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Mission Statement

We believe children should be "nurtured then taught."

Little Learners provides a secure, nurturing, and educational environment for children. A place for children to bloom into responsible, considerate, and contributing members of society.

Little Learners wants all children to have the opportunity to grow physically, emotionally, socially, and intellectually by playing, exploring, and learning with others in a fun, safe, and healthy environment.

As a family-owned and operated company, Little Learners welcomes positive family involvement. We encourage a family-teacher approach, where every child comes first to experience the benefits of excellent early childhood education and school readiness programs.

Note from Sarah, aka Director and owner

Shortly before the birth of my 3rd child, I made a decision that affected not only myself but also many aspects of my family's life. I ended a career in human resource management and community relations. After spending years at Target Corp as an Executive Team Leader and Community Relations director, as well as District Management for Limited Brands, I left the comforts of a corporate career to accomplish my personal goals and focus on my health and family. With a degree in psychology and Management with a minor in human resources, I knew I could do it. This has been one of the most fulfilling life changes I have ever made. I realize that making a positive difference in children's lives is an amazing gift I can give every day. My goal is to send kind, caring, and compassionate individuals into this world so they can make a difference one day.

After seven years in licensed home childcare, where I served 14 kids daily, I decided to broaden my love and knowledge to more children. I wanted to offer the same loving atmosphere of my home childcare offered to more children daily. I tried to provide all the benefits of home childcare in a childcare center space. It takes a good amount of work and loving dedication to offering that same service to many more children on a childcare level. I am confident that you will find Little Learner's Child Care Center and its talented staff to be an extension of your loving home.

Finding quality and loving childcare was an important issue to me as a working mother, and I understand why it is so important to you.

Little Learner is an exciting opportunity that provides safe, quality child care to the Annandale Community through quality school readiness care value-added services, outstanding customer service, and high-quality staff.



Hey Moms & Dads, Excellent childcare starts with YOU!

Do you realize you play a significant role in ensuring your child's positive learning experience? Your efforts to appreciate your child's teachers can make more of a difference than one might think! Our most powerfully impactful families are those who strongly attempt to communicate and participate in our classrooms and frequently recognize teachers' efforts. Our childcare families are integral to our success here at Little Learners Child Care! And just as you are thankful for the best possible care, we are grateful for highly supportive families. It does take a village to raise a child!

Most early childhood educators do what they do because they love children and enjoy making a difference. But our teachers often wish parents knew a bit more about what they do here daily. Our Teachers:

- Typically work a 10-hour day
- · Greet children, soothe tears, and possibly listen to and find solutions for a concerned or upset parent
- Maintain safety & constant supervision while also meeting the requirements of childcare licensing
- Feed, diaper and bathroom children, and nap them according to a wide variety of parent wishes
- · Teach curriculum to groups with limited attention spans while meeting social, emotional, & physical standards
- Take children outdoors, weather permitting, but must plan for inadequately dressed or undersupplied children
- Communicate with parents via Brightwheel and in person
- Host conferences twice each year and observe children's growth and milestones
- Prepare newsletters/events
- Plan future curriculum and purchase classroom supplies within a budget
- Complete required documentation of items such as feeding, sleeping, diapering, and daily headcounts
- Document the cleaning and disinfecting of toys and equipment and ensure all are in working order
- Document injuries and inform parents when their child has hurt another
- Ensure first aid supplies & medicines are adequate and not expired
- Ensure other staff are trained on emergency medical procedures and special needs plans for enrolled children
- Maintain privacy of individuals
- Although they are not doctors or nurses, they must be prepared for medical emergencies
- Must know the responsibilities of being a mandated reporter and watch for signs of abuse or neglect
- Must be vigilant about allergy awareness and dietary needs and be prepared to use EpiPen if needed
- Must be informed about authorized/non-authorized pick—ups for a long and constantly changing list of families
- Balance varied skills and abilities of many children while teaching in one classroom
- Meet the needs of one child who requires a few extra hugs while simultaneously meeting the needs of another who may be displaying rude, unsafe, or even violent behaviors
- Balance expectations & priorities of families from different ethnic, religious, & economic backgrounds knowing some families place emphasis on curriculum while others place more emphasis on nutrition or sanitation
- Must encourage participation from some families that have little interest in classroom involvement or feedback
- Must be prepared for unscheduled fire/storm drills at any moment and in any weather condition
- Operate in a licensed occupation, therefore, must be prepared for inspection by the Department of Human Services, the Department Food and Safety, State and Local Fire inspectors, and a licensed health nurse
- Must take up to 40 hours continuing education each year, In addition to classroom work and on personal time

When families understand the challenges teachers face, it can prompt them to offer support and patience. We hope that all Little Learners Families will consciously be on board with supporting our staff in their efforts and applied them for their amazing work!

The following table shows examples of parental practices that distract from classroom learning. You can also read inspiring examples of parental practices that have made our Little Learners staff feel appreciated and supported. Many of these positive examples are based on experiences with some highly supportive families that help us meet our mission of "Where home child care nurturing meets center teaching...we believe should be nurtured then taught". We hope you strive to be yet another highly supportive Little Learners Family!



Opportunities for Little Learners families to positively impact our childcare day	Example #1 Parental Practices That Distract From Learning This family is rushed and unaware of much childcare has to offer. They don't ask many questions. They have little communications with staff and don't take the time to get to know them. They don't feel it is their responsibility to become a part of their child's success and don't see the long-reaching benefits of contributing to their child's classroom	Example #2 Highly Supportive Parental Practices This supportive Family understands that by empowering teachers they are helping their own family as well as others. This family is fully engaged and participative at events and their child is thriving and growing in childcare. Staff feels comfortable communicating with this family who is understanding and willing to listen to concerns.
Drop-off & pick-up times	Child arrives sleepy with disheveled hair Child is rushed & sad at drop-off time Parent remains on cell phone at drop off Mentions someone new will pick up child that day. Neglects to add that important info on Brightwheel Does not seek feedback about child's day	 → Child arrives well rested, tidy & ready to learn. → Parent chats, smiles at, greets staff, and puts child's things away ensuