in the wrong without suggesting what he should do. The two statements may seem to mean the same thing, but there is a great deal of difference in the way they aid or hinder the child's actions.
- We avoid comparisons and competitions among children. Children should not feel that their chances for approval depend on being "first" or "best" or beating someone.
- We give logical reasons when reasons are in order. Say "Throwing the ball in the house may hit someone. Would you like to color or play with the blocks now?" Avoid saying, "We do not throw balls in the house". The child wonders what is meant by "We", why he has to do as "We" do. He stops to please you or because you make him, without associating any reason or realizing any danger.
- We offer choices where possible. Say "John has the truck now. Would you like to play with the clay or the blocks?" The choice is between playing with the clay or the blocks. Suggesting choices helps in getting the child started to play. If John continues to have a difficult time choosing an activity we may take the child in our lap, talk to him about what he might do, and then go with him to show what can be done with the toy.
- We will not offer choice about routine. When we say "Will you wash your hands now", we are implying the rest of the sentence, "or not". Better to say, "Time to wash".
- The best help forestalls trouble. When two children are playing and a third approaches, a suggestion such as "Here comes Mary and she can help set the table", or "You can give her one of the picture books" helps them to accept the new child.
- When limits are necessary they should be clearly defined and consistently maintained. We must be responsible for limiting children so that they do not come to harm, hurt others, or destroy property. We will establish methods for limiting the number of participants when safety is a concern.
- We will give the child only as much help as he needs. We will not do things for the child that he/she can reasonably be expected to do for themselves. We may suggest trying one way or another, then let them do it. The results may be a "poor thing, but his own". However, we will be ready to give help before the child is completely discouraged by too much failure.

Some things we know about children.

- The younger the child, the more quickly he goes from one thing to another.
- The tired child may be overactive and excited.
- Keeping calm helps the child to be more calm.
- If trouble seems to be brewing, a change of activity helps most. This is the time to sing a song, have a drink or water, go for a walk, etc. Redirect before, not after the outburst.

Children need time to change activity or routine. Give "advanced warning" of planned changes. "When you finish your story (your block building, etc.) it will be time to go outside" (or to the bathroom, etc.).

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Extraordinary Behavior

The Center will not tolerate swearing or biased language. If a child uses such language, parents will be informed and asked to discourage the behavior. When a child engages in persistent unacceptable behavior, parents are required to meet with teachers to find a solution to the problem behavior and resolve the difficulty. Outside professional consultation or evaluation may be necessary. Occasionally a child does not adjust to the center environment or a child's repeated behavior interferes with the daily activities of the center. In such cases the center reserves the right to request the child leave the program when there is no improvement in the child's behavior subsequent to the implementation of the plan agreed upon by the parent and teacher.

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Procedures for Reassignment or Termination of Student Personnel

1. Lindgren Child Care Center Student Personnel are students employed under the University Work-Study Program and/or paid with Student Activities monies.
2. Conduct by Lindgren Child Care Center Student Personnel while performing as an employee of the Center which violates Lindgren Child Care Center policies, including the "Policy on the Use of Drug and Alcohol", MnSCU rules, State Law, and/or Federal law may serve as cause for reassignment or termination of that employee or volunteer's position at the center.
3. The Lindgren Child Care Center director may immediately reassign and/or terminate student personnel at the center if the action is necessary to insure the safety, health, and/or welfare of the children, parents, and/or other staff. Prohibited actions include;
 - a. Rough handling
 - b. Shoving
 - c. Hair pulling
 - d. Ear pulling
 - e. Shaking
 - f. Slapping
 - g. Kicking
 - h. Biting
 - i. Pinching
 - j. Hitting
 - k. Spanking

In addition, subjection of a child to emotional stress will result in dismissal. Examples include:

- a. Name calling
 - b. Ostracism
 - c. Shaming
 - d. Making derogatory remarks about a child or the child's family
 - e. Using language that threatens, humiliates, or frightens the child
4. Staff will not separate children from the group unless:
 1. Less intrusive methods (redirection, discussion) have been tried but ineffective
 2. The child's behavior threatens the well being of the child or other children in the program
 3. A child who requires separation from the group must
 1. Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person
 2. The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation
 3. The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops
 4. Children between six weeks and sixteen months will not be separated from the group as a means of behavior guidance.
 5. Any situations presenting a possible violation in #2 above should be reported to the Lindgren Child Care Center director as soon as possible.
 6. If a violation is substantiated by the director, the director will draft a written description of the incident(s) and the actions taken by the director.
 7. The director will file the Incident Report(s) with the designated official listed in the College Bulletin, Faculty/Staff Handbook, MnSCU Rules, or Minnesota Law.
 8. Any incidents of suspected child abuse, child sexual abuse, or child neglect by student personnel will be referred to the Vice President for Student Life and Development and the Stearns County Child Protection Officer in accordance with Minnesota statute.
 9. The Financial Aid Office will be given written notification of any Work-Study student personnel reassignment by the Lindgren Child Care Center director as soon as possible to minimize disruption of work-study payments and/or further efforts at reallocating such monies.
 10. Where appropriate, students may exercise all due process procedures relating to academic disciplinary appeals found in the Student Handbook.
 11. Assistant teachers will supervise aides in absence of lead teacher.
 12. The Lindgren Child Care Center will not tolerate any unexcused absences. Any such absences may result in termination of employment.
 13. Tardiness- excessive tardiness will be grounds for termination.

14. Inappropriate language/statements are not acceptable. Respect and good judgment towards parents, children, and staff need to be observed at all times.
15. It is unlawful for any staff member to treat a child in an abusing or neglectful manner. Persons suspected of child abuse and/or neglect will be reported by the director or lead teachers to the appropriate social service or police department representative.
16. Investigation of existing staff with regard to alleged child abuse and neglect shall be pursued by the director, Vice President for Student Life and Development, and the appropriate enforcement agencies.
17. Persons suspected of child abuse and/or neglect may be reassigned, suspended, or terminated from their employment at the Lindgren Child Care Center and the University.
It shall be the policy of the Lindgren Child Care Center to not hire a staff person convicted of or admitting to or been the subject of substantial evidence of an act of child battering, child abuse, child molestation, or crimes of moral turpitude or debasement. All staff will be required to submit information for criminal background checks before working directly with children.
18. Investigation of staff candidates with regard to alleged or proven child abuse, neglect, and/or moral turpitude will be done by the director and the Vice President for Student Life and Development.
19. If a student staff person encounters a situation where there is suspicion or concern, it might be helpful to discuss his or her concern with the lead teacher or Director. Conversing shall be done ONLY in the center, behind the closed doors of the director's office.
20. This follows the chain of command as written in the staff handbook. However, the law requires mandated reporters to personally make a report if they know or have reason to believe a child is being neglected or abused or has been within the past three years.
21. Staff must maintain confidentiality of information unless they are talking to teachers, social services personnel, or law enforcement personnel. This means keeping information about children to themselves. Finally, staff must never allow their concerns to color or affect the positive regard they must hold for each and every family the Center serves.

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Separation from the Group

No child may be separated from the group unless the following has occurred:

Prior to being removed from the group classroom teachers must:

- Attempt less intrusive methods of guiding children's behavior and been ineffective.
- The child's behavior threatens the well being of the child or other children in the program.

A child who requires separation from the group must:

- Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person.
- The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation
- The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.

Children between six weeks and 16 months are not separated from the group as a means of behavior guidance.

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Separation Report

All separations from the group will be noted in a daily log that includes;

- Child's name
- Staff person's name
- Time
- Date
- Information indicating what less intrusive methods were used to guide the child's behavior
- How the child's behavior continued to threaten the well being of the child or other children in care

If a child is separated from the group three or more times in one day, the child's parent shall be notified and the parent notification will be noted in the daily log. IF a child is separated five or more times in one week, eight times or more in two weeks, the procedures in Persistent Unacceptable Behavior will be followed.

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Accident Prevention

The environment is arranged to be safe.

- Hazardous and potentially toxic substances will be locked and kept out of the children's reach. Surfaces are covered with non-toxic substances, and all room furnishings are safety approved.
- Staff will be trained in keeping size of playthings age appropriate.
- Infant's bottles will not be propped-up.
- The kitchen area is an adult-only area.
- All electrical outlets are equipped with safety plugs.
- Traffic area and sidewalks are designated as high priority for snow removal.
- The director inspects the facility periodically for potential hazards and corrections.
- Twice a year the accident log is evaluated for hazardous areas.

Upon arrival each classrooms opening staff will conduct a daily inspection of potential hazards within their designated classrooms. Prior to children playing on the playground a staff member will conduct similar inspections to the outdoor area.

Where appropriate, proper accident prevention and safety procedures will be taught to the children. Environment regulations will prohibit climbing on furnishings other than designated climbers, and prohibit the putting of small objects in the mouth.

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Choking Hazards

The Center does not the following foods at any time: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonfuls of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole.

Staff cut foods into pieces no larger than 1/4-inch square for infants and 1/2-inch square for toddlers/twos, according to each child's chewing and swallowing capability.

Infants/Toddlers

- The Lindgren Child Care Center does not offer solid foods and fruit juices to infants younger than six months of age, unless that practice is recommended by the child's health care provider and approved by families. Sweetened beverages are avoided. If juice (only 100% fruit juice is recommended) is served, the amount is limited to no more than four ounces per child daily.
- Infants unable to sit are held for bottle-feeding. All others sit or are held to be fed. Infants and toddlers/twos do not have bottles while in a crib or bed and do not eat from propped bottles at any time. Toddlers/twos do not carry bottles, sippy cups, or regular cups with them while crawling or walking. Teaching staff offer children fluids from a cup as soon as the families and teachers decide together that a child is developmentally ready to use a cup.

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Accident Reports

If a child receives a scrape, bump, or bite that requires First Aid and attention, staff must complete an Accident Report. Accident Reports are located on the receptionist's desk. The staff member must give an accurate description of what happened, and what he or she did via First Aid (washed with warm soapy water, boo boo bunny, etc.) Giving hugs and sympathy are important parts of treatment as well and can be noted. Staff should make sure the date, time, and place of accident are reported. The yellow copy goes into the child's cubby for the parent, and the white copy goes to the office. If an incident involves another child, it is important to not identify that child by name...it's confidential.

