

Holy Nativity Christian Child Care Center

Parent Handbook

Effective January 2019

“Growing loving followers of Christ”

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With Apologies to None

When I am introduced as a teacher, I am usually asked what I teach. I reply, "I teach the little ones." Often the response is a flat "Oh." I can never tell whether it is an expression of sympathy or disinterest. I wish I had a chance to say something like this:

- *Where else would life look as bright to me as it does having an energetic group to whom nothing is impossible?
- *Where else could I walk into a room and see so many faces turn to greet me?
- *Where else could I wear something time after time and be told I look pretty?
- *Where else could I guide the first letter formation of a chubby hand and think that someday it might be a book or an important document?
- *Where else could I so quickly forget my own aches because of skinned knees, bumped heads, and broken hearts that need my consolation?
- *Where else could I feel so close to my Maker when little children learn to love Him and His word because of my help?

Yes, I am a teacher, with apologies to none, AND I LOVE IT!

Introduction

Welcome to Holy Nativity Christian Child Care Center! We are delighted that you have chosen us to care for your child. We look forward to getting to know your child and your family, and serve you in the best way possible. This handbook serves as one form of communication between us and the families in our care. It is our hope that you will read over this Parent Handbook upon enrolling your child and will clarify any questions with the Director promptly. Thank you and welcome!

Mission Statement

This Center is a ministry of the church, a way of meeting the needs of children and their families, including sharing the Gospel of Jesus Christ. Through the Center, the church commits itself to the social, physical, emotional, spiritual, and intellectual well-being of children. All the work of the center is rooted in the Gospel of Jesus Christ, whose name is proclaimed with love. The Center commits itself to an inclusive ministry serving people regardless of their race, language, ethnicity, gender, social, or economic background. The Center commits itself to fair and equitable employment practices, including non-discriminatory hiring, just compensation, and affirmative action. The Center commits itself to strive toward the highest standards of excellence in this ministry.

Program Objectives

- To provide a warm, nurturing environment that encourages the development of the whole child;
- To provide an environment that is based on successful experiences, which encourage all children to develop a healthy self-concept and positive self-esteem;
- To offer an environment that encourages children to develop their capabilities and interests at their own pace and according to their individual needs;
- To offer a program that recognizes the uniqueness of each and every child and provides positive encouragement for the child's continued growth;
- To create an environment that provides the child with the opportunity to learn by doing and moving from hands-on experiences to more abstract concept development; and
- To provide opportunities for a lifetime of creative living and learning.

Our Christian Influence

We seek to spiritually nurture the children in our care by combining the teaching of God's Word at an age-

appropriate level with the modeling of Christ-like love and behavior from the staff. The following are the ways in which we foster spiritual development in our children:

1. They sing religious songs and say a table prayer before their meals.
2. Toddlers and Preschoolers learn about Jesus during Jesus Time and in other formal meetings.
3. Toddlers and Preschoolers participate in weekly Chapel on Fridays with Pastor Jason Wahlstrom.
4. They learn about the wonders of nature and of the blessings of families.
5. We celebrate the Church holidays: Thanksgiving; Christmas; and Easter.
6. To develop their relationship with God, the children will be taught the following Bible truths:
 - The True God is Triune: Father, Son, and Holy Spirit.
 - All people are born sinful.
 - Sin separates us from God.
 - The Holy Spirit brings us to God through the Word of God and Baptism (we believe in infant baptism).
 - God's will for us is revealed in the Ten Commandments.
 - Jesus came to take away the sins of the world.
 - Everyone who believes in Jesus and is baptized has forgiveness of sins and everlasting life.
 - As God's children through faith, we can pray to Him and He will answer our prayers.
 - We want to obey God out of thanksgiving for His love for us.

Program Information

Days and Hours of Operation

HNCCCC is open from 7:00 A.M. to 6:00 P.M., Monday through Friday, fifty-one weeks per year except for specific holidays and scheduled closings.

Ages Served

Children ages six weeks to five years of age are served through this program. Children are grouped according to the following age categories:

Infants: Six weeks to 15 months (up to 18 months as needed)

Toddlers: 16 months to 35 months (range of 31 to 35 months as needed)

Preschoolers: three to five years of age (as young as 31 months as needed)

We are licensed for a capacity of 50 full time children. The infant program is licensed for 12 children, with a ratio of one caregiver for every four infants. The toddler program is licensed for 13 children, with a ratio of one caregiver for every seven children. The preschool program is licensed for 25 children, with a ratio of one caregiver for every ten children. The ratio of children to caregivers is in effect at all times during Program operation and children are never left unsupervised.

Staff Qualifications

In accordance with the Minnesota Department of Human Services (referred to as DHS in this handbook), all staff will meet or exceed the required qualifications and continuing education. By adhering to the requirements for staff development and maintaining proper staff to child ratios, it is our belief that we maintain an environment which facilitates the emotional, social, physical, intellectual, and spiritual development of each child.

Licensure Status

Holy Nativity Christian Child Care Center is licensed by the State of Minnesota through the Department of Human Services and, therefore, complies with the Child Care Regulations presented in MN Statute 9503 (Rule 3). If parents wish to contact the Department of Human Services, Division of Licensing, the number is 651.431.6500.

Data Privacy and Parental Consent

Records concerning your child, i.e. enrollment forms, health records, observation records, and written parent-teacher conferences reports and all other information about your child, is confidential information and will only be accessible to you, the director, your child's teachers, and a person designated by the state licensing department to review our records for licensing purposes.

If at any time an outside party is deemed necessary to observe or work with a child (of any age) at the Center, parental/guardian consent is always required before any action can be taken. This includes behavioral and

cognitive assessments, as well as observations done by students or other early childhood professionals. A special consent form would be given to parents in any such instance. Parental consent is also needed for field trips and any special activities outside of the Center.

Enrollment

Enrollment Procedures

Once your family has decided to enroll your child at Holy Nativity Christian Child Care Center, you will be asked to fill out the Enrollment Form and pay the necessary fees. A non-refundable registration fee of \$50.00 and a two-week non-refundable tuition deposit is due at the time of enrollment. This deposit will guarantee your child's spot and is to be credited toward the first two weeks of the child's attendance. Further tuition payments are due bi-weekly from the time the child starts, in accordance with the tuition schedule.

Intake Meeting

Before your child's first day at HNCCCC, parents must arrange an appointment with the Director to further visit the center, meet the teachers, and discuss the needs of the parent and child. This will serve as a time to get acquainted with the Center and the daily activities and routines of your child's classroom. At that time the Director, teachers, and parents will work together to develop a plan to meet the individual needs of each child. All enrollment paperwork, including a Health Summary and Immunization Record signed by your child's physician, are to be completed before your child's first day at HNCCCC and can be obtained during this intake meeting.

Classroom Placement and Transitions

Children are placed in classrooms according to age (see above), developmental milestones, and space availability in accordance with the Department of Human Services licensing requirements. When it is time for your child to move onto the next classroom, you will be notified by the Director and will receive a Welcome and Transition packet from her.

Programming and Curriculum

Program Plan

The infant, toddler, and preschool teachers have each written a program plan for their rooms.

A Program Plan consists of:

- Each teaching team's philosophy of education for their room;
- Goals, objectives, and activities that will help the children develop intellectually, physically, socially, spiritually, and emotionally;
- A daily schedule for the classroom; and
- A comprehensive Child Observation and Assessment Plan.

This plan is located in the Director's office and is available for parents' inspection at anytime. If desired, a copy of the program plan will be e-mailed to you. Talk with your child's teacher or the Director to look at the plan.

The Preschool Room has a full preschool curriculum available to all three to five year old children.

Daily Program

Our curriculum and activities are guided by the document *Developmentally Appropriate Practices* from the National Association for the Education of Young Children.

When your child arrives at the Center, they will be greeted by a staff member and given the freedom to get adjusted to the environment. During the day, your child will experience various learning activities through interest centers, small and large group situations, and play. Other than scheduled snack, lunch, and nap times, the daily program will change with the addition or deletion of curricular events. The daily schedule and corresponding lesson plans will be posted in each room outlining all planned activities and events. Some events in the daily program can include:

Quiet	Active	Teacher-Directed	Child-Initiated
Puzzles Manipulatives Books Sensory Table Water Table Art Center	Dramatic Play Centers Balls Jump Ropes Bean Bags Slides Blocks Riding Toys Tunnels Shovels/Buckets	Music Stories Calendar Weather Show and Tell Jesus Time Art Projects Large Muscle Meals Extracurricular Classes	Dramatic Play Blocks Manipulatives Books Sensory Table Water Table Puzzles Art Center Science/Math Center Riding Toys

A teacher is always nearby to lend support when needed. A teacher will help your child when they momentarily lose control of materials, equipment, or even emotions. A teacher is always nearby to answer a question, offer a challenging statement, or make an asked for suggestion – always keeping in mind each particular child’s current level of achievement, interest, ability, and needs.

Child Observation and Assessment

At Holy Nativity Christian Child Care Center (HNCCCC) we use a variety of assessment tools to continuously monitor and support your child’s development in all areas of learning. Tools include, but are not limited to: observations (both formal and informal), anecdotal notes, developmental checklists, and informal work sampling. Constant interaction with the children allows teachers to appropriately assess their skills and developmental levels, as well as their interests and needs. Our curriculum and activities are then modified based on these assessment results to meet the needs of individual children. In addition, our assessment results indicate areas where HNCCCC will plan program improvement.

During all times the Program is operating, teachers are observing and evaluating your child’s development. They take time to notice your child’s areas of success and areas that need improvement, making notations about these on your child’s daily note and in their teaching records. These observations and anecdotal notes are then used to formally evaluate your child’s development on their individual developmental checklist. Your child’s teacher will take the time daily and/or weekly to share informal observations that they have made about your child and their development, and often ask for help or insight from your child’s home life.

Developmental checklists help teachers observe, record, and evaluate children’s skills and knowledge. The checklist reflects common behaviors and expectations in our classroom and is closely linked to the developmentally appropriate activities that our program offers. Program activities are added, deleted, or changed based on how individual children and the group are performing and enjoying said activities.

Each of these assessment tools will be administered in your child’s classroom with their primary teachers. It is important that children are able to participate in assessment in an environment that is familiar and comfortable to them. If the results of these assessments indicate a need, HNCCCC will work along with the family to arrange for a developmental screening or referral for diagnostic assessment for the child. This possibility will be communicated to families in a sensitive, supportive, and confidential manner. You will be provided with documentation and explanation for the concern, as well as suggested next steps and resources for assessments. Results of all assessments will be kept confidential and will remain stored in the Center’s locked Director’s office.

Biannually (Spring and Fall), we will sit down with you and talk about your child’s achievements and accomplishments during our Parent/Teacher Conferences. During these conferences, teaching staff will share with you your child’s completed developmental checklist, observation notes, and some samples of your child’s work in their portfolio. At this time, we would also like for you to bring observations about your child’s development at home, as well as any questions or other relevant information you would like to discuss. We strive to provide communication to all families in a manner that is sensitive to family values, culture, identity, and home language. This is a time to talk both about what your child has learned in our Program, as well as what they have to look forward to!

Referral for Screening

As Early Childhood Educators, we continually monitor the development of all children in our care through ongoing observation and recording. We want the best outcomes for all children. Early childhood educators are considered a primary referral source for early intervention under federal IDEA special education law. We are required to refer a child in our Program who has been identified as having developmental concerns or a risk factor that warrants a referral as soon as possible, but in no case more than seven days after the identification. While this is a mandate, we want to keep open communication with parents and caregivers about their child and any concerns we have before a referral is made. We can assist the parent with the referral or partner with them in the referral process. We make our referrals to Help Me Grow (MN) either online or via phone (1.866.693.GROW).

Arrival, Departure, and Transportation of Children

Security Card Access

Upon enrollment at Holy Nativity Christian Child Care Center, families will be given two security cards: one each for a child's mother and father. No cards for grandparents or other family members will be given out unless they are the legal guardian of an enrolled child. No person shall be admitted to the Center building without their security card or without direct access by the Director or another staff member at the Center. If you lose your security card, there will be a ten dollar (\$10.00) replacement fee.

Daily Arrival Procedures

Upon arriving at the Center, you are fully responsible for your child until you have physically brought your child to your child's classroom and greeted your child's teacher. Upon entering the building, the parent and a toddler or preschool child should continue to the Muscle Room to place all hats, mittens, jackets, snowpants, boots, etc. in your child's outdoor cubby. Allow your child to put away as many of their own belongings as possible. You should then continue on to your child's room and sign your child in on the attendance sheet provided on the clipboard on each classroom's Parent Information Center outside of their classroom (the infants' is in their classroom). At this time, you are also to fill out the top portion of a daily note for your Infant or Toddler child. Be sure to identify, in writing, who will be picking your child up that evening, especially if it is someone other than a parent. If you have other special information, be sure to leave a note in the space provided. Place their daily note in their mailbox or on their Infant cubby. Continue to your child's classroom to put away any items in their classroom cubby (such as blankets, extra clothes, etc.) and then after your child is ready for the day, greet your child's teacher. This creates a pleasant transition from home to the Center and ensures that you have informed us that your child has arrived for the day. If you wish to share any information with the teacher, this is the time to do that.

Daily Pick-Up Procedures

When you pick up your child at the end of the day, please be sure that you sign your child out on the attendance sheet. Let your child's teacher know that they will be leaving the Center. This ensures that your child has a smooth transition from the Center to home by daily communication between your child's teacher and yourself. If the children are on the playground, please pick up your child through the doors from the Preschool Room or the large muscle room and be sure to tell the teachers that you are leaving with your child. Do not pick them up over the fence or by the parking lot. We believe that it is the parent's responsibility to verbally say good-bye to the staff before leaving with their child each day. If your child is involved in a play activity when you arrive, help us be consistent by reminding your child to clean up whatever activity they were involved in. Please take home your child's art projects, soiled clothing, and other necessities each day.

Late Pick Up Fees

If you arrive at the center after 6:00 P.M., your key card will not work. **At this time you will owe a a baseline late fee of \$10.00 PLUS \$1.00 for every minute past 6:00 P.M. that you are late,** payable directly to the teacher. If you know you are going to be late, please call the Center and leave a voice mail or talk with a staff member. **If you are late on a continuous basis, we will need to discuss if our Center can meet your child care needs.**

The following steps will be taken if you are over fifteen minutes late in picking up your child from the center:

1. Continue trying to contact the parent at work, home, or the location listed on daily sheet, (6:15 P.M)
2. Call an emergency number located on your child's registration form and have that person pick up your child, (6:30 P.M.)
3. Staff will notify the Director while they continue to contact the parent,

4. If after one hour there still has been no contact with a parent or an emergency contact person, the New Hope police will be called (7:00 P.M.)

Authorization to Pick-Up Children

No child will be released to a person **not authorized** by a parent to pick up their child. On your child's medical emergency card there is a section in which to list persons authorized to pick up your child from day care. Only those persons are authorized to pick up your child. If an alternate pick-up is necessary on a non-emergency basis, it is your responsibility to inform your child's teacher and/or the Director, in writing on your child's daily sheet, each time a special pick-up is needed. If someone arrives to pick up your child and they are on your child's authorized pick-up list, but you have not informed us of this change, you will be called to verify that they are allowed to pick up your child that day. This alternate person will also need to show identification.

Transportation of Children

In the event that a child or group of children is to be transported away from the Center (i.e. for a field trip; during an emergency), steps are taken to ensure that parents are aware of the circumstances and that all children are accounted for before, during, and after the transport. Parents are to sign permission slips for every field trip their child takes, as well as blanket forms for impromptu walking field trips and in instances of emergencies. Before, during, and after every transport, a head count of all the children is taken, to ensure that every child is accounted for every step of the way. Children are taught basic pedestrian and rider safety, and those rules are enforced. During all times of transport, adequate child-adult ratios are kept and adults are to be completely aware of the children for whom they are in charge. If special transport is needed for a child with a disability, those arrangements are to be made with the Director.

Custody Arrangements

When parents do not reside in one household, the parent listed on the registration form will be considered the child's primary parent. All communications about the child will be with the primary parent.

The Center will abide by all court-ordered custody or visitation arrangements. Please share those orders with the Director when appropriate. She will ensure all staff members are aware of the limits around access to the children. If, however, there is no such order, the Center must remain neutral on all issues relating to the custody dispute, and—by law—we cannot restrict access to the child or their records from either parent.

Tuition, Credit, and Absence Information

Holy Nativity Christian Child Care Center is a non-profit organization that relies solely on the tuition payments made by each family. It is essential that fees be paid promptly and regularly. All fees must be paid for the days your child is registered to attend.

Tuition Information

A list of current tuition rates can be obtained from the Director. There are different tuition rates for each of the following classrooms: Infants, Toddlers, and Preschoolers. Tuition rates are reviewed periodically and are subject to change. Parents will be given a 60 day written notice before revised rates become effective. Not included in tuition are fees for field trips (including Preschool summer swimming lessons) and catered hot lunch. Participation in those events are paid for at an extra cost to parents.

Method of Payment

Tuition payments are made in advance of service. Fees are due bi-weekly on Mondays, in accordance with the tuition schedule provided to you by the Director. Checks are made payable to **Holy Nativity Christian Child Care Center** or **HNCCCC**.

Parents who wish to use bank to bank transfers for their tuition payments may do so by completing and returning an ACH Authorization Form to the Director. We use Vanco Payment Services for ACH payments. There is currently no fee for families to use this service. Please see the Director for more information.

The Center does have a contract with Hennepin County Human Services Department to provide child care for low-income families; however, it is the responsibility of the family to maintain their family's eligibility in the county program in order to avoid a hold on their account or termination of care. For more specific information, contact the Director.

Late Payment Fee Policy

If your child's tuition is not paid by the first Wednesday of the pay period, a late fee will be incurred. A fee of 10% of the total amount due will be added to your child's invoice. In the event that a family's account falls behind by two weeks, the child will not be allowed to continue at the Center until all tuition is paid. A \$35.00 fee will be charged to your tuition account if a tuition payment is made by a check that is returned for non-sufficient funds.