- Accident Report, Appendix V-A

Arrivals and Departures

Parents and authorized adults must accompany children into and out of the center at all times, and must sign children in and out when coming and going.

- Parents are encouraged to keep routine arrival and departure schedules for optimum staffing.
- Parents will notify teachers when children will not be in attendance, dropped off late, or picked up early to ensure proper staffing.
- Due to Federal and Accreditation requirements, the LCCC is not able to adjust mealtimes.
- Children that receive special services and are transported by that third party will be signed out by the staff person responsible in walking the child to the bus/transportation vehicle. After the student arrives back at the center the staff person responsible in resuming care will sign the child back into care.

As the Lindgren Child Care Center does not transport children we use the same plan as stated above, each of our children transported are children with disabilities so the procedures used to bring and pick up from transportation were put together with their need in mind.

Authorized to Pick Up Children

Parents must pick up their own children. In certain instances, they ask others to pick up their children.

Authorized person

The parent will notify the Center when an individual they have designated as authorized on their registration form will be picking up their child. Children are only released to authorized persons. If a parent tells staff that someone else will be picking up their child staff must check to be sure that person is identified as authorized on the registration form. If they are not, staff must ask the parent to write in their name. Authorization is not done over the telephone.

When an authorized person comes to pick up a child, staff should:

1. Ask the name of the person attempting to pick up the child.
2. Ask to see a photo I.D. to verify their identity. Staff members must I.D. any person he or she does not know. This includes parents.
3. Check child's file in the office to see if that person is listed as authorized.
4. Release the child only after verifying the person's identity and with parent/guardian authorization.

Unauthorized person

If the person attempting to pick up the child is not listed or is listed as unauthorized, staff should call SCSU law enforcement immediately by dialing 9-911. Tell the unauthorized person that the Center cannot release children to anyone other than those listed as authorized, and that they are not listed.

Incapacitated person

If a parent or authorized person who is obviously incapacitated attempts to pick up a child, the following common sense procedures should be followed. Staff should:

1. Tell them he or she would prefer they not drive; his or her concern is for the family.
2. Offer to call them a cab or a friend to drive them.
3. Call the St. Cloud Police if they leave with the child.

Release of Children

Parents must designate at least two (2) individuals who are authorized to pick up their child in emergency situations. These two must be other than the parents. Only those persons authorized by the parent on the Authorization to Pick-Up form may sign-out, pick up, or visit a child. Parents must notify the center when persons other than themselves will be picking up and visiting children so we are prepared. Photo I.D. will be requested.

Verbal permission will be accepted over the phone ONLY if that person is already authorized. If the parent or authorized adults are unavailable or cannot be reached by 30 minutes after closing time, the center will contact the Child Protective Services to take custody of the child.

If you request that we deny access of any person to a child, or deny release of a child to a particular person, you must provide us with the court documents validating that request, and stipulating what law enforcement shall do in such an event. In families where parents are separated or divorced the custodial parent must have on file at the Center a copy of the legal documents stipulating custody and/or visitation, such as a Minnesota Voluntary Recognition of Parentage. Both front and back need to be copied. Consistent with Minnesota state law [MN Statute 257.541], sole custody of children born to parents who were not married to each other at the time of the child's birth resides with the mother. Only a parent with custody may pick up a child, and only a parent with custody may designate and authorize someone else to pick up a child.

Charge for Picking-Up Late Children

The center closes at 5:30 p.m. during fall and spring semesters and 5:00 p.m. summer. We expect children to be picked up by those times. Two things happen when you are late picking-up your child. First, your child becomes anxious about why you are late. Second, staff (who have lives outside of the center) are detained past their scheduled time and are late for their evening commitments. If children are picked up after 5:40 p.m. (or 5:10 p.m. summer) according to Center clock, a \$50.00 late fee will be applied per child. After 5:50 p.m. (or 5:20 p.m. summer) according to Center clock, an additional \$100.00 will be applied per child. At this time Child Protection will be notified to take custody of the children.

Child Picked-Up after Scheduled Hours

Parents sign a Contract for Services that designate specific hours of attendance. When a child that is in attendance past contracted hours;

- Parents will be called immediately unless prior approval has been granted.
- If parents cannot be reached staff will attempt to contact emergency contacts
- Staff will communicate with University Public Safety to attempt to reach parents if on campus
- If parents or emergency contacts unreachable staff must call Child Protection at 9-255-6000, and request an officer to come and take the child.

The center closes at 5:30 p.m. during fall and spring semesters and 5:00 p.m. summer.

- If children are picked up after 5:10 p.m. (or 4:30 p.m. summer) a \$50.00 late fee will be applied per child.
- After 5:30 p.m. (or 4:50 p.m. summer) an additional \$100.00 will be applied.
- The staff person in charge must fill out a Late Pick-Up form and the form must be signed by the parent when they arrive.
- When parents are late, begin calling their telephone numbers immediately.
- Also call the authorized persons to have them come and assume responsibility for the child.
- If by 6:00 p.m. (or 5:00 p.m. summer) children have not been picked-up, staff must call Child Protection at 9-255-6000, and request an officer to come and take the child. After doing so, staff must inform the director of the situation.

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Outdoor Rules

Staff should remember that when they are outside with the children, their main concern should be the children and their safety. Staff should be INTERACTING WITH and watching the children AT ALL TIMES. They must not abuse this time for rest and relaxation.

When on the playground, children are not allowed to throw rocks. Children should only throw balls in play.

Staff should use precaution when children are around strangers. Staff shall be sure they know where their entire group is at all times. STAFF MUST NOT INTERACT WITH STRANGERS. IF THEY ARE KNOWN TO STAFF, THEY ARE STILL STRANGERS TO THE CHILDREN.

Before leaving the center, staff must be sure to take a head count and write a note on the white message board in the classroom. Information should include the time leaving, anticipated return time, and route of walk or destination. One staff member must bring their cell phone with and leave their number with someone in the office. Children should be encouraged to use the restroom before leaving and wait for the group. Staff must bring the fanny pack which contains basic first aid supplies.

Children should walk on the sidewalk and not go into the street or on stairways. Everyone must use designated cross-walks. Children should never climb on sign posts, hydrants or trees, nor should they touch wild or seemingly domestic animals.

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Outdoor Safety

To protect against cold, heat, sun injury, and insect-borne disease, the program ensures that:

- Children wear clothing that is dry and layered for warmth in cold weather.
- Children have the opportunity to play in the shade. When in the sun, they wear sun-protective clothing, applied skin protection, or both. Applied skin protection will be either sunscreen or sun block with UVB and UVA protection of SPF 15 or higher that is applied to exposed skin (only with written parental permission to do so).
- When public health authorities recommend use of insect repellents due to a high risk of insect-borne disease, only repellents containing DEET are used, and these are applied only on children older than two months. Staff apply insect repellent no more than once a day and only with written parental permission.

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Outdoor Play

Cold - Daily outdoor play is scheduled for all children. The Center does not go outside when ambient air temperatures are 0°F or colder. Parents should be sure their child has clothing suited to the weather. The Center may ask parents to go home and get appropriate clothing when needed. It is the Center's policy that if children are healthy enough to attend child care they are healthy enough to go outdoors.

Heat—The Lindgren Child Care Center monitors the St. Cloud Heat Index at the SCSU weather website <http://www.stcloudstate.edu/weather/> along with following the recommendation from Robert Wiesman (SCSU Meteorologist) which is made public via SCSU-Announce list serve. When it is determined that the heat is excessive for young children all children will remain in their classroom for the remainder of the day.

Air Quality—The Lindgren Child Care Center follows the recommendation from Robert Wiesman (SCSU Meteorologist), which is made public via SCSU-Announce list serve, on matters of air quality. When air quality becomes dangerous for young children and elderly a message is relayed to the entire SCSU community. When this has been determined all children will remain in their assigned classrooms until the air quality concern is lifted.

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Outings and Outside

When walking outdoors, the Center has one teacher in front, one in back, and children holding hands. A constant head count is maintained. Staff are generally aware of common safety such as no stone throwing or jabbing with sticks. Children with applicable will assist in looking both ways before crossing a road. Children will not be allowed to venture into parking lots or work areas. Each classroom also posts a note saying where they are when they leave for walks.

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Closings

The Center will close only under two circumstances: when the University classes are closed, and when all lead teaching staff are absent to attend professional development, unless qualified, licensed substitutes are hired.

Cancellation of Classes due to Weather or Other Emergencies:

Any decision to cancel classes is made by the president or the president's designee, after consultation, as appropriate, with the highway patrol, MTC, MnDOT, MnSCU, the Weather Service, and SCSU Meteorologist. In the event of non-weather related situations, decisions are made after consultation with Student Health Services, Public Safety or others as appropriate. All employees are expected to report for work.

Campus Closing due to Weather or Other Emergencies:

The decision to close the university is made by the president or the president's designee after consultation, as appropriate.

Any decision to close the university or cancel classes or events will be announced, if at all possible, before 6 a.m. for day classes and events, and before 3 p.m. for evening classes and events.

Closing/cancellation decisions will be announced as follows:

Radio: WJON/WWJO, KCLD/KNSI/KZBK/KCML, WCCO 830 AM, KVSC, WYRQ/KFLM/KLTF, KWLM/Q102/K100/KRJB

Television: WCCO Channel 4, KSTP Channel 5, KMSP Channel 9, KARE- 11, KSTC Forty5, UTVS, UPN29

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Disaster Preparedness and Emergency Evacuation Procedures Plan

The complete Lindgren Child Care Center Disaster Preparedness and Emergency Evacuation Procedures Plan is posted behind the emergency routes on each exit door and also behind the main office door.