Holidays

Tuition will remain the same during periods that contain Center closings for holidays, weather, and staff inservice days. The Center is closed on the following days: Good Friday, Easter Monday, Memorial Day, July Fourth, Labor Day, Thanksgiving and the day after. The Center will also close for three Staff Development days per year, one in the Spring and two in the Fall. The Center will close early (5:00 P.M.) for our Annual Family Picnic and Annual Christmas Program; look for those days to be announced in the list of annual Center closings. **Regular weekly fees remain in effect during these holiday weeks.** The Director reserves the right to add days of closing, depending on the days of the week holidays fall on that particular year.

Furthermore, the Center will be closed the week between Christmas and the New Year. The Center closes after business hours the day before Christmas Eve and reopens the first federal business day after January 1st. Please see the below section labeled *Tuition Credit* for information on tuition during this time.

Tuition Credit Policies

Full tuition payments are due each week regardless of your child's attendance due to illness, vacation, holidays, and unforeseen closings of the Center. Our expenses and bills are still due even when your child does not attend, and tuition money is our only form of income. However, exceptions will be made for the following scenarios (all at the discretion of the Director):

1. **Unforeseen Circumstance:** In the event that an unforeseen circumstance closes the Center (i.e. snow day, major building maintenance, etc.) tuition will still be billed at the weekly rate unless it is for an extended length of time (three days or more).
2. **Sick Credit:** In the event that a child is absent for more than one week due to a severe illness or hospitalization, the sick credit rate of half your child's weekly rate applies for the second week of illness and beyond.
3. **Vacation Credit:** Children enrolled on a basis of twelve months per year receive two full weeks of vacation credit during their anniversary year. Families that are enrolled for less than full time twelve months per calendar year for any reason will not receive any vacation credit. The family will, however, be granted the tuition credit (*see below*). Disclaimers:
 - Vacation credit can be used in units of five (5) or ten (10) consecutive days.
 - Vacation credit must be requested two weeks in advance, via written notice to the Director.
 - Your tuition account must be current before vacation credit can be used.
 - Children must be absent from the Center during the time vacation credit is used.
 - Unused vacation credit will not be credited by the Center.
 - Vacation credit is not cumulative from year to year.
4. **Tuition Credit:** Each December the Center will be closed for a Christmas Break. Regardless of start date, all families currently enrolled will be credited one full week of tuition.

Extended Absences and Maternity Leave

If a parent wishes for an enrolled child to take an extended leave of absence (defined as four or more consecutive weeks), including "taking the summer off" or staying home with parents for maternity leave, in order for the child's spot to be saved while they are away, tuition for that time will be billed at half of a child's normal tuition. Choosing not to pay this "holding fee" or follow this policy will result in the child's spot not being saved for their eventual return, and the possibility exists that there will be no space for them. Arrangements are to be made with the Director for any extended absence, and these are not guaranteed.

Termination of Care

A two-week written notice must be given to the Director when parents wish to terminate care. Failure to comply with this policy will result in the assessment of a fee equal to two week's worth of tuition.

Guidance and Discipline Policy

Behavior Guidance

In guiding young children, our goals are to help children feel good about themselves, to help children develop self-discipline, and to help them learn to consider the needs and desires of other people. Discipline and behavior guidance used by each teacher will be constructive, positive, and suited to the developmental level of each child. In order to do this, we use the following guidelines in working with children:

1. The environment is prepared so that there are enough choices of activities and enough materials available to prevent arguments over them. Within this environment, our first step in guidance is to always model appropriate behavior for the children.
2. Rules are stated as clearly as possible and in a positive way. If a child acts inappropriately, the child is told what they should do, rather than dwelling on what they should not do. Clear and precise reasons and explanations are given for why a child is to do something. Our first action is to redirect a child to an appropriate behavior or activity. If necessary, and as a last resort, we will remove a child from the situation. A child is never threatened, hit, or shamed.
3. Choices are given only when a choice really exists for the child, but encouragement is given to the child to make decisions.
4. Cooperation is emphasized and competition is minimized.
5. It is important for children to know that it is okay to have positive and negative feelings. We help the child label and deal constructively with feelings.

Children will never be subjected to physical punishment, punishment for lapses in toilet training, or emotional abuse. This includes, but is not limited to: rough handling, hitting, shaming, using language that frightens the child, shouting at, and threatening. No child will be left unsupervised, or withheld food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior. Other than to physically hold a child when containment is necessary to protect a child or others from harm, we will never use physical or mechanical restraints in dealing with a child.

Although separation from the group will be used as a last resort, it may happen at times. If your child is separated from the group, it will be documented on a Separation Log. If your child is separated from the group three or more times in one day, the parent will be notified and it will be documented that you were notified. If a child is separated five or more times in one week or eight or more times in two weeks, a special meeting will be set up with the parent, the teacher, and the Director to determine how the behavior should be handled. Children ages six weeks to 16 months are not separated as a means of behavior guidance.

Biting Policy

Our program recognizes that biting is, unfortunately, not unexpected when toddlers are in group care. We are always upset when children are bitten in our program, and we recognize how upsetting it is for parents. While we feel that biting is never the right thing for toddlers to do, we know that they bite for a variety of reasons. Most of these reasons are not related to behavior problems. Our program, then, does not focus on punishment for biting, but on effective techniques that address the specific reason for the biting. When biting occurs, we have three main responses:

1. Care for and help the child who was bitten
2. Help the child who bit learn other behavior
3. Work with the child who bit and examine our program to stop the biting

Our teachers express strong disapproval of biting. They work to keep children safe and to help the child who bit learn different, more appropriate behavior. We do not and will not use any response that harms a child or is known to be ineffective.

We give immediate attention and first aid to children who are bitten. We wash the wound with soap and water and put ice on the affected area.

When children are bitten, their parents are informed personally that day. We will not, however, tell you who has bitten your child. If the bite is on the face or has broken the skin, we will call you during the day to inform you that a particularly noticeable bite has occurred on your child. You are then to alert your doctor, in case they have any precautions they would like you to take. In either scenario, biting is always documented on our standard incident report form. It is completed and signed by the teacher and must also be signed by you. The form is then kept in your child's file and a copy is given to you as well.

When we experience ongoing biting, plans are discussed between the teachers and the Director with specific strategies and techniques to help combat the biting. We will always keep the name of the child who bit confidential to avoid labeling of the child and to give teachers the opportunity to use their time and energy to work on stopping the biting.

Toys from Home

We ask that toys from home not be brought into the Center, except for specific Show and Tell Days or other specific events. The staff is not responsible for items lost or broken. Children may bring in comfort items for naptime as needed.

Dismissal of a Child

We believe that parents and teachers must work together to deal with persistent behavioral issues such as biting and unusual or dangerous aggression. Anytime a child appears to be unusually stressed, anxious, or otherwise motivated to engage in negative behaviors, a meeting will be called to discuss further options for working with your child. We will make every effort to provide a program that meets the needs of each child.

However, sometimes it may be impossible to meet the needs of a child and family. If after working with the child and family, we do not believe it is in the child's best interest to remain at the Center, we will ask the family to make other arrangements for care. The decision to dismiss a child from the Center shall be at the sole discretion of the Director.

The Director may require a parent to take their child out of the Program if the parent refuses to follow the policies as described in this handbook.

Our Partnership with Parents

Program Communication

Daily Reports: Daily reports are filled out for each Infant and Toddler and are to be picked up by the parents when they come to pick up their child. These reports include information about your child's food intake, sleeping patterns, diapering or toileting, and general behavior. They also include something special that your child did that day and/or important information that you need to know. In the Preschool Room, there is space for parents to write notes on the daily sign-in sheet, and teachers write a daily summary on the white board on the parent communication center.

Daily Communication: Each day, parents and staff are encouraged to partake in informal conversation and communication during child drop off and pick up times. Please bring any special needs or information to the attention of your child's teacher at that time. In turn, teachers will assure that this information is heard, recorded, and followed as needed throughout the day.

Newsletters: The Parent Newsletter is distributed on a monthly basis. Copies of the newsletter will be emailed to the parent email addresses that we have on file. These newsletters have designated information for each classroom, as well as information from the Director. We highly encourage you to read the newsletter for any new or special events planned for that month.

Conferences: Formal conferences are offered twice a year for all of the classrooms, once in the Spring and once in the Fall. These conferences are optional, but we do encourage you to sign-up to discuss your child's growth and development. During these conferences, your child's physical, social, emotional, intellectual, and spiritual welfare will be discussed. A written conference form will be filed in your child's permanent file here at the Center, and a copy will be given to you. If at any time you feel that you need a conference with your child's teacher, or the Director, please feel free to call them and set up an appointment. If your child's teacher feels that an unscheduled conference is necessary, they will call you and set up an appointment with you.

Special Events: Periodically during the year, special events will take place at the Center. These events include, but not limited to: a Christmas Program, a Summer Family Picnic, a Preschool Graduation, and Mother's and Father's Day activities. We also have special events for just the children. All of these activities are outlined in the lesson plans and newsletters, and more specific information is given out as they arise.

Parent Input

We want to maintain open communication at all times with the parents of our enrolled children. We encourage you to give us feedback on our program and planned activities. At all times we hope you will feel free to speak with any of us about a concern or complaint. Please speak to the teachers directly in order to settle a situation or grievance. If you cannot find resolution at this point, please speak to the Director. We wish to serve you in the best way possible. Your input and needs are important to us as we try to provide the best possible care of your child. If at any time you wish to visit the Center to see your child, please feel that you are always welcome.

We have an “open door” policy at the Center. You are welcome to visit your child at any time during the day. In addition, please feel free to call or email at any time to speak with the Director or your child’s teacher. We will make every effort to notify you via phone, email, or written communication whenever a situation arises that we feel you should be aware of. If needed, we will ask adults to translate or interpret communications between parents and staff. Please do not call or text staff on their cell phones with information regarding your child. Non-work related communication with staff must be done when staff is off the clock.

To help keep the Center running at top efficiency, a written evaluation will annually be given to parents to fill out. This evaluation will be an assessment of the Center’s physical environment, the Center staff, the program, health and safety, and discipline procedure.

Parent and Family Support Services and Programs

Program staff are familiar with specialized family, child, and support services, and programs. A list of these services is provided in the Parent Resource Book on the table in the foyer. Included in the Parent Resource Book are services for: physical, speech, and occupational therapies; behavioral, cognitive, and special needs services; Children’s and Families’ Basic Needs services; Medical, Dental, and Assistance Programs; and Robbinsdale School District 281 ECFE, early childhood screening, and Kindergarten Enrollment, as well as Wayzata School District 284. If needed, culturally and linguistically appropriate services will be suggested and used as appropriate.

In the event that a child needs behavioral, cognitive, and/or other special needs services, program staff will work cooperatively with parents to identify and establish relationships with outside agencies. Program staff are willing to locate and contact these agencies, and to attend meetings and perform observations as deemed necessary by the agency. At all times, parents are encouraged and supported to make the primary decisions about services that their children need, and encourage parents to obtain needed services. Staff will be there to support and encourage your efforts.

Grievance Procedure

During the course of your child’s attendance at HNCCCC, there may arise a problem that the parent feels should be corrected. The parent is to bring the problem first to the co-teacher of their child’s room. If the problem is not resolved to the parent’s satisfaction, the problem is to be presented to the Director. The goal of these discussions is to resolve the problem. However, if a resolution is not reached through this procedure, the parent may discuss the problem with the Holy Nativity Lutheran Church Senior Pastor. The Pastor will evaluate the grievance and make a final decision as to the plan of action. The entire grievance process is to take no longer than two (2) weeks to make a final resolution.

Parental Permission for Field Trips and Chaperones

Periodically throughout the year, the Preschool children will go on field trips. Written parental permission for these trips will be obtained before the children leave the Center. Children will be transported via school bus, public transportation where available, and by walking. A fee is required for the cost of the field trips. Please remember that if you decide not to send your child on a field trip, you must make alternate arrangements for their care while their class is gone. The Center cannot provide care for those children not attending a field trip.

Our goal for our students is to experience the world in the safest manner possible. When traveling on a field trip away from our school, it is our goal to have a minimum of one (1) adult per four (4) children from the preschool room, whenever possible (except when adult tickets are restricted by theatre or agency). When signing up to chaperone one of our field trips, you can expect to be visually responsible for several other children besides your own. The children should be monitored at all times within sight and sound of chaperones, and holding hands whenever appropriate moving from one location to another. If a parent has

repeated difficulty monitoring a child, bring it to the immediate attention of a staff member. If you feel that you are unable to fulfill these responsibilities, bring it to the immediate attention of your child's teacher.

Please note that you will never be asked, nor responsible, for taking a child to use the restroom. We do not conduct background checks on parent chaperones, so only teachers are allowed to care for the most personal needs of the children. Parent chaperones are also not to be left alone with any child other than their own. Please remember that when you chaperone a field trip, you are responsible for helping maintain visual contact with the children; for that reason we ask that you do not talk on or use a cell phone, PDA, etc.

Since parent chaperones are imperative to the success of field trips away from the Center, parent chaperones are only charged a ticket/entrance fee (when applicable); they are not charged for use of the bus.

Research and Public Relations

The Center will obtain written parental permission before each instance of a child being involved in experimental research or a public relations activity involving a child while at the Center. The permission form is kept in the child's record.

Our Expectations for Parents

As professional educators, we strive to meet and exceed your expectations. Listed below are expectations that we have of you as parents in order to provide the best quality care for you and your family.

1. Make sure that you sign your child in and out on a daily basis.
2. Read all materials that are sent home with your child. These include: daily notes, newsletters, emails from the Director, and anything that is posted in/outside of your child's classroom or on the Center white board.
3. Provide the following items for your child on a daily, weekly, or as needed basis: blankets, at least three changes of seasonal clothes, and personal care items (i.e.: diaper ointments, sunscreen, diapers, etc.).
4. If your child is ill, coming in late, or not at all, make sure that you call your child's teacher to let them know, preferably by 9:00 A.M. Similarly, families are expected to reply to all communication attempts made by the Center.
5. Attend parent-teacher conferences when they are offered. If you have questions or concerns about your child, do not hesitate to ask for a conference with your child's teacher.
6. Keep the Center up-to-date on changes in any Emergency Information (new phone numbers, addresses, etc.), new allergies to foods or medications, and immunizations.
7. Your child is your responsibility while you are in the Center. Make sure that you know where they are at all times.
8. Help your child learn respect for staff, families, equipment, materials, and you by modeling that behavior yourself.

Health and Safety Policies and Procedures

Physical Examinations and Immunizations

HNCCCC must comply with the Minnesota State Immunization Law regarding immunizations and regular physical examinations. The Health Care Summary Form must be signed by your health care source and be on file at the Center on the first day of your child's enrollment.

Written verification of immunization for D.P.T., polio, measles, rubella, mumps, HIB, Hep A, Hep B, and PCV must be presented to the Director prior to the first day at the Center. It is required that the Health Care Summary Form be updated and given to the Director as children move to a new classroom within the Center (i.e.: infants to toddlers).

If you, as a parent/guardian, conscientiously oppose certain or all immunizations, you are to obtain the signature and public stamp of an authorized notary public. This is to be documented on your child's Child Care Immunization Record and provided to the Center before your child's first day of admission. Furthermore, in the instance that a vaccine-preventable disease to which children are susceptible occurs in the Program and your child is not immunized against said disease, your child will be promptly excluded. The length of exclusion is to be determined by the State Health Department.

Standard Exclusion Policies of Ill Children

In order to minimize the spread of illness, HNCCCC has developed an illness exclusion policy for all families to follow. When children arrive at the Center, the teachers greet them and do a quick assessment to

determine that the child is healthy. If during the quick health assessment the teacher feels that the child is ill and should not be at the Center, the child will have to be taken home and exclusion guidelines followed. If your child becomes ill or has to be excluded from the Center according to the HNCCCC illness exclusion policies, you will be called to pick up your child. HNCCCC requires that you pick up your child within ONE (1) HOUR of being called. If your child is not picked up within one hour of you being contacted, we will then call the emergency contacts listed on the child's emergency contact form in their file. **In addition, the late fee of \$1.00 per minute and baseline fee of \$10.00 will be assessed if you not picked your child within ONE (1) HOUR of being called.** *If your child is sent home for any reason during the day, they automatically cannot return the entire next day. Twenty four hours means an entire next day, not 1:00 to 1:00.* Parents are encouraged to establish a plan for back up care should their child be ill or become ill while at the center.

Certain symptoms in children may suggest the presence of a communicable disease. If a child has to be excluded for the possibility of a communicable disease or the certain presence, he/she can return:

1. If a doctor has certified that the symptoms are not associated with an infected agent; or
2. The symptoms have subsided and the guidelines in the policies have been followed.

HNCCCC will exclude children with one or more of the following symptoms:

1. **Reportable Condition**—One that the Commissioner of Health determines to be contagious.
2. **Illness**—One requiring more care than the program can provide without compromising the health and safety of others.
3. **Fever**—Axillary (under the arm) of 100 degrees or higher. Your child must be excluded from HNCCCC for a minimum of 24 hours fever free without the aid of medication.
4. **Diarrhea**—If the number of diarrhea episodes cause excessive handling (defined as three or more abnormally loose stools during the previous 24 hours). Your child may return to HNCCCC after stools are back to normal without medication or after 24 have elapsed since the last diarrhea stool.
5. **Vomiting**—One episode. Your child may return to HNCCCC 24 hours after vomiting stops.
6. **Eye Drainage**—Abnormal drainage from child's eye. We will ask that a physician's exam rules out pink eye or other infectious diseases. Your child may return to HNCCCC with a physician's note ruling out an infectious illness. If your child is diagnosed with pink eye, he/she may return to HNCCCC after 24 hours of administering medication. Furthermore, HNCCCC will require a new prescription with each incident of pink eye.
7. **Abnormal Rash**—If your child has an abnormal rash, HNCCCC will require a physician's exam to rule out a contagious illness. Child may return with physician's approval.
8. **Unusual Color of Skin, Eyes, Stool or Urine**—HNCCCC will require a medical exam to rule out an infectious disease. Child may return with physician's approval.
9. **Lethargy or Unusual Behavior**—If your child is unable to participate in daily activities of HNCCCC (including outdoor play time). Your child may return when normal activity level resumes.
10. **Respiratory Symptoms**—Labored, rapid breathing, or severe coughing; child makes high pitched croupy or coughing sound after they cough or child is unable to lie comfortably due to continuous cough. Your child may return when coughing is under control.