- Disaster Preparedness and Emergency Evacuation Procedures Plan, Appendix VI-A

| PLAN | DESIGNATED PERSON |
|--|---|
| <p>Shelter in place: <i>danger outside of the building or danger inside the building; lockdown.</i> All doors are locked, all shades are drawn, children and staff gather in safe places: preschool cubby areas, by toddler hand sink, in the staff room and store room, infants on the infant floor. We will admit no one until we get the all clear from authorities.</p> | <p>Associate Director and if both director and associate director are not on-site, lead teachers are the designated persons to assume authority.</p> |
| <p>Evacuate because of fire: fire evacuation routes are posted on all of the doorways, and have diagrams indicating which area of the center uses which exit. Age groups of children assemble as far away from the building as possible, then proceed as a group with their staff to either the parking lot N just west of the building, or to the Education Building. <i>In the event of fire in the center, direct exits lead from the infant, toddler, and preschool rooms to the outside. General guidelines include: follow the exit map on your classroom door; keep children in group and away from the building; take head counts and roll attendance when outside; hold children's hands when exiting. All classrooms are equipped with smoke detectors. [Staff Handbook p. 4]</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |
| <p>Evacuate because of tornado: tornado evacuation routes are posted on all of the doorways, and have diagrams indicating which area of the center uses which exit. Age groups of all children assemble in the ECC 123 conference room, crouching next to the walls and/or under the conference table. <i>When weather is threatening, keep children's play away from the windows. Monthly tornado drills are conducted April to September. When evacuation is deemed necessary, children exit out of the north door and walk down corridor to room ECC 123. Children should crouch near the walls in the 'tuck' position, and cover their heads with their arms. [Staff Handbook p. 4]</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |
| <p>Missing children: <i>The staff person in charge will constantly maintain a head count. If a child is missing, the staff person in charge will immediately notify SCSU Security, delegate another person to be in charge, and go in search of the child. If the child is not found in 10 minutes, the St. Cloud Police Department will be notified.</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated. If this should occur during transition, the assistant director would assume authority, and designate another staff person to be in charge.</p> |
| <p>Security Threats: <i>If we are advised to evacuate not only our current space but also the ECC building, we will go to the A120 lounge of the Education Building. Easy automobile access to this area is from N Parking Lot, or 4th Avenue. We will post this information on signs on our doors when we leave the ECC Building. When advised to shelter in place, we will lock all doors, pull blinds, and admit no one until we get the all clear from authorities.[Staff Handbook, p.5]</i></p> <p>St. Cloud State University maintains an Emergency Operations Plan and Procedure, and an easy-to-use flip chart of these procedures is</p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |

| | |
|---|--|
| <p>located in the Lindgren Child Care Center office as well as in the classrooms. The overall plan is intended to be sufficiently flexible to accommodate contingencies of all types, magnitudes, and duration.</p> | |
| <p>Utility Failure: <i>The Lindgren Child Care Center will close as does the University when there is a power or other utility failure. In the event the current needs to be cut, the person in charge will notify the ECC Building Manager. [Staff Handbook, p.4]</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |
| <p>Emergency transport and escort from the program: <i>If your child becomes seriously injured, we will call Gold Cross Ambulance Services for transport to the St. Cloud Hospital emergency room. You will be notified to go to the hospital; a staff person will accompany your child to ER and stay until you arrive. St. Cloud Hospital, 1406 6th Avenue N.; St. Cloud, MN 56303 320.251.2700. [Parent Handbook p., 13]</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |
| <p>Practice and drill: <i>Fire and Tornado Procedures: The Center practices monthly fire drills and follows routine evacuation procedures. We practice monthly tornado drills April to September. Emergency evacuation routes are posted on all the exits. [Parent Handbook, p.13]</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |
| <p>Blizzard Procedure: <i>The Lindgren Child Care Center will follow the same schedule of weather-related closing as does the University. [Staff Handbook, p.4]</i> Weather Related Closings: <i>The center closes only on the rare circumstances that University classes are cancelled. Cancellation information is broadcast on KCLD-FM and WJON-AM as well as ECCO-AM radio. We encourage parents to use their best judgment in determining whether or not their child will attend on severe weather days without undue risk. [Parent Handbook, pp. 13 – 14]</i></p> | <p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p> |

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Allergies/Food

As the Lindgren Child Care Center is made aware of allergies of children and or staff, the Center makes efforts within its capacity, to comply with recommendations of health-professionals regarding those specific allergies. For example, if staff has food allergies, the Center does not assign them to duties that require their contact with the preparation, service, or clean-up of food. Children who have allergies are identified to the Center by their parents (if the allergies are known). If the allergy is a food allergy, statements completed and signed by physicians indicate to the Center what foods to substitute for the allergenic food. The Lindgren Child Care Center asks families of a child with food allergies to give consent for posting information about that child's food allergy and, if consent is given, then posts that information in the food preparation area and in the areas of the facility the child uses so it is a visual reminder to all those who interact with the child during the program day. If the allergy is severe, a Food Allergy Action Plan completed by the physician describes for the Center to use for emergency measures, such as Epi-Pens. The same Allergy Action Plan is completed to tell the Lindgren Child Care Center how to respond to a severe insect bite. Statements in our facility indicate the Center serves no nut products in the center, and allows no foods from homes to be brought in and served to children.

- Allergy Action Plan, Appendix IV-A

Any child with a food allergy must have a Food Allergy Action Plan on file; they are to be the brightest paper in the file (yellow). The plan will guide staff as what to do if the child experiences an allergic reaction and has directions on administering Epi-pens. Each staff member will be trained in the use of Epi-pens at the beginning of each semester.

- Food Allergy Action Plan, Appendix VI-B

Inside the Building Emergency - Evacuation

If the Center is advised to evacuate not only the current space but also the ECC building, everyone in the Center will go to the A120 lounge of the Education Building. Easy automobile access to this area is from N Parking Lot, or 4th Avenue. Staff members will post this information on signs on our doors when staff leave the ECC Building. The instruction to evacuate children to the Education Building are:

1. each teacher takes his/her sign in sheets, places them in their backpack, and readies children to leave building;
2. leave the center by the door furthest away from the danger;
3. on the back of the office door is a RED pocket folder with yellow laminated signs, stating where the Center is going. A staff member must tape one of these to all 3 external doors, 2 in the hallway, and one by the preschool lockers (There are 2 extra of these in the Preschool backpack);
4. in addition to each teacher's backpack, staff must also take along the crisis kit from the office;
5. all staff who have cellular phones should get them and bring them;
6. The Center will enter the Education Building from the doorway staff deem most safe. Children and staff will settle in the lounge, EB A120 immediately;
7. staff members will begin to call parents from the emergency contact sheets located in the brown envelopes in the backpacks;
8. other staff members will be stationed near the doors to spot parents;
9. have parents pick up and sign out their child ONE AT A TIME, to maintain order, and keep track of children
10. SCSU has an emergency procedures contract with the American Red Cross, who would come to campus eventually to provide support and conduct any necessary evacuation.

When accident or injury warrants, the child will receive First Aid as necessary, and if the emergency is immediate, 9-911 will be called and the parent will be notified.

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Serious Injury, Fire, or Death

All serious injuries, fire, or deaths will be reported to the appropriate county and state Department of Human Services personnel by the director.

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Cleaning and Disinfecting

The Center cleans and disinfects to effectively control germs by frequent and thorough hand washing and cleaning and disinfecting surfaces. The Center does it whether dirt is visible or not, knowing that germs are invisible. Disinfecting is the process of destroying harmful germs on surfaces using specific products, and in the child care industry household bleach is the product recommended by the Centers for Disease Control, American Academy of Pediatrics, and US Health Department.

The Center bleaches tables, changing tables, high chairs, and other hard-surface center items. Staff make bleach fresh each morning in the following proportions:

| Type of Surface | Amount of Bleach ULTRA | Amount of Water |
|-----------------------------------|------------------------|-----------------|
| Hard Surfaces: Changing tables | 1 ¼ tsp. | 1 pint = 2 cups |
| Tables, high chairs, mouthed toys | ¼ tsp. | 1 pint = 2 cups |

Each classroom maintains a Cleaning and Sanitizing Checklist (example in this folder) at least by task, and some also by named teaching staff responsible. Teaching staff perform these cleaning and sanitizing tasks daily. These Cleaning and Sanitizing Checklists are designed from the above-mentioned Cleaning and Sanitation Frequency Table adapted from Healthy Young Children, A Manual for Programs, NAEYC 2002, and maintains alignment with it.

Our custodian is responsible for toilets, mopping floors, vacuuming, carpet cleaning monthly, trashes, and these tasks are taken care of on a nightly basis.

We identify the following:

- Cleaning: washing dirt with soap and water
- Sanitizing: removing dirt and bacteria, i.e. bleach water

Depending on the classroom, we either sanitize hats after each wearing (toddler room) or we do not use hats in that dramatic play area (preschool and infant rooms).

- Floors, toilet seats, and changing table tops can all be sanitized, and we also use a disposable barrier on all changing tables. Additionally the custodian mops floors every day with disinfectant.
- Staff uses vinyl gloves when managing blood and bowel movements.
- Children with impetigo are asked to wear bandages over their lesions.
- Staff cleans blood with blood-born pathogen clean up kits supplied by St. Cloud State University.
- Toilet accidents are cleaned with soap and water.
- Vomit is cleaned up using special clean-up kits, followed by immediate shampooing of carpets if the vomit hits a carpeted area.
- Staff sanitizes nonporous surfaces using bleach water.
- Staff clean infant and toddler carpets of spit-up immediately by spot cleaning with detergent, and bleach water;
- Staff disposes of contaminated materials and diapers in closed plastic bags.
- All mouthed toys are washed in the dishwasher. There are containers in both the infant and toddler rooms where staff place mouthed toys, and these are washed in the dishwasher daily, and BEFORE they are again presented to children. Preschool toys that go into the mouth are removed from the children's area and washed and sanitized with spray, or are placed in the dishwasher.

All surfaces are cleaned using a 3 step process: 1)soapy water 2) clear water 3) diluted bleach solution sprayed and sit for 2 minutes.

All staff use gloves when changing BM diapers, or dealing with blood. Vomit and blood clean-up kits are kept in the center for use by staff. Immediate calls to custodial or hazardous waste pick-up staff is made when these substances are cleaned up, and the collected materials includes any paper towels and gloves used in the clean-up.

If vomit, feces, or urine gets onto carpeting, we also immediately call custodial staff to clean the area commercially. Until the clean-up occurs, the area is covered with cloth and a chair.

Small area rugs are laundered weekly, our carpets cleaned monthly by the custodian. When small 'urps' happen on the carpet in the infant room, they are cleaned with water and detergent, then clear water, then sprayed with diluted bleach solution.

All diapers are placed in closed hands-free diaper receptacles in their respective changing areas.