Communicable Disease Policy

Parents are asked to notify the Director within 24 hours if their child has been diagnosed with any communicable disease. The Director will notify all parents when the children in the program have been exposed to a communicable disease. The Director will notify the Commissioner of Health within 24 hours when any illness or condition specified by law is present in the Center.

Specific Disease Exclusion Guidelines

Please note: when it states "until fever is gone", you are to abide by the 24 hour fever free without the aid of fever-reducing medication rule. Also, if we as Center staff do not believe your child to be well enough to participate in routine activities (including outdoor play), we have the ultimate authority to exclude them from attending or send your child home, even over a doctor's opinion. A child who is put on prescription medication for a bacterial illness must be on that medication for 24 hours before returning to the Center. Exceptions are (always at the discretion of the Director): recurrent ear infections (without a fever) and those on long term health care plans (asthma, etc.).

ACUTE BRONCHITIS/ BRONCHIOLITIS

Until fever is gone and the child is well enough to participate in routine activities.

CAMPLYOBACTERIOSIS	Until diarrhea has stopped.
CHICKEN POX	Until all the blisters have dried into scabs; about six (6) days after rash onset.
CONJUNCTIVITIS (PINKEYE)	Bacterial – until 24 hours after treatment begins. Viral – until a letter from a physician is provided to verify that the child does not have bacterial conjunctivitis.
CROUP	Until fever is gone and child is well enough to participate in routine activities.
CRYPTOSPORIDIOSIS	Until diarrhea has stopped.
CYTOMEGALOVIRUS (CMV)	No exclusion is necessary.
DIARRHEA	Generally, until stool returns to normal form. Each specific disease situation needs to be evaluated on an individual basis.
E-COLI	Until two stool cultures obtained at least 24 hours apart have tested negative for E. coli O157:H7.
ENTEROVIRAL INFECTION	For children with diarrhea and/or vomiting, until diarrhea and/or vomiting has stopped.
FIFTH DISEASE	No exclusion is necessary.
GIARDIASIS	For those with diarrhea only: Until the child has started treatment and diarrhea is no longer present.
HAEMOPHILUS INFLUENZAE TYPE B (Hib) DISEASE	Until the child has been treated and is well enough to participate in routine activities.
HAND, FOOT, AND MOUTH	Until fever is gone and child is well enough to participate in normal daily activities (sores may still be present).
HEAD LICE	Until first treatment is completed and no live lice are seen (nits are NOT considered live lice).
HEPATITIS A	Consult with your local or state health department. Each situation must be looked at individually to decide if the person with Hep A can spread the virus to others.
HEPATITIS B	Children who have the Hep B virus in their blood may attend childcare unless they have unusually aggressive behaviors (e.g. biting), oozing sores that cannot be covered, or bleeding problems.
HEPATITIS C	Children who have the Hep C virus in their blood may attend childcare unless they have oozing sores that cannot be covered or bleeding problems.
HERPES, ORAL INFECTION	Until those children with a primary infection who do not have control of their oral secretions no longer have active sores inside the mouth. No exclusion necessary for children who have recurrent infections (fever blisters or cold sores).
HIV/AIDS	See HIV fact sheet on pages 105 - 106 of the Hennepin County Community Health Department Epidemiology and Environmental Health infectious disease handbook.

IMPETIGO	Until treated with antibiotics for 24 hours and sores are drying or improving.
INFLUENZA	Until fever is gone and the child is well enough to participate in routine activities.
LACROSSE ENCEPHALITIS	No exclusion is necessary.
LYME DISEASE	No exclusion is necessary.
MEASLES	Until four (4) days after the rash appears.
MENINGOCOCCAL DISEASE	Until the child has been on appropriate antibiotics for at least 24 hours and is well enough to participate in routine activities.
METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS (MRSA) COLONIZATION AND INFECTION	If draining sores are present.
MOLLUSCUM CONTAGIOSUM	Children with visible lesions should not participate in close contact activities such as wrestling or swimming.
MONONUCLEOSIS	Until the child is well enough to return to routine activities.
MUMPS	Until nine (9) days after swelling begins.
PERTUSSIS	Until five (5) days after appropriate antibiotic treatment begins.
PINWORMS	Until 24 hours after treatment has been started.
PNEUMOCOCCAL INFECTION	No exclusion is necessary.
PNEUMONIA	Until fever is gone and the child is well enough to participate in routine activities.
RESPIRATORY INFECTION (VIRAL)	Until fever is gone and the child is well enough to participate in routine activities.
RESPIRATORY SYNCYTIAL VIRUS (RSV) INFECTION	Until fever is gone and the child is well enough to participate in routine activities.
RINGWORM	Until 24 hours after treatment has been started.
ROSEOLA	Provided that other rash illnesses, especially measles, have been ruled out, the child may return when the fever is gone.
ROTAVIRAL INFECTION	Until diarrhea has stopped.
RUBELLA (GERMAN MEASLES)	Until seven (7) days after rash appears.
SALMONELLOSIS	Until diarrhea has stopped.
SCABIES	Until 24 hours after treatment begins.
SHIGELLOSIS	Until 24 hours after treatment with antibiotics has been started and diarrhea has stopped.

SHINGLES (ZOSTER)	None, if blisters can be covered by clothing or bandages. If blisters cannot be covered, people should be excluded until the blisters have crusted.
STAPH SKIN INFECTION	While draining sores are present.
STREPTOCOCCAL INFECTION (SORE THROAT, SCARLET FEVER, PERIANAL CELLULITIS)	Until 24 hours after antibiotic treatment begins and until the child is without fever.
TUBERCULOSIS	Consult with the local or state health department.
VANCOMYCIN-RESISTANT ENTEROCOCCI (VRE) COLONIZATION AND INFECTION	No exclusion is necessary.
VIRAL GASTROENTERITIS	Until diarrhea and vomiting have stopped.
VIRAL MENINGITIS	None, unless the child has a fever, diarrhea, or is unable to participate in routine activities.
WARTS	No exclusion is necessary.
YEAST INFECTION (THRUSH/DIAPER RASH)	No exclusion is necessary.

Medication Administration and Storage

1. Prescription Medication

No prescription medication will be given without written authorization from the child’s physician or dentist. Medication can be given only as prescribed. We can only use prescription medication that has your child’s name and current prescription information (name of doctor, prescription number, name of medication, date dispensed, and instructions for use) on the label. This includes vials for nebulizers. Please bring all medication in the original box with a legible label. These directions must be followed as prescribed. If there is an expiration date on the label, the medication will not be given beyond this date. Parents must write medical instructions on the Prescription Medication Authorization/Administrative Form and sign it before a teacher can administer ANY medication.

2. Nonprescription Medication

We follow manufacturer’s directions on all medications, unless differentiating instructions are accompanied by a doctor’s authorization. This means that Tylenol (and the like) need to be accompanied by a doctor’s authorization for children under two years of age. Parents must write medicinal instructions on the Non-Prescription Medication Authorization/Administration Form and sign it before a teacher can administer ANY medication.

3. Physician’s Notes

Prescriptions and doctor’s notes are only good for two weeks and for each separate instance of needing the prescribed medication. If your child needs to be on medication longer than two weeks, we will need a new doctor’s note or an Individualized Child Care Plan (see the following).

4. Individualized Child Care Plans (ICCP)

If your child needs to be on a long-term health care plan (i.e. severe allergies; asthma; special needs), we will need the doctor to complete an ICCP form. These forms need to be updated every year, or sooner if your child’s prescription changes. An individualized care plan will be coordinated with either the service plan, education plan, and/or with the physician, psychiatrist, or psychologist. The parents must be involved and approve all aspects of the planning. In order for a HNCCCC staff member to be involved in an IEP (Individualized Education Program) or IFSP (Individual Family Service Plan), the parents MUST request their presence.

If your child should swallow or eat anything that is poisonous while at the Center, the Poison Control Center will be notified immediately. The Center would then follow all directions that Poison Control would give. Syrup of Ipecac is not given at the Center.

Medication is stored in the following ways:

1. Non-refrigerated medications are stored in a sealed bucket, which is located the toddler and preschool classrooms in secure cabinets. Infant medications are stored in individual cubbies.
2. Refrigerated medications are placed in a labeled Ziploc baggie and stored in the sealed bucket in the refrigerator.

Pets

At the present time, we do not have any pets in the Center. Should any animal be considered in one of the rooms, a check of the children's files would be done to determine if there are any allergies or asthma-related problems to certain animals. Therefore, it is important that your child's file reflects any allergies or asthma-related problems with animals.

Public Health Nurse

Once a month, our public health nurse from Health Consultants for Child Care visits the Center and talks with the Director and classroom teachers. She observes program practices and reviews and makes recommendations about the program's practices and written health policies to ensure health promotion and prevention of infection and injury. If you have a concern about your child's nutritional, developmental, or physical needs, please contact your child's teacher, who will then contact the nurse for you.

Substitute Teachers and Volunteers

Every effort is made to staff the Center with our full and part time employees; however, in extreme situations, it may be necessary to enlist the help of a substitute teaching service to fulfill our teacher to child ratios. If such an occurrence arises, the Director (or staff person in charge) will call an area substitute staffing service (i.e. Teaching Temps; Teachers on Call) and request a substitute for a certain day and time. The following are a few of the parameters for substitutes that parents are to be aware of:

- A substitute will never be left alone to care for a group of children; they will only assist a HNCCCC employee in the care of the children.
- In certain cases, it will not be possible to alert parents that a substitute will be working with a group of children. Parents are to be proactive and introduce themselves to anyone present in the classroom that they do not know.
- All substitutes have cleared a background check and are trained in CPR and First Aid.

From time to time there will be volunteers at the Center. According to DHS guidelines, volunteers who have direct contact with or access to children must be supervised at all times by a staff person that meets the qualifications for director, teacher, or assistant teacher. Volunteers are given a background check and are never left alone with children, but do not have to be CPR and First Aid trained.

Emergency Procedures

Procedure Concerning Injured Children

All staff at the Center are trained in Pediatric First Aid (including management of a blocked airway) and CPR every two years. If your child receives a minor cut or abrasion while at the Center, their teacher will wash the area with soap and water, apply ice, and provide a band-aid. Any further treatment of the wound must be done at home. If your child's teacher feels that the wound requires medical attention, you will be notified. Every accident is recorded on an Accident Report Form and one copy is given to families to take home. The original copy is kept in your child's permanent file.

Accidents

If a serious accident occurs and the child requires immediate medial attention, an attempt will be made to reach the parents or the emergency contacts of the child. If none can be reached, the paramedics will be called and the child will be taken to North Memorial Medical Center's Emergency Room (3300 Oakdale Avenue North, Robbinsdale, MN 55422). A teacher will accompany and stay with the child until a parent arrives. Staff are not authorized to transport children.

Snow

Winter in Minnesota is highly unpredictable. In the event that Robbinsdale District 281 closes for dangerously cold or severe (snow; road conditions; etc.) weather, HNCCCC will have two different responses:

- In the event of a severe snowstorm and/or treacherous road travel conditions (whiteouts; widespread black ice; etc.), *HNCCCC will close when Robbinsdale District 281 closes for such weather*. Please listen for the complete closing of District 281 on WCCO 830 AM. In addition, parents may be phoned during the day and asked to pick up their child if road conditions are hazardous enough to warrant early closing of the Center, and/or if District 281 closes early (2:00 P.M.) or cancels afternoon activities (4:00 P.M.). A staff member will remain at the Center until an authorized person has picked up every child. In this instance, tuition is still due for families enrolled on that day. Please see the “Unforeseen Circumstances” bullet point under the Tuition Credit Policies for more information.
- In the event that dangerously cold weather (without significant snow or dangerous road conditions) causes Robbinsdale District 281 to close, *HNCCCC will remain open for business as usual*. However, parents are requested to use extreme caution when determining whether or not it is appropriate to bring their child to school that day. Furthermore, in order for us to best staff in such scenarios, parents are asked to call the Center in the event that their child will not be attending school that day due to dangerously cold weather.

Storms

In the event of a weather emergency such as a tornado or severe storm warning, the staff will follow the evacuation procedures listed below:

Infants - Infants will be placed into reinforced Emergency Cribs, four (4) infants per crib, and will be wheeled into the main hallway.

Toddlers and Preschoolers – All children will be escorted into the main hallway, where they will be seated against the walls and instructed to place their heads into their laps.

All children will remain in the shelter area until the Director or teacher in charge gives the all-clear signal. This signal will be determined by weather instructions given by radio station WCCO 830 AM or by the signal ceasing. A weather radio and main first aid bag will be brought into the emergency shelter.

The children are familiar with this procedure, as unannounced tornado drills are practiced once a month from April to October.

Fire

In the event of a fire at the Center or in the Church, the staff will follow the evacuation procedures as listed below:

Infants – Infants will be placed into reinforced cribs, four (4) per crib, taken out the fire exit, and proceed to the middle of the parking lot. There are three (3) reinforced cribs in the infant room.

Toddlers – All children will be escorted out the back exit door and into the middle of the parking lot.

Preschool – All children will be escorted out the main exit door and into the middle of the parking lot.

In the event that it is too cold outside or the building is being destroyed, all children will be taken to the Perrigo laboratory building (across the parking lot) where they will stay until the Director or teacher in charge gives the all-clear signal or further directions are given.

The children are familiar with this procedure, as unannounced fire drills are practiced once a month.

Chemical or Biological Terrorism

In the event of a chemical or biological terroristic attack, the **fire evacuation** procedures would be used. All children will be taken to the Perrigo laboratory where emergency personnel will give any further directions. If there is time, staff members will have their cell phones with them so emergency calls can be made after the children are secure. Also, if possible, the director will change the message on the answering machine to reflect the change in building location. Location to another building would only be done in response to direction given by Emergency Medical Personnel or other Emergency Professionals.

Pandemic Flu Policy

Our program recognizes that, unfortunately, illness among children in group care is all but certain. We take widespread preventative measures to combat illness: frequent hand washing, teaching the proper way to cover your coughs/sneezes, daily and weekly washing of all toys/equipment, extensive sick policies, etc. Sometimes, however, all those measures are not enough and an illness does infect many children and staff. In the event that there would be a pandemic flu outbreak in the Center, the following is the broad policy for

dealing with an outbreak: We will remain open as long as we have enough staff to care for the children in our care. If at any time we do not have enough healthy staff to care for the children in our Center, we will close and reopen as soon as the staff force is well enough to return (generally 5-7 days is recommended). Therefore, we encourage all parents to have back-up care in place if we are closed for any period of time. We also encourage all parents to get themselves and their children their yearly flu shots, as well as any special flu shots (i.e. H1N1). If your child does come down with influenza, the Minnesota Department of Health is recommending that you keep your child home until seven (7) days after the symptoms first appeared or 24 hours after a child's symptoms go away (whichever is longer). If at any time the State of Minnesota (i.e. Minnesota Department of Health or another government agency) calls for the closing of all Early Childhood Centers or creates a specific plan for dealing with such outbreaks, we will comply with their requests. All closings and consequences of a closing are at the discretion of the Director, who will remain in constant contact with parents via email and phone.

Safety Checks

We regularly check recall notices for toys and our cribs to ensure the safety of the children. All broken or dangerous toys are thrown away immediately.

Building Security

For the safety of our children, we take every precaution to monitor the doors that access our space, and we reserve the right to screen visitors. Please contact any staff member if you suspect the presence of any unknown person in or near our facility. Please do not allow anyone else to use your key card, and report lost or stolen key cards immediately so that they can be deactivated.

Nap and Rest Policy

Infant Naps

We believe that all infants are unique and will have varying schedules. We value flexible schedules that allow children to anticipate routine, while also establishing security and trust. To this end, infants will nap according to their sleep patterns and behavior. A record of naps will be provided to parents on a daily basis.

As the infant grows older and begins the natural transition from infant to toddler, we will work with the child to establish a more common schedule. This will include children eating together, playing together, and moving to one daily nap. As the time approaches, your child's teacher will be a guide in this process.

To ensure and uphold the highest safety standards, we implement the following procedures for our infant sleeping routines:

- Each child will be provided with a separate crib, which meets federal crib standards under the Code of Federal Regulations, title 16, part 1219 for full-size baby cribs, or part 1220 for non-full-size baby cribs.
- Each child will be provided a tight fitting crib sheet, which is laundered weekly or as needed.
- All children are placed on their backs to sleep. Documentation from a child's physician is required for an alternate sleep position, and is kept on file.
- Infants faces are to be kept uncovered at all times.
- If a child falls asleep before being placed in a crib, we must move the infant to a crib as soon as is practicable. Infants cannot sleep in swings, bouncers, or on the floor.
- The crib area is physically separate from the area with awake children and there is clear and unimpeded access for adults on at least one side of every crib.
- Teaching staff supervise the infants by sight and sound at all times, and sleep checks are conducted every five minutes.

Sudden Unexpected Infant Death

Sudden Unexpected Infant Death is defined as the sudden and unexplained death of an otherwise healthy infant less than one (1) year of age. In 1999, the Consumer Product Safety Commission, the American Academy of Pediatrics, and the National Institute of Child Health and Human Development, revised their recommendations on how to put children less than twelve (12) months of age to sleep. Their recommendation is for children of this age to sleep on their backs with no soft toys, bumper pads, or blankets in their crib.

To provide the best possible care for your child, HNCCCC recognizes the importance of placing children on their backs to sleep. While your child is enrolled here, they will be placed on their backs to sleep. If a parent desires, a child may use a "sleep sack" while they are napping in their crib. A sleep sack allows you to place

the child in the sack before going to sleep in place of a blanket. We will not allow any soft material (stuffed animals, bumper pads, etc.) or any blankets in your child's crib. If your child has a medical reason to not sleep on their back, a doctor's order stating the condition and recommendation must be obtained and placed in your child's file (*Physician Directive for Alternate Infant Sleep Position*). Placing a swaddled infant down to sleep in a licensed setting is not recommended for an infant of any age and is prohibited for an infant who has begun to roll over independently. However, if a parent wishes for an infant, who has not yet rolled over independently, to be swaddled while in our care, you must complete the written consent form (*Parental Consent for Swaddling an Infant*), and it will be placed in your child's file. Once that child rolls over independently, the use of a swaddle is immediately discontinued.

Preschool and Toddler Naps

As an alternative to noisy and involved activities, naps are an important part of the daily program. Naps in the Preschool and Toddler Rooms are after lunch, and can last from one to two hours, depending on how long each group sleeps on a particular day. We have found that most children need the rest, and will easily fall asleep within one half-hour. According to licensing regulations, a child who has completed a nap or *rested quietly* for 30 minutes must not be required to remain on a cot or mat or in a crib or bed; thus, they will be allowed to get up and do quiet activities or play in the large motor area. Our personal philosophy on naps is that we do not believe in waking a child that has fallen asleep, nor in preventing a child from taking a nap. We will not allow a child to busy themselves for their half-hour of rest time with books, toys, bothersome behaviors, etc. If you feel as though your child does not need a nap, we will not pat your child to sleep, but they must also remain quiet and lay restfully for their half-hour so that their classmates can successfully complete their own rest period or nap. While no child likes a break from play, we ask that you help your child understand that naptime is a quiet time. Please help us by referring to it as rest time. This may help your child adjust to the transition from play.

Please make sure that your child has a blanket for naptime. These blankets are to be brought home to be laundered once a week.

Toddlers and Preschoolers are supervised by sight and sound at all times, and teachers, assistant teachers, and teacher aides are aware of, and positioned so they can hear and see, any sleeping children from whom they are responsible, especially when they are actively engaged with children who are awake.

Dress for School

Daily Clothing

Think of your child's comfort and provide clothing that is free from complicated fastenings. Expect toileting accidents if the clothing cannot be removed quickly by the child or adult. Remember that messy art materials and other dirt-producing activities are part of the education for young children. Provide clothing that is washable. Dress your child in everyday clothes that you do not mind getting stained since we will not replace clothing. Think of our (rubber mulch) playground and provide clothing that is sturdy. Dress your child in sturdy shoes that allow active play; tennis shoes are strongly recommended and flip-flops/crocs are highly discouraged. Think of the changeable Minnesota weather and the fact that even though the sun may be bright and warm at 9:00 A.M., it might be cold and windy at 10:00 A.M. Provide sweaters and jackets even on the first days of spring and the last days of summer. It is much easier to remove an unneeded garment than to not allow your child's participation in the Center's activities. Provide a suitable head covering when needed. Common sense should rule. Think of how you would feel in your child's clothes when you dress them in the morning.

DRESS YOUR CHILD APPROPRIATELY FOR POSSIBLE WEATHER CONDITIONS AND CHANGES.

Extra Clothing

Parents must provide three (3) complete changes of clothing at all times in their child's cubby.

This includes socks, undershirts, onesies, underwear or panties, shirts, and pants. All extra clothing may be stored in your child's cubby unit in their classroom. If your child has soiled clothing, the dirty clothes will be put in a plastic bag, labeled, and put back into your child's cubby. Remember to bring in another set of clothes the following day. Label ALL clothing items with your child's initials. We are not responsible for lost, stolen, or misplaced items. The Center does have extra clothes for emergencies only. Repeated misuse of this policy will result in a call to have you bring in clothes for the day. Please return all extra clothing, laundered, as soon as possible.

Outdoor Play

Outdoor play is part of the program throughout the entire year on a daily basis. Children should come prepared for such activities during all seasons of the year. All children in attendance are considered well enough to participate in outdoor activities. Part of the summer program is water play. Parents should supply their child with a swimsuit and a towel daily for this activity. For sanitation reasons, we request that towels and swimsuits be brought home daily.

If the weather, air quality, or other environmental concerns do not allow us to enjoy outdoor play, we will provide similar activities inside in our large muscle room. The large muscle room is supervised at the same level as outdoor equipment and care is taken to ensure the safety of such equipment.

Specific details concerning outdoor activities during the various seasons will be communicated through the newsletter or posted in your child's room. Parents are to provide a bottle of sunscreen with an SPF of 15 or higher, for each of their children (siblings may NOT share) to use during the months of April through October. These bottles are to be labeled with your child's first and last names. While we do have a shade covering a portion of our playground, a sun shielding hat is also a good idea for those warm summer days. If public health authorities recommend it's use, only bug repellents containing DEET are used and only on children older than two months. Both sunscreen and insect repellent (no more than once per day) will be applied only with specific parental permission on the "Medication Permission Slip".

When you pick up your child for the day while we are playing outside, please make sure that you notify a teacher that your child is leaving for the day.

A good way to help your child with self-help skills is to allow them to put on their own shoes, coats, snow pants, boots, hats and mittens. Gentle encouragement from you will help your child learn to do these tasks by themselves.

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. Please heed the chart below:

Temperature and Suggested Clothing Chart

Below 10 degrees F. (including wind chill) and rainy days – we do not play outside.

10 through 40 degrees F:

- Snow pants and warm jacket
- Warm hat, hood with ties, or both
- Mittens or gloves
- Snow boots

40 through 55 degrees F:

- Warm jacket
- Warm hat or hood
- Mittens
- Snow pants (if teachers feel them necessary)
- Snow boots (if teachers feel them necessary)

55 through 70 degrees F:

- Light jacket
- Hat or hood

70 degrees F and above:

- Indoor clothing
- Hat

These are simply guidelines and individual discretion will be necessary as weather changes are forecast.

Please send appropriate clothing for outdoor play each day for each season. We will make sure your child is properly dressed with the items you supply. **Every personal belonging of your child must be clearly labeled with your child's first and last names in permanent marker on the label.** Put legible labels on **all** outer garments, including hats, mittens, and boots. If your child's clothes are not marked, it is difficult to determine whose mitten we have found.

Toilet Training

Toilet training is part of the toddler program. The toddler teachers will be a tremendous help to you while going through potty training. Talk to them about the signs of readiness and also ask for suggestions that will help you train your child. Teachers will watch for the “window of opportunity” in readiness and will suggest training when signs are given. At this time, you will have a discussion with the toddler teachers about beginning the potty training process. The process will be a success only if it is a joint effort. Continued contact between parents and staff is necessary.

The toddler staff feel strongly that children who are toilet training should wear underwear or panties (not pull-ups). Parents are asked to try one weekend in underwear at home BEFORE trying diaper-free days at school. Once the potty-training process is going smoothly and the child has grasped the idea of toileting and wearing underwear, children are to be brought to the Center only in underwear or the staff will not help train them. Parents are asked to send three or more complete changes of clothing for the child in case of accidents, including at least one pair of extra shoes and socks.

We will not hold a child back from moving up to the Preschool Room if they are not potty trained, but we do expect that a reasonable attempt has been made at home. Some children are physically not ready to be trained before three. We will work with you every step of the way to help not only the child, but the parent as well. Until a Preschool child is fully potty-trained (including during naptime), the family will continue to pay the Toddler tuition rate.

At every age, diapers and diaper ointment are provided by the parents. We provide a supply of wipes. Our diapering procedure has been reviewed and approved by our health consultant. Diapering procedures and policies are posted in all changing areas.

Meals and Snacks

WE ARE A PEANUT/TREE NUT FREE CENTER.

Please do not bring any contaminated items into the Center. This includes items that have been “processed on equipment that processes peanuts”.

Withholding of snacks or meals from children is never practiced as a method of discipline. In the same way, food is not used as a reward. Children are taught that food is something we eat for nourishment and good health.

Holy Nativity Christian Child Care Center participates in the Federal Milk Program. At all meals, whole milk is provided for Infants over one year of age and for Toddlers, and two-percent milk is provided for Preschool children. This program still needs to meet all the requirements of the Child and Adult Care Food Program (CACFP) listed below.

Toddler and Preschool Meal Pattern Requirements

CACFP homes and centers must follow meal requirements established by the USDA:

Breakfast	Lunch	Snack
Milk Fruit or Vegetable Grains or Bread	Milk Meat or Meat Alternate Grains or Bread Fruit and Vegetable (or two vegetables)	Milk Meat or Meat Alternate Grains or Bread Fruit Vegetable (2 of 5 components)

Breakfast

Breakfast is served at about 8:30 A.M. in the Toddler and Preschool classrooms. Breakfast is provided by HNCCCC and it consists of cold cereal, fluid milk, and 100% apple juice or fruit. Those children that arrive at school early in the morning will need to have eaten something before they arrive to school, as breakfast is

mid-morning. Those that arrive after breakfast has been served also need to have eaten before they come to school.

Lunch

Lunch is served at about 11:30 A.M. in the Toddler Room and 11:45 P.M. in the Preschool Room. There are two options for lunch: a cold sack lunch brought in by one’s family, or a hot catered lunch. When bringing in a cold lunch, you will need to follow the USDA nutritional guidelines as outlined above. Please bring your child’s lunch in a lunch box labeled with their first and last names and place it on the cart in the hallway. It will then be stored in the refrigerator until lunchtime. We cannot warm up any foods that are brought in; it will be served cold. A list of bag lunch suggestions can be obtained from the Director.

When choosing a catered lunch, it will be provided by Pint Size Catering, L.L.C. All hot lunches are age-appropriate and follow USDA guidelines. More detailed information about Pint Size Catering, L.L.C. can be obtained from the Director. A monthly menu is sent home a couple weeks in advance of the month, along with an order form. Each hot lunch costs \$2.00 per day. If you would like to order hot lunch, you will return the order form and check (payable to HNCCCC) by the due date indicated on the order form.

Snack

Snack is served at about 3:00 P.M. in the Toddler and Preschool classrooms. Snack is provided by HNCCCC and consists of two of the four components listed above.

Infant Meal Pattern Requirements

CACFP homes and centers must follow the meal requirements established by the USDA:

Infant Ages	Breakfast	Lunch	Snack
Birth to Five Months	4 - 6 oz. of formula or breast milk	4 - 6 oz. of formula or breast milk	4 - 6 oz. of formula or breast milk
Six to Eleven Months	6 - 8 oz. of formula or breast milk; and 0 - 4 T. of infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0 - 2 oz. cheese; or 0 - 4 oz. (volume) cottage cheese; or 0 - 4 oz. yogurt; or a combination*; and 0 - 2 T. vegetable, fruit, or both*	6 - 8 oz. of formula or breast milk; and 0 - 4 T. of infant cereal, meat, fish, poultry, whole eggs, cooked dry beans or peas; or 0 - 2 oz. cheese; or 0 - 4 oz. (volume) cottage cheese; or 0 - 4 oz. yogurt; or a combination*; and 0 - 2 T. vegetable, fruit, or both*	2 - 4 oz. of formula or breast milk; and 0 - 1/2 bread slice; or 0 - 2 crackers; or 0 - 4 T. infant cereal or ready to eat cereal*; and 0 - 2 T. vegetable, fruit, or both*
*Required when an infant is developmentally ready. All serving sizes are minimum quantities of the food components that are to be served.			

In the Infant Room, the parents are responsible for bringing in all meals and snacks for their infant. You must bring in all food, formula, and snacks. The Center has a limited and varying supply of food items such as: puffs (all flavors), cereal (Cheerios, Kix, etc.), crackers (graham, Club, saltines, etc.), fruit (peaches, mandarin oranges, applesauce, etc.), and other such age-appropriate snacks. These are given in addition to what families provide, and are not to be considered a full meal. Whole milk is provided when the child is one year old.

Infant diets are determined by the parents and infants will be fed in accordance with written dietary instructions by the parents, granted they follow the above USDA guidelines. If needed, parents will be coached by the Infant Teachers in proper nutrition for their Infants. Parents are responsible for informing their child’s teacher when dietary changes are made. Each new food item needs to be tried by your child

three to five times at home BEFORE being brought into the Center for use. An Infant Parent Foods Consent Form is to be filled out each time your child is to have a “new” food item at school. These forms are kept on file in the Infant classroom.

Bottle Preparation Guidelines and Nursing Mothers

Guidelines for preparing bottles at home to be brought into the Center can be obtained separately from the Director.

Nursing mothers are welcome to come in during the day to nurse their infant. A private space will be provided if desired. Teachers are also very willing to support breast-feeding by handling “pumped” and pre-bottled breast milk.

Allergies

Please make us aware of any and all allergies or special dietary needs that your child has. Food allergies and special dietary needs for toddlers and preschoolers will be posted in the kitchen and will be written on the meal plan in the classroom for infants. HNCCCC is a peanut and tree nut free Center. No items should be brought into the Center that are contaminated with such items. We cannot accommodate for any other allergies, and, if needed, separate food items for children with all other food allergies will need to be provided by the parents. Similarly, special dietary needs and deviations will need to be discussed and provided for by the parents.

Birthday Parties

Children’s birthdays may be celebrated at the Center. Birthdays and special events are times when parents may want to send special treats to school, but it is most certainly not required. Health Department rules require that all items that are sent must be store bought and packaged. Food that requires special preparation, such as crackers and frosting or fruit to slice, must be sent to school in sealed containers and prepared at school. It is up to the parent if they wish to bring party favors. If party favors are brought to the Center, they will be placed in each child’s cubby to take home at the end of the day. Popsicle treats seem to be the most popular treat to bring.

If you are holding a birthday party for your child outside of the Center and wish to invite your child’s friends from school, please heed the following: invitations can only be given out at school if ALL children in your child’s class are invited. If you wish to invite only certain children, you are responsible for sending invitations to them outside of the Center. This is to avoid hurt feelings by both children and parents.

Child Abuse

All staff members at HNCCCC are mandated by state law (Minnesota Statutes 626 556 Subdivision 3) to report child abuse. This means that if they “know or have reason to believe” that a child is being physically or sexually abused or neglected, they are required by law to contact Hennepin County Child Protection Services or the county of the child’s residency to report verbally and in written form the child’s name, the name of the alleged perpetrator (if known), the extent of injuries, and the reporter’s own name.

The following is information that is required by the State of Minnesota to inform parents on how and where to report suspected child abuse or neglect. If you have any questions, please talk to the Director.

Maltreatment of Minors Mandated Reporting Policy for DHS Licensed Programs

Who should report child abuse and neglect?

1. Any person may voluntarily report abuse or neglect.
2. If you work with children in a licensed facility, you are legally required or mandated to report and cannot shift the responsibility of reporting to your supervisor or to anyone else at your licensed facility. If you know or have reason to believe a child is being or has been neglected or physically or sexually abused within the preceding three years you must immediately (within 24 hours) make a report to an outside agency.

Where to report

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

2. All reports concerning suspected abuse or neglect of children occurring in a licensed facility should be made to the Department of Human Services, Licensing Division's Maltreatment Intake line at 651.431.6600.
3. Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency at CHILD PROTECTION 612.348.3552 or local law enforcement at 763.531.5170.
4. 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.

What to report

1. Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556) and should be attached to this policy.
2. 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.
3. 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.

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 recurring maltreatment may be disqualified for employment in positions allowing direct contact with persons receiving services from programs licensed by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations.

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 is made. The Reporting of Maltreatment of Minors Act contains specific provisions regarding civil actions that can be initiated by mandated reporters who believe that retaliation has occurred.

Touch and Nurturing

Physical touching is an important part of the care and nurturing of young children. Children feel loved, accepted, and supported through the sensations of touch by nurturing adults and peers. However, physical touch should be respectful of children's body cues and only occur with their permission.

Staff members are trained to be sensitive to children's requests for physical interaction and responses. They model appropriate nurturing touches. Except for safety or cleansing, children will always have the right to refuse touch. Children are also taught to respect adults' and other children's touch preferences.

Nurturing touch is necessary for every child's emotional growth. Affectionate nurturing includes: hugging, holding on lap, rocking, carrying, rubbing or patting backs, cuddling, and hand holding. Children always have the right to refuse these touches except for safety purposes.

Personal care touch includes diapering, cleaning, dressing, feeding, and naptime routines, and is done in a gentle and respectful manner. It will also include face and hand washing, assisting with toileting, examining rashes and unusual marks, nose wiping, assisting with necessary clothing changes, and first aid treatment.

Genital areas are gently touched for purposes of cleansing and only when age appropriate.

First aid is administered by appropriately trained staff as gently as possible and always accompanied by verbal explanation and appropriate comfort.

Physical intervention occurs when necessary for the safety of children and staff, or to provide the least restrictive guidance necessary in a given situation.

Children are taught through modeling and verbal guidance to use words rather than physical interaction to settle their differences with others.

Legal Statements

Insurance Declaration

Holy Nativity Christian Child Care Center is included in the comprehensive liability policy carried by Holy Nativity Lutheran Church. Children are covered against personal and automobile accidents and injury while at the Center or on a Center-sponsored field trip through this insurance policy. The insurance coverage is in effect during the time children are signed-in at the Center.

Statement of Non-Discrimination

Holy Nativity Lutheran Church, in operating a Child Care Center, does not discriminate against anyone due to race, religion, or gender.

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination, write USDA, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call 800.795.3272 (voice) or 202.720.6382 (TTY).

USDA is an equal opportunity provider and employer.

Changes in Policies or Procedures

Licensure by the Department of Human Services sometimes requires that current policies and practices be changed at times other than January 1st of each year. Existing policies and fees are subject to change. These changes will be communicated through the monthly newsletter and mailings.

Directory of Holy Nativity CCCC Staff

Director/Teacher.....	Brittany Anderson, (c) 612.598.1708 BA in 5-12 Social Studies Teaching Minor in Confessional Lutheranism 5-12 Social Studies Teaching License Lutheran Classroom Teacher Certification
Preschool Co-Teacher.....	Sydney Lien BS in Family Studies and Human Development Minor in Special Education and Rehabilitation
Preschool Aide.....	Sally Pawlik
Toddler Co-Teacher.....	Amy Laite AA in Early Childhood (CA) Early Childhood Certification (CA) Early Childhood Certification (MN)
Toddler Co-Teacher.....	Morgan Franz AA in Early Childhood Education AA in Biblical Studies
Infant Co-Teacher.....	Paula Majkozak BS in Child Psychology, emphasis in Family Studies
Infant Co-Teacher.....	Rachel Crane AA in Child Development
Infant Assistant Teacher.....	Jennifer Franz AA in Biblical Studies
Floating Teacher.....	Melinda Neuenfeldt BA in K-12 Physical Education and 5-12 Health Teaching Minor in Confessional Lutheranism K-12 Physical Education and 5-12 Health Teaching License Lutheran Classroom Teacher Certification
Floating Teacher.....	Marhea Harris BS in Early Childhood Education Birth-3 Early Childhood Education Teaching License
Floating Aide.....	Adam Franz AA in Biblical Studies
Floating Aide.....	Lexy Spilde