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Allergies/Environmental

We will maintain child and staff areas according to individual environmental health needs. For example, when we cared for a child with a severe sun allergy, we had our windows covered with UV-filtering film. We solicit allergy information from our teaching staff via the Staff Emergency Information Form, and the Staff Health Assessment form, where staff can identify allergies or special health needs and have their health professionals make recommendations to us. We also request this information from parents regarding their children, when parents have the Medical Record and Health Care Summary completed by their health care provider. As part of St. Cloud State University, we are governed by their AWAIR Workplace Accident and Injury Reduction efforts, which comply with respiratory protection programs and indoor air quality.

As stated earlier, we do not allow tree nuts or peanut butter into our center.

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Diapering

Infants, toddlers, and some preschoolers need diapering. Your teacher in each area has specific diapering instructions you must follow for each child. Cleanliness, health, and safety are the most important components of all these procedures.

For children who are unable to use the toilet consistently, the program makes sure that:

- For children who require cloth diapers, the diaper has an absorbent inner lining completely contained within an outer covering made of waterproof material that prevents the escape of feces and urine. Both the diaper and the outer covering are changed as a unit.
- Cloth diapers and clothing that are soiled by urine or feces are immediately placed in a plastic bag (without rinsing or avoidable handling) and sent home that day for laundering.
- Staff check children for signs that diapers or pull-ups are wet or contain feces (a) at least every two hours when children are awake and (b) when children awaken.
- Diapers are changed when wet or soiled.
- Staff change children's diapers or soiled underwear in the designated changing areas and not elsewhere in the facility.
- Each changing area is separated by a partial wall or is located at least three feet from other areas that children use and is used exclusively for one designated group of children. For kindergartners, the program may use an underclothing changing area designated for and used only by this age group. (This indicator only is an Emerging Practice.)
- At all times, caregivers have a hand on the child when the child is being changed on an elevated surface.
- Surfaces used for changing and on which changing materials are placed are not used for other purposes, including temporary placement of other objects, and especially not for any object involved with food or feeding.
- Containers that hold soiled diapers and diapering materials have a lid that opens and closes tightly by using a hands-free device (e.g., a step can).
- Containers are kept closed and are not accessible to children.

Staff members whose primary function is preparing food do not change diapers until their food preparation duties are completed for the day.

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Hand Washing

How to wash hands:

- Rub hands together vigorously for at least 20 seconds using warm running water and liquid soap.
- Wash under fingernails, between fingers, back of hands, and wrists.
- Rinse hands.
- Dry hands with a single-use paper towel.
- For hand-held faucets, turn off water using a paper towel instead of bare hands to avoid recontamination of clean hands.

The program follows these practices regarding hand washing:

- Staff members and those children who are developmentally able to learn personal hygiene are taught hand-washing procedures and are periodically monitored.
- Hand washing is required by all staff, volunteers, and children when hand washing would reduce the risk of transmission of infectious diseases to themselves and to others.
- Staff assists children with hand washing as needed to successfully complete the task. Children wash either independently or with staff assistance.
- If a situation may arise that a hand washing sink is not available, children over 24 months may be permitted to sanitize their hands using a hand sanitizer with 60-95% alcohol based product.

Children and adults wash their hands

- on arrival for the day;
- after diapering or using the toilet (use of wet wipes is acceptable for infants);
- after handling body fluids (e.g., blowing or wiping a nose, coughing on a hand, or touching any mucus, blood, or vomit);
- before meals and snacks, before preparing or serving food, or after handling any raw food that requires cooking (e.g., meat, eggs, poultry);
- after playing in water that is shared by two or more people;
- after handling pets and other animals or any materials such as sand, dirt, or surfaces that might be contaminated by contact with animals; and
- when moving from one group to another (e.g., visiting) that involves contact with infants and toddlers/twos.

Adults also wash their hands

- before and after feeding a child;
- before and after administering medication;
- after assisting a child with toileting; and
- after handling garbage or cleaning.

Except when handling blood or body fluids that might contain blood (when wearing gloves is required), wearing gloves is an optional supplement, but not a substitute, for hand washing in any required hand-washing situation listed above.

- Staff wears gloves when contamination with blood may occur.
- Staff does not use hand-washing sinks for bathing children or for removing smeared fecal material.
- In situations where sinks are used for both food preparation and other purposes, staff clean and sanitize the sinks before using them to prepare food.

When accident or injury warrants, the child will receive First Aid as necessary, and if the emergency is immediate, 9-911 will be called and the parent will be notified.

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Food Safety

We employ a number of methods to protect children with food allergies from contact with the problem food. We work with catering staff to have a recommended alternative food provided for that child. Center staffs that purchase breakfast and snack foods are skilled at label reading to avoid purchase of foods with tree nut oils, and any peanut product. We consider ourselves a nut-free center; however know that food production at our caterers is not nut-free. We allow no foods from homes to be brought in and served in the center, indicated in our Operations Manual, as a final way to protect children from outside foods. When we prepare lists of children's names with food allergies for posting in our food preparation areas, we actually cover-up the list with a piece of construction paper, but food production staff lift up the cover often to remind themselves who has what food allergy or preference.

It is our policy to honor food preferences whenever we can. For instance, we always honor to the best of our abilities, Muslim requests that their children not be served pork. If families wish their children to remain vegetarian we also find sufficient protein sources to feed those children in lieu of meat.

Food Preparation and Storage

The Lindgren Child Care Center takes steps to ensure food safety in its provision of meals and snacks. Staff discard foods with expired dates. The program documents compliance and any corrections that it has made according to the recommendations of the program's health consultant, nutrition consultant, or a sanitarian that reflect consideration of federal and other applicable food safety standards.

Food Guidelines

1. Wash hands before beginning **any** work in the food preparation area, i.e. before making bleach, cleaning food prep area touching any food container/dish, washing dishes, putting dishes away, cleaning tables...always wash your hands!
2. Milk expiration dates must be checked daily to ensure freshness.
3. If fruit is taken from a #10 can and leftovers exist, the remaining may be stored for future use. Do not store unused food in the can. Empty into plastic containers (under sink) and cover or use zip-type storage bags. Label and date all stored items.
 - All fruit from a #10, can may be served to children within two days of the can being opened. It is imperative that food is labeled and dated correctly.
4. Unused fruit juice from concentrate must be labeled and dated and stored in a sealed container. Label and date all stored items.
 - All juice from concentrate may be served to children within two days of the juice being prepared. It is imperative that all juice is labeled correctly.
5. If a fruit or vegetable will be served, thoroughly wash the fruit/vegetable under cold running water, rubbing away any bacteria. Cut fruit and vegetables on a clean cutting board or plat with a clean knife. Due to allergies and cross-contamination, do not use the same knife without rewashing before cutting another product.
6. Foods catered from Sodexo will be served at the designated lunch period. Any cut up/prepared fresh fruit that is leftover from the lunch service may be used for snack on the day of service. Any remaining prepared fresh fruit must be disposed at the completion of snack.
7. Uncut/unprepared fresh fruit delivered by Sodexo food service will remain refrigerated until use (with the exception of bananas which will be kept in a bowl above the refrigerator.) It is the responsibility of the breakfast food preparation staff person to evaluate all fruit for freshness.
8. Any leftover cold cuts delivered by Sodexo may remain refrigerated and used on the date of services and then disposed of unless expiration date from Sodexo is stated differently. For instance, this periodically may happen to keep turkey meat on hand for children that do not eat beef or pork.
 - Sealed cold cuts that are opened at the center must be labeled, dated, and stored in a sealed container. These meats may be used for up to 10 days from the date of opening or the expiration date, whichever come first. After lunch is completed extra food containers are to be dumped into red garbage can and stacked for washing...before washing ny dishes countertop must be washed and bleached
10. After meals all leftover food is put into bucket by the children, buckets are then dumped into the red garbage can at the end of the counter, this needs to be emptied after lunch dishes are completed.

Foods from Home

Our standard operational procedures prohibit foods brought into the center from homes with the following

exceptions:

- Parents bring in filled and ready-to-serve baby bottles for their babies if they prefer to feed a formula other than that which we provide;
- Parents bring in breast milk, either fresh or frozen, for their babies to drink;
- Bottles are labeled with the baby's first and last name, and the date and time that the formula was prepared or the breast milk was pumped;
- Each autumn we host a Fall Family Potluck, when parents and staff bring dishes to share.

Special Feeding Needs

The center enrolls children with special needs whenever feasible for the child and the center. If a child currently enrolled develops signs of special needs, center staff continues to work with families sharing resources and support. Our participation in the CACFP, and its Civil Rights policy for reasonable accommodation, would also require us to make food substitutions, modifications, and records for families. Infant food intake is recorded every time a baby ingests food, and that record is available to parents each day, posted on the front of that baby's locker. When children older than infants have special feeding needs, program staff keeps a daily record documenting the type and quantity of food a child consumed that day and shares that information with parents.

Food Temperature

Liquids and foods that are hotter than 110 degrees Fahrenheit are kept out of children's reach. We monitor the temperatures of our automatic hand washing sinks, and have the sensors adjusted periodically to about 100 degrees Fahrenheit. Staff will not bring hot liquids (110 degrees Fahrenheit or above) into the classrooms. They may keep their hot beverages in the staff room. Infant staff does not use bottle warmers nor microwaves to warm bottles, rather take the chill off from bottles in hot tap water. These are monitored so the temperature of the tap water is not 110 degrees Fahrenheit. We check food temperatures when food arrives from the Caterer to ensure a hot food temp of 140 degrees or higher. Foods are then placed in serving bowls on tables for family style service, and have cooled to 110 degrees or below by the time children sit at table and begin serving themselves.

Notices about keeping foods and liquids 110 degrees F. or higher out of reach of children are posted in the food preparation areas of the center.

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Abuse Reporting -- Suspected Child Abuse and Neglect

Lindgren Child Care Center's staff are required by Minnesota state law to report suspected child abuse and/or neglect to the proper authorities. All staff are mandated reporters, and it is not allowed to pass off the obligation to report by telling a lead teacher or director. There are two important levels of child abuse and neglect reporting that must be understood when working at Lindgren Child Care Center:

1. **Reporting suspected abuse/neglect of a child by someone outside of the child care center.** Such incidents must be reported to Child Protection

Services (St. Cloud Phone 320-255-6000, ask for Child Protection) the local police (302-255-1200), or the county sheriff.

2. **Reporting of abuse/neglect events that occur within the center itself.** Such incidents must be reported to the Department of Human Services, Division of Licensing. Call 651-431-6600 to make the appropriate report. Any person who in good faith suspects abuse of a minor is obligated to report that suspicion.

3. If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota Statutes or Rules that govern the facility, you should call the department of Human Services, Licensing Division at (651) 431-6500.

4. If you know or suspect that a child is in immediate danger, call 911

Who Should Report Child Abuse and Neglect

- Any person may voluntarily report abuse or neglect.
- If a person works with children in a licensed facility, he or she are legally required or mandated to report and cannot shift the responsibility of reporting to his or her supervisor or to anyone else at his or her licensed facility. If someone knows or have reason to believe a child is being or has been neglected or physically abused within the preceding three years, he or she must immediately (within 24 hours) make a report to an outside agency.

What to Report

- Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.566).
- A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include any actions taken by the facility in response to the incident.
- An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays.

Retaliation Prohibited

An employer of any mandated reporter shall not retaliate against the mandated reporter for reports made in good faith or against a child with respect to whom the report was made.

The Reporting of Maltreatment of Minors Act contains specific provisions regarding civil actions that can be initiated by mandated reporters who believe that retaliations have occurred

Failure to Report

A mandated reporter who knows or has reason to believe a child is or has been neglected or physically or sexually abused and fails to report is guilty of a misdemeanor. In addition, a mandated reporter who fails to report maltreatment that is found to be serious or reoccurring maltreatment may be disqualified from employment positions allowing direct contact with persons receiving services licensed by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations.

Internal Review

When the center has information about the reporting of suspected abuse and neglect, either internally or externally, the director will conduct an internal review and take corrective action if necessary.

This internal review will evaluate:

- If related policies and procedures were followed;
- If policies and procedures were adequate;
- If there is a need for additional staff training;
- If the reported event is similar to past events with the children or the services involved; and
- If there is a need for corrective action by the license holder to protect the health and safety of children in care.

Primary & Secondary Positions to Ensure Internal Reviews are Completed

The internal review will be completed by the director. If this individual is involved in the alleged or suspected maltreatment the associate director will be responsible for completing the internal review.

Documentation

Documentation of internal review will be completed and will be provided to the commissioner upon request.

Corrective Action Plan

Based on the results of the internal review, the Lindgren Child Care Center will develop, document and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder.

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Staff Training

The Lindgren Child Care Center provides training to all staff related to the mandated reporting responsibilities as specified in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556). The Lindgren Child Care Center will document the provision of this training in individual personnel records and monitor implementation by staff, and ensure that the policy is readily accessible to staff, as specified under Minnesota Statutes, section 245A.04, subdivision 14.

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Nap and Rest Policy

Naptime is a scheduled part of the daily schedule for toddlers and preschoolers and is required by DHS licensing guidelines for child care centers. All preschoolers and toddlers are required to lie on a cot to rest or sleep for at least thirty minutes.

The environment is darkened, and restful music is played. Staff will not awake children before they are ready to wake up on their own. Staff will raise the blinds and turn on the lights mid-afternoon. Infants are each provided with a crib and sleep according to their individual schedules.

Nap Procedures

- All children must rest for at least 30 minutes. A child who has napped or rested 30 minutes will NOT be required to remain on the cot. Quiet activities are set up at tables until other children get up.
- Placement of equipment: In the infant and toddler rooms the cots are spread out throughout the room while keeping clear aisles for safety. Unimpeded access for both adults and children is maintained on at least one side of the cot. Cribs are arranged within the sleeping room to also maintain clear aisles for safety and access to all infants.
- All cots are placed directly on the floor and must not be stacked when in use.
- Separate bedding for each child is provided for each child in care. Bedding is washed weekly and when soiled or wet. Blankets must be washed or dry cleaned weekly and when soiled or wet.
- The toddler and preschool room has individual cots which are disinfected after each use.
- Staff sit or lie next to children, rub their backs and comfort them to help them fall asleep.
- When children are up, staff attend to cots as directed by their lead teacher.
- A crib or portable crib is provided for each infant for whom the center is licensed to provide care. The equipment is of safe and sturdy construction that conforms to the Code of Federal Regulations.
- Infants are placed on their backs on a firm surface.
- Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed in cribs.
- The baby's bib should be removed before placing the baby in the crib.
- If a blanket is used, the infant is placed at the foot of the crib with a thin blanket tucked around the crib mattress, reaching only as far as the infant's chest.
- The infant's head remains uncovered during sleep.
- The side rail is fastened in the "up" position after placing the baby in the crib.

After being placed down for sleep on their backs, infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position. Unless documentation from the infant's parent directing an alternative sleeping position for the infant exists.

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Program Drug and Alcohol Policy

Conduct by Lindgren Child Care Center Student Personnel while performing as an employee of the Center which violates Lindgren Child Care Center policies, including the "Policy on the Use of Drug and Alcohol", MnSCU rules, State Law, and/or Federal law may serve as cause for reassignment or termination of that employee or volunteer's position at the center.

Policies and Related Information - Alcohol and Other Drug Policy

Philosophy

This policy supports the mission of St. Cloud State University by:

Enhancing Learning and Service: St. Cloud State University seeks to provide an excellent learning environment and to provide support and service to our community and the broader community. We recognize the best educational environments are free from the adverse affects of high-risk and illegal alcohol and other drug use. We recognize also that high risk drinking among our students on or off-campus has a negative effect on academic performance and negative consequences for our community.

Respecting Individual Freedom and Responsibility: The University supports the individual freedoms accorded to our community members. However, we believe that with those freedoms come responsibilities to the University and the surrounding community. At a minimum, fulfilling those responsibilities requires that individuals understand and act in accordance with University policy and applicable local, state and federal laws.

Promoting Health, Safety and Well-Being: The misuse and abuse of alcohol and other drugs pose a serious threat to individuals and the University's ability to fulfill its educational mission. Excessive drinking among St. Cloud State University students is potentially associated with death, sexual assault, violence, injury, property damage, and a host of other negative effects.

Reducing these negative effects requires that we care for members of our community and our guests and visitors. Every member of the University community has a stake in promoting the goals listed above. As a result, University employees are expected to support this policy by:

- Supporting efforts to reduce or eliminate high-risk and illegal use of alcohol and other drugs.
- Holding students accountable for behavior that violates this policy, including referring incidents to University and/or law enforcement officials as appropriate.
- Supporting students' efforts to achieve healthy and productive lives by referring them to appropriate services, programs and activities.

Some employees have a greater responsibility in supporting compliance, including but not limited to, student organization advisers, Community Advisers, Public Safety Officers, and those traveling with students to off-campus events.

All University employees (non-students) are expected to comply with the employee policy regarding alcohol and other drugs. This policy can be found on the Office of Human Resources website, <http://www.stcloudstate.edu/humanresources/policies>.

St. Cloud State University Alcohol and Other Drug Policy

St. Cloud State University and this policy comply with and support Minnesota State Colleges and Universities (MnSCU) Board policy, which prohibits excessive or illegal use, sale, or distribution of alcoholic beverages at Minnesota State Colleges and Universities and University-sponsored events on or off-campus.

Definitions

1. Student—means all persons who:
 - a. Are enrolled in one or more courses, either credit or non-credit, through the University.
 - b. Withdraw, transfer or graduate, after an alleged violation of the Student Code of Conduct.
 - c. Are not officially enrolled for a particular term but who have a continuing relationship with the University.
 - d. Have been notified of their acceptance for admission or have initiated the process of application for admission or financial aid.
 - e. Are living in a University residence hall although not enrolled in the University.
2. Registered Student Organization: Any student group and/or organization that has successfully completed the registration process outlined in the Student Organization Guidebook and registers each academic year with the Center for Student Organizations and Leadership Development Office.
3. Travel Status: The period from departure until return to campus by students who have obtained travel authorization through the appropriate University representative for a University student event.
4. Events: Activities that include, but are not limited to, official meetings, practices, competitions or trips

involving students, registered student organizations, or intercollegiate athletic teams.

5. University Premises, Property and Facilities: Any building or property owned by St. Cloud State University or that is controlled by the institution but owned by a third party.

- a. Applicability of the Policy

6. Violation of the Alcohol and Other Drug Policy, the Student Code of Conduct, MnSCU and University policies including Residential Life policies, Technology policies and/or local, state, or federal laws regarding use, possession, or distribution of alcohol and/or other drugs, or drug paraphernalia which may result in issuance of a court summons, arrest, or referral for University conduct action or any combination of the above.
7. This policy applies to all on-campus and off-campus activities that are considered University activities, such as events and officially sanctioned field trips. This policy also applies to student organization-sponsored activities and events.
8. This policy applies to students, student groups and organizations, and their guests or visitors on University property and facilities engaged in a University activity. SCSU employees should refer to the Office of Human Resources for applicable policies.
9. Violations or alleged violations of local ordinances, state or federal laws may subject student(s) and/or student organizations to conduct action by the University when these violations occur on campus, on University owned property, during a University activity or event, or when behavior on or off-campus adversely affects the University's educational, research or service functions. Examples of off-campus behavior which may be subject to University conduct action include, but are not limited to the following: underage consumption, selling or otherwise providing alcohol to underage persons; hosting underage drinking or disruptive parties; actions that threaten or endanger the health or safety of individuals; using, selling or distributing illegal drugs; sexual violence; and hazing.

- a. Alcohol and Other Drug Policy Section

10. On-Campus: The use, possession, distribution, manufacture or sale of any controlled substances, illegal drugs, or alcoholic beverage is prohibited on campus. Students may use and possess prescription drugs (including controlled substances) for which they have a valid prescription.
11. Off-Campus: As members of the University community, students are expected to behave responsibly and legally. University community members violating civil or criminal law may be subject to University conduct procedures when that conduct occurs off-campus and adversely affects the educational, research, or service functions of the University. Unlawful behavior by individual students or student organizations should be reported to the University. If reported, the University may take appropriate conduct action. The illegal use, possession, distribution, manufacture or sale of any controlled substance, drugs, or alcoholic beverages is prohibited for individual students and/or student organizations:
 - at University events on or off-campus;
 - on travel status when representing the University (e.g., as a member of athletic team, sports club, Student Government Association, student organizations and groups, member of a University group, delegation, etc.). Further restrictions or allowances for legal and responsible use of alcohol may apply to individual students or student groups on travel status, based on the specific program's needs and direction of the faculty or staff supervisors/ advisors.
 - Student leaders, faculty, staff supervisors/advisors and coaches assume responsibility for ensuring University policies and local, state, and federal laws are followed.
- Disruptive use of alcohol and other drugs is prohibited. Disruptive use of alcohol and other drugs, regardless of where consumed or ingested, includes behavior that disrupts the University community, endangers the health or safety of self or others, results in damage to University or personal property, or requires the intervention of University or community resources. Examples of disruptive use include, but are not limited to, disorderly conduct, excessive noise, violence, threats, vandalism, or intoxication (regardless of age), that leads to intervention by University personnel, law enforcement personnel or medical personnel.
- The public display of advertising or promotion of alcoholic beverages or illegal drugs, in University buildings or any other public campus area including all University-owned housing areas is prohibited. This includes alcohol containers, banners, lighted beer/ liquor signs, and large inflatable advertising.
- The possession or display of alcohol "trophies," or other forms of empty alcohol containers, is not allowed on campus. The presence of empty containers, devices designed or intended to be used for the rapid consumption of alcohol (i.e., races, games, etc.), or drug paraphernalia, is prohibited. Possessing any of these materials may be considered evidence of use, consumption, or distribution.
- The following advertising and promotional activities are prohibited for any student, University employee, registered student organization, or University office, department or program:
- Using alcoholic beverages as awards or prizes in connection with University events;
 - Providing promotional items or advertising associated with alcohol and illegal drugs at University sponsored student events. This includes, but is not limited to, such items promoting alcohol or

drug use on cups, shirts, beverage can coolers, or any other items advertising or promoting alcohol or illegal drug use;

- o Advertising alcohol and/or illegal drugs in University controlled or affiliated publications, or on University premises, including University affiliated web sites;
- o Advertising that includes brand names, logos, prices, visual images or phrases that refer to consumption of alcoholic beverages and use of illegal drugs;
- o Use of alcohol for recruiting and student organization fund-raising activities and events;
- o Purchasing alcohol and other drugs with University or organization funds, including student activities fee allocations; and
- o Consuming or transporting alcohol and other drugs in University vehicles.

The University does not regulate content or advertisements in autonomous student-edited media, such as student newspaper. Because of the belief that advertising alcohol perpetuates the culture of high-risk and underage drinking, the University encourages student media publications including, but not limited to, the University Chronicle to maintain internal policies which are compatible with this policy, to help promote student health and success.

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Drug and Alcohol Policy Exceptions

An exception for instructional purposes in accordance with MnSCU Board Policy 5.18 allows for the use of alcohol in laboratory and classroom instruction or experiments.

Students may use and possess prescription drugs (including controlled substances) for which they have a valid prescription.

The Chancellor or the Office of the Chancellor, and the President of St. Cloud State University have delegated authority to approve use of alcohol at specific special events on campus or University sponsored events off campus. Approval shall be consistent with the Alcohol and Other Drug Policy and with MnSCU procedures. The procedures shall address the following: compliance with local ordinances and state law relating to sale; possession or consumption of alcohol; providing adequate dram shop/public liability insurance; and any other matters deemed necessary. Students who are of legal age to consume alcohol may choose to do so at these events.

Students studying overseas are expected to comply with the laws of the foreign country and the policies of the host institution or sponsoring program. Additionally, all enrolled students, including students who are studying overseas, must abide by all University policies, including but not limited to the Student Code of Conduct.

A "Good Samaritan" exception for violations of the Alcohol and Other Drug Policy will be recognized and honored. A student, who may be in violation of the alcohol and other drug policy, but comes to the aid of another student by seeking professional help, will not be cited for an alcohol and other drug policy violation through the University conduct process. This exception is subject to the discretion of the Vice President for Student Life and Development or designee. This exception will not be granted to those who flagrantly or repeatedly violate the Alcohol and Other Drug Policy. This exception does not suggest that laws or policies should be violated in order to help individuals.

The University recognizes that various violations of the Student Code of Conduct involve use of alcohol. The University encourages the reporting of conduct violations such as sexual assault, hazing, physical violence, harassment and others and, therefore, the University may choose not to hold Complainants accountable for Student Code of Conduct violations related to alcohol and other drugs when a more serious violation/crime has occurred.

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Drug and Alcohol Policy Additional Information and Resources

Prevention, counseling, treatment services, and referrals.

The University recognizes that chemical abuse and chemical dependency impact academic and personal success. This policy is not designed to discourage people from seeking counseling or rehabilitation.

All information about those individuals who voluntarily seek drug or alcohol counseling or rehabilitation services will remain confidential. Seeking counseling or rehabilitation will not be used as a basis for conduct action or be used against an individual in any way. SCSU provides many varied programs to help individuals experiencing problems. Counseling is free and confidential to all SCSU students. Assistance with alcohol and drug issues can be received at:

Counseling and Psychological Services

www.stcloudstate.edu/counseling

103 Stewart Hall
(320) 308-3171

Confidential online alcohol screening is available through the Counseling & Psychological Services web site.

Student Health Services

www.stcloudstate.edu/healthservices

1st Floor, Hill Hall
(320) 308-3191

St. Cloud State University's employee (non-students) policy regarding alcohol and other drugs along with additional information can be found at

<http://www.stcloudstate.edu/policies/categories/documents/AlcoholandOtherDrugPolicyFinal2013.pdf>

Minnesota State Colleges and Universities (MnSCU) Board Policy 5.18 can be found at

<http://www.mnscu.edu/board/policy/518.html>

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Drug and Alcohol Policy

Relevant Minnesota Laws

Current Minnesota statutes including those related to alcohol and drugs are found at <http://www.leg.state.mn.us/leg/statutes.asp> [use "Search by key words or phrases" to find the specific topics of interest (e.g., alcohol, marijuana, etc.)]

For a summary of Minnesota alcohol-related statutes prepared by the National Institute for Alcohol Abuse and Alcoholism please see <http://alcoholpolicy.niaaa.nih.gov/stateprofiles/StateProfile.asp#FI>

Relevant Federal Laws

Drug Free Workplace Act of 1988

Public Law 100-690

Drug-Free Schools and Communities Act Amendments of 1989

Public Law 101-226

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Communication

E-mail is an official form of communication to students, faculty, and staff at St. Cloud State, so please check e-mail frequently to be sure you don't miss important announcements. Your SCSU generated e-mail, ending in @stcloudstate.edu, will be the only official e-mail used for communication. Non student parents may be added to a distribution list, but reliability of delivery cannot be guaranteed.

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Mission

St. Cloud State University's Lindgren Child Care Center provides infant, toddler, and pre-school-aged care to the children of SCSU students, staff, and faculty. As a place where theory is put into practice, Lindgren Child Care Center is a training and laboratory resource to the entire campus, and a model of excellence for the community of St. Cloud. Our hours of operation follow the academic calendar. Fall and Spring semesters we provide services Monday through Friday, 7:30 a.m. – 5:00 p.m. During summer sessions we are open Monday through Friday 7:00 a.m. – 4:20 p.m. We are closed according to the University schedule of holidays and days that classes are not in session. Professional development days may also result in the Center being closed.

Purpose

Lindgren Child Care Center opened in September 1980 in response to a need expressed by the non-traditional student body for quality, on-campus child care services. It is one of the excellent student services administered by the Office of Student Life and Development at SCSU, serving as an adjunct to the child's family by providing quality care for children while parents participate within the University.

Philosophy

We believe children are entitled to receive loving care in a safe environment with an educational experience. At Lindgren Child Care Center children are challenged by age-appropriate environments and activities based on knowledge of child development and developmentally appropriate practices, implemented by professional staff. We are committed to ensuring children's health and safety, helping children establish trust in their environment, strengthening their self-identity, and igniting their curiosity through productive, satisfying activity. Through an excellent blend of professional staff and arranged environment, the curriculum helps children know their individuality, understand their special worth, develop self-discipline, and broaden their understanding of individuals different from themselves.

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First Aid/ CPR Classes

Staff are required while employed at the Lindgren Child Care Center to maintain current certifications in Pediatric First Aid and Infant Child CPR. Staff will be required to obtain their First Aid and Infant/Child CPR certifications at a mandated center wide training. At least one staff member who has a certificate is always present with each group of children.

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Communicable Disease Reporting

The Lindgren Child Care Center provides information to families verbally and in writing about any unusual level or type of communicable disease to which their child was exposed, signs and symptoms of the disease, mode of transmission, period of communicability, and control measures that are being implemented at the program and that families should implement at home. Good communication among healthcare providers, childcare providers, school health staff, parents/guardians, and the health department can play a major role in preventing the spread of communicable diseases. It is important that parents/guardians let childcare providers and/or school health staff know whenever their children are diagnosed with a communicable disease. The childcare center will, as required by law, notify regulatory agencies as needed of communicable diseases.

Minnesota reporting rule

Many diseases must be reported to the health department. According to Minnesota rule (MCAR 4605.7040 to 4605.7900), 77 specific diseases are reportable. Disease fact sheets included in Section 6 indicate which diseases are reportable, and reportable diseases are marked with an asterisk (*) in the table of contents. Childcare providers and school health staff are required by the rule to report diseases to the health department. Some communicable diseases can be very serious, so it is important for parents to notify the classroom teachers immediately with diagnosis information. The Lindgren Child Care Center annually checks with the MDH website for any changes in the disease reporting rule:

www.health.state.mn.us/divs/idepc/dtopics/reportable/rule/index.html

The following diseases are reportable in Minnesota:

Amebiasis (*Entamoeba histolytica*)
Anaplasmosis
Anthrax
Arboviral disease
Babesiosis
Blastomycosis
Botulism
Brucellosis
Campylobacteriosis
Cat scratch disease
Chancroid
Chlamydia trachomatis
Cholera
Coccidioidomycosis
Cryptosporidiosis
Cyclosporiasis
Dengue virus infection
Diphtheria
Diphyllobothrium latum
Ehrlichiosis
Encephalitis
Enterobacter sakazakii
Enteric *E. coli* infection
Giardiasis
Gonorrhea
Haemophilus influenzae disease (all invasive disease)
Hantavirus infection
Hemolytic uremic syndrome
Hepatitis (all viral types)
Histoplasmosis
Human immunodeficiency virus (HIV) infection, including Acquired Immunodeficiency Syndrome (AIDS)
Influenza (unusual case incidence, critical illness, or laboratory confirmed cases)
Kawasaki disease
Kingella spp.

Legionellosis
Leprosy
Leptospirosis
Listeriosis
Lyme disease
Malaria
Measles
Meningitis (caused by viral agents)
Meningococcal disease (*Neisseria meningitidis*)
Mumps
Neonatal Sepsis
Orthopox virus
Pertussis
Plague
Poliomyelitis
Psittacosis
Q fever
Rabies
Retrovirus infections (other than HIV)
Reye syndrome
Rheumatic fever
Rocky Mountain spotted fever
Rubella and congenital rubella syndrome

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Field Trips

The Lindgren Child Care Center will take walking field trips within the boundaries of St. Cloud State University. Individual classroom teachers schedule walking fieldtrips based on current curriculum interests and needs. We do not take field trips away from the SCSU campus. When on a walking field trip the staff will be equipped with a first aid kit, emergency phone numbers, and a designated personal cellular telephone.

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Food and Nutrition

The Lindgren Child Care Center participates in the Child and Adult Care Food Program through the State of MN Department of Education and the U.S. Department of Agriculture. In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

(1) Mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) Fax: (202) 690-7442; or

(3) Email: program.intake@usda.gov.

This institution is an equal opportunity provider.

Our meal service times for toddlers, preschoolers, and infants over one year are:

- 8:30 a.m. breakfast
- 11:00 a.m. lunch
- 2:00 – 2:30 p.m. snack

Babies under one year eat at the times most appropriate to them as shared by their parents with the infant teacher.

The Center prepares the breakfast and snacks on-site from simple foods requiring little preparation. The hot noon meal is catered by our on-campus food service, SODEXHO, Inc. Food preparation here at Lindgren occurs using sanitary procedures for staff to follow.

The center will supply breakfast, lunch and an afternoon snack for children, and appropriate foods for infants.

Breastfeeding

The program supports breastfeeding by

- accepting, storing, and serving expressed human milk for feedings;
- accepting human milk in ready-to-feed sanitary containers labeled with the infant's name and date and storing it in a refrigerator for no longer than 48 hours (or no more than 24 hours if the breast milk was previously frozen) or in a freezer at 0 degrees Fahrenheit or below for no longer than three months;
- ensuring that staff gently mix, not shake, the milk before feeding to preserve special infection-fighting and nutritional components in human milk; and
- providing a comfortable place for breastfeeding and coordinating feedings with the infant's mother.

Choking Hazards

The Center does not the following foods at any time: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonfuls of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole.

Staff cut foods into pieces no larger than 1/4-inch square for infants and 1/2-inch square for toddlers/twos, according to each child's chewing and swallowing capability.

Infants/Toddlers

- The Lindgren Child Care Center does not offer solid foods and fruit juices to infants younger than six

months of age, unless that practice is recommended by the child's health care provider and approved by families. Sweetened beverages are avoided. If juice (only 100% fruit juice is recommended) is served, the amount is limited to no more than four ounces per child daily.

- Infants unable to sit are held for bottle-feeding. All others sit or are held to be fed. Infants and toddlers/twos do not have bottles while in a crib or bed and do not eat from propped bottles at any time. Toddlers/twos do not carry bottles, sippy cups, or regular cups with them while crawling or walking. Teaching staff offer children fluids from a cup as soon as the families and teachers decide together that a child is developmentally ready to use a cup.
- The center staff work with families (who are informed by their child's health care provider) to ensure that the food is based on the infants' individual nutritional needs and developmental stage.
- Except for human milk, staff serve only formula and infant food that comes to the facility in factory-sealed containers (e.g., ready-to-feed powder or concentrate formulas and baby food jars) prepared according to the manufacturer's instructions. Bottle feedings do not contain solid foods unless the child's health care provider supplies written instructions and a medical reason for this practice. Staff discard after one hour any formula or human milk that is served but not completely consumed or is not refrigerated. If staff warm formula or human milk, the milk is warmed in water at no more than 120 degrees Fahrenheit for no more than five minutes. No milk, including human milk, and no other infant foods are warmed in a microwave oven.
- We feed whole or reduced fat cow's milk to children ages 12-24 months. We do not feed cow's milk to children younger than 12 months. A request to differ from the latter policy would require a Special Dietary Statement from the child's health care provider.

Menus

Center menus are prepared and posted in every classroom on the refrigerators. These menus are prepared between the director, teachers, and the staff at SODEXHO, Inc, the caterer. They are kept on file for review by Dr. Brenda Lenz, who serves as our health consultant. Copies of the entire menu cycle are available to parents on request. Because we participate in the CACFP, the menus are also reviewed by specialists in the Child Nutrition Section of the Minnesota Department of Education, who administers our participation in the CACFP.

Special Diet

On rare occasions children have medical dietary needs. Parents may request alternative foods, but in order for the Center to continue receiving reimbursement for that meal, parents must have their doctors complete a Special Dietary Request. These are available from the director.

- Allergy/Food Exemption Statement, Appendix IV-C

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Group Size, Staff/Child Ratios, and Teaching Assignments

Our policy and practice will be that each children's age group will have staff assigned to achieve particular ratios as stated. Teaching staff assigned to a particular age group will be primarily assigned to work with that age group throughout the duration of their employment at the Lindgren Child Care Center. As much as possible, we encourage keeping infants and toddlers with their group and teaching staff for the duration of a school year, generally September through May.

The Infant group size is 8 infants. The published ratio for this group is 2:5; operationally one might observe a 1:2 ratio in this room.

The Toddler group size is 12 toddlers. The published ratio in this group is 1:7; operationally one might observe a 1:4 ratio in the toddler room.

The Preschool group size is 20. The published ratio in this group is 1:7; operationally one might observe a 1:5 ratio in the preschool room.

During all hours of operation the published ratio is maintained in each room. It is likely to note the observable ratios during times of high interaction and construction during the day.

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Immunizations

The Minnesota Department of Health requires each child's immunizations to be up to date in order for him or her to be enrolled in the center. The recommended schedule is available at doctor offices or at www.health.state.mn.us/divs/idepc/immunize/schedules.html.

If upon enrollment and as age appropriate your child requires routine health services, a copy of an appointment reminder with a health consultant will suffice to keep children enrolled.

Office staff check children's immunizations periodically to be sure all children are keeping up to date on their immunizations.

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Hospital Information

If a child becomes seriously injured, the Center will call Gold Cross Ambulance Services for transport to the St. Cloud Hospital emergency room. Parents will be notified to go to the hospital. A staff person will accompany the child to the Emergency Room and will stay until parents arrive. Below is the address and phone number of the St. Cloud Hospital.

St. Cloud Hospital
1406 6th Avenue N.
St. Cloud, MN 56303
320-251-2700

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Health Care Summary

In accordance with Minnesota State licensing requirements, parents must submit a statement certifying the date of the child's last physical examination, the child's immunization records, a list of specific health needs, and the name, address and telephone number of the child's physician within 30 days of enrollment.

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Illness and Injury

Parents should notify the teacher when they drop their child off if the child did not eat well, did not sleep well, or seems to be out of sorts. Parents should also notify the teacher if their child has been diagnosed with pink eye, strep throat, chicken pox, measles, lice, scabies, etc. If a child becomes ill at the Center, parents will be notified to come and pick their child up immediately. For this reason, it is extremely important that parents are careful to inform the Center where they are each hour their child is in the Center. The Lindgren Child Care Center does not rely on cellular phones; parents must tell the Center where they are in class and where they study. If parents cannot be reached, the Center will call the persons authorized by parents to pick up the child. Until the parents come, ill children will be separated from the group.

The Center's policy is stringent: The Lindgren Child Care Center does not care for sick children. Therefore, each parent must make other arrangements for their child when they are sick. The Center keeps sick children out of the center so the healthy children remain healthy. The center has no facilities to care for sick children. Therefore, each parent must make other arrangements for children when they are ill. Teachers are required to have First Aid training, and will proceed accordingly.

Children should remain home when any of the following situations arise:

- The child is ill enough to require one to one attention in order to be comfortable;
- The child's temperature is 100°F or above (a temperature is the body's basic defense mechanism to battle illness so a temp is an indicator that a child is ill. Parents should not give their child acetaminophen to reduce fever and then bring them to the center).
- The child has any communicable infectious disease such as pink eye, measles, chicken pox, mumps, strep or bronchial infections;
- The child has profuse, thick, yellow or green nasal discharge or discharge from the eyes or ears. A profuse discharge is one which the nose needs to be wiped every 3-5 minutes;
- The child has any infectious skin disease or rash, such as active fever blisters, thrush, or impetigo;
- The child has persistent, non-productive, excessively forceful, or 'barking' cough that interferes with their program day;
- The child has an intestinal disorder accompanied by nausea, diarrhea, or vomiting. To prevent the outbreak of gastro-intestinal disease in the center, the center must exclude all children and staff with diarrhea from the facility. Parents must NOT bring their child to the center if their child has diarrhea regardless of the cause. Children shall be excluded from attending the center until the child is without nausea, diarrhea, or vomiting for 24 hours.
- With influenza or other illnesses with fever, children shall be excluded from attending the center until the child is without fever for 24 hours without the aid of acetaminophen.

Minor injuries will be treated with appropriate first aid and parents will be informed about them on an accident report.

- Accident Report, Appendix IV-I

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Administration of Drugs/Medications

Routine or “as needed” medications are not administered by the staff. This includes medications for asthma (inhaler or neb), pain, fever (Tylenol, Advil), antibiotics, cough syrup, and others. Parent(s) are welcome to stop by the center to administer medications they wish their child to have. It is up to the parent(s) to store and transport any medications. [Lockers are available throughout the campus]. Parent(s) of children with asthma are urged to consult their physician about an “asthma action plan” developed in regards to this medication policy. For example – having the parent administer an short-acting bronchodilator (Albuterol) inhaler prior to playing outside to avoid an asthma attack.

Staff will administer medications during a life-threatening event. For example an anaphylactic shock (epinephrine injection).

- The parent(s) needs to provide the director with a current physician order (within a year) indicating medication, dose, route, along with specific directions as to when (what symptoms) the child should receive this medication.
- The medication container must be clearly labeled from the pharmacy with the child’s name, dose, route, directions, and expiration date. The medication must be “current” and not “expired.” This medication will be stored in the center.
- Following administration of epinephrine the emergency services will be called and the parent notified.
- It is the responsibility of the parent to replenish the medication stored in the center and to ensure the medication is current (not expired).

Written parent permission is required for staff to use any diaper rash ointments, diaper wipes, and commercial sunscreen, Sunscreen will only be used on children over 6 months of age.

Pets

We will keep fish as pets. All other pets are prohibited. Should we consider hosting visiting animals, we would require veterinarian documentation of full immunization, and notes from the veterinarian regarding the suitability of the animal's nature and temperament for close proximity with children. If a child who is allergic to a particular animal is in our care, that would prevent said animal from visiting. We do not keep reptiles.

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Parent/Teacher Conferences

Family members are provided information, either verbally or in writing, about their child's development and learning on at least a quarterly basis, with written reports at least two times a year.

Both parents and staff may wish to call for additional conferences as needed. The Lindgren Child Care Center believes very strongly in keeping our parents informed as to the development of their children. Below is specific language from our assessment plan to document our parent teacher communication policy.

- Developmental assessments are ongoing (year round) with results discussed with the parent throughout the semester, both daily along with two scheduled parent/teacher conferences, one each fall and spring semester.
- Parents are asked to be involved in their child's planning and assessment via an online journal using the Creative Curriculum assessment program.
- Also, on a daily basis the lead teachers discuss with parents developmental milestones reached, developmental progress, and developmental concerns.
- Both formally and informally the lead teachers will disseminate the screening and assessment information gathered for parents. This process will empower the parents as they will feel informed and more knowledgeable about their child's developmental progress.

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Photo/Video/Research

Teachers use digital cameras and digital video to capture the activities of children. Documentation of children's activities is used for parents to see what their children are doing in the center, and also a way to broadcast back to children in visual ways what they have been doing. This is how the Center uses and displays photos and video. Occasionally campus newspaper and public relations office ask to take photos of the center for use in their efforts, and when news stories are done about the center. In the event that faculty and students of SCSU propose a research project at the center, a project description and specific permission form will be distributed to parents.

Parents must give permission for children to be photographed or videotaped.

- Permission Form, Appendix III-P

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Visiting

Parents may visit any area of the facility at any time during the program's regular hours of operation as we have an open door policy at the Lindgren Child Care Center. Parents or prospective parents are welcome at any time. We encourage parents to stop in and visit the center and their children. Persons authorized to pick up a child may visit with prior approval from the child's parent. We have sign-ins for practicum students and ask they wear name tags.

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Goals for Children

Our overall goal is to provide children with loving care in a safe environment with an educational experience. Specifically, our goals are to give the children the opportunity to:

- Develop a healthy self-concept;
- Develop both socially and emotionally;
- Develop enjoyment of the creative experience;
- Develop trust in adults and peers;
- Develop independence and responsibility for self;
- Develop security and a feeling of success;
- Develop skills in the physical, cognitive and language areas.

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Goals for Parents

Our goal is to help parents:

- Develop realistic, age appropriate expectations for their children;
- Clarify values and explore methods of child guidance;
- Explore parent involvement as a method of maintaining quality environments for children;
- Strengthen family-school partnerships and communications.

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Curriculum

Infants (2 months-15 months)

Children in the infant area follow individualized schedules which are planned cooperatively by the parents and lead teacher. Each schedule is modified as the child's development and parents' desires dictate. The staff's primary goal is to help infants develop a sense of trust and pleasure in relationships with their care givers, and in their new environment. The staff to child ration is 2:5, with 8 infants enrolled.

Philosophy of the Infant Program

We believe:

- that in order for infants to develop trust, their needs should be responded to quickly, and with sensitivity and respect for their temperament and for their home routines
- infants are competent. They communicate their needs and feelings through body language, vocalizations and crying, and gestures. It is our job to learn to "read" what they are telling us and be responsive to their communication with us
- that it is important to provide age-appropriate learning opportunities, in all areas of development

Infant Curriculum

The infant curriculum is guided by *The Creative Curriculum, for Infants, Toddlers & Two's*, published by Diane Trister Dodge, Sherrie Rudick, and Kai-lee' Berke. This curriculum is a comprehensive curriculum which includes goals and objectives for children's learning in all areas of development: social/emotional, physical, cognitive, and language. These 4 developmental goals are carried out through the care giving, the environment, and activities in the infant program. Sensitive care giving is a major component of the program, because it builds the foundation of trust that children need to be successful throughout life. The environment reflects diversity, beauty, and nature and is designed to convey a sense of calmness. Activities provided on a daily basis, such as music time, sensory activities, reading books, and outdoor experiences, are appropriate to the developmental stage of the baby.

If you wish to learn more about The Creative Curriculum you can log onto their website at www.teachingstrategies.com and click on the infants, toddlers, and two's side bar.

Toddlers (16 months-32 months)

A structured day is planned indoors and outdoors for the toddler children, dependent on their particular schedules. Appropriate activities that foster the growth of each toddler's self-help skills, language development, social awareness, and positive, non-aggressive problem solving are incorporated. Nap time is scheduled in the afternoon. The staff to child ratio is 1:5, with 12 toddlers enrolled.

The Philosophy of the Toddler Program is to help toddlers feel safe and respected along with encouraging the toddler to develop in all areas (cognitive, social/emotional, language, physical and self-help) according to their individual ability using developmentally age appropriate practice. Relationship with the child and the child's family is also an important piece of the program. It is important to have parent involvement and create partnership with the parents so that the teacher and parent can work together on their child's development. (Theorist: Brazelton and Greenspan)

Toddler Curriculum

The Toddler Curriculum that is used in the classroom is *The Creative Curriculum*, published by Diane Trister Dodge* Sherrie Rudick*Kai-lee' Berke. *The Creative Curriculum® for Infants, Toddlers & Twos* is a comprehensive curriculum that helps teachers achieve the very best program for children under three. If the interactions children have are nurturing, consistent, and loving, and the experiences they have are appropriately challenging, then infants, toddlers, and twos grow and flourish. If you would like to learn more about the curriculum you can log on to their web site at www.teachingstrategies.com and click on the infants, toddlers, and two's side bar.

Preschoolers (33 months-5 years)

Activities of social, motor, language, cognitive and sensory experiences are planned for the preschool children. This is done through emergent curriculum where the children's interests are observed, followed, and documented. Activities are then planned in all developmental areas which are connected to the children's interest area. They include large and small group activities for the day, music experiences with song or dance, story telling and role playing, creative movement activities, finger plays, arts and crafts, woodworking, outdoor play and special field trips. Naptime is scheduled in the afternoon. The staff to child ratio is 1:7, with 25 preschoolers enrolled.

The Philosophy of the Preschool Program is to provide children with endless opportunities to explore and investigate the world in which they live. The children's interests are paired with educational experiences (in all

developmental domains) that are relevant, engaging, and meaningful. We believe that children who become active participants in their learning will continue this trait through their educational careers. To assist the children in becoming active learners, we have adopted an emergent (project based) curriculum.

It is only as children search for answers to their own questions via discussion, investigation, and experimentation that they begin to grasp and understand complex concepts that are foundational to later learning. Rather than use teacher directed thematic units, teachers integrate curriculum goals carefully within open-ended projects of inquiry chosen by the children (Katz & Chard, 1989).

Preschool Curriculum

The framework is provided by the Early Childhood Indicators of Progress: Minnesota's Early Learning Standards. The primary purpose of these Indicators are to provide a framework for understanding and communicating a common set of developmentally appropriate expectations for young children within a context of shared responsibility and accountability for helping children meet these expectations. These early learning standards are broken down into six main domains, each of which are described in further detail using the links below. The framework provided by the Early Childhood Indicators of Progress is enhanced by the use of *The Creative Curriculum® for Preschoolers Assessment* tool. This a comprehensive national tool used to in all types of early childhood settings, including inclusive and early intervention programs. To learn more about *The Creative Curriculum® for Preschoolers Assessment* tool please follow this link: www.teachingstrategies.com

To view the complete Early Childhood Indicators of Progress please follow this link:

<http://cfl.state.mn.us/mdeprod/groups/EarlyLearning/documents/Publication/009530.pdf>

The Lindgren Child Care Center is an observation resource and training laboratory for the campus community. As such, parents will see student observers in classrooms in addition to the regular staff on a weekly basis.

- Infant Curriculum, Appendix III-L
- Toddler Curriculum, Appendix III-M
- Preschool Curriculum Appendix III-N

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Program Administration Records

The following records are maintained on site by the Lindgren Child Care Center and will be made available for inspection at the request of the Commissioner:

1. Record of information given to parents as specified in Minnesota Rules, part 9503.0090;
2. Personnel records as specified in Minnesota Rules, part 9503.0120;
3. Children's records as specified in Minnesota Rules, parts 9503.0125;
4. Child Care Program Plan as specified in Minnesota Rules, part 9503.0045
5. A log of fire and tornado drills, and accident/injury, emergency, and incident records as specified in Minnesota Rules, part 9503.0110
6. The staff distribution schedules as specified in Minnesota Rules, part 9503.0040
7. Separation reports as specified in Minnesota Rules, part 9503.0055
8. The report by the health consultant as specified in Minnesota Rules, 9503.0140
9. Record of medicine administration as specified in Minnesota Statutes, part 9503.0140, subpart 7
10. Record of the crib safety checks as specified in Minnesota Statutes, section 245A.146
11. Record of the use of experienced aides as specified in Minnesota Statutes, section 245A. 14, subdivision 8' and unqualified substitute staff persons as specified in Minnesota Rules, part 9503.0034, subpart 3
12. Record of internal reviews and corrective actions plans as specified in Minnesota Statutes, section 245A.66

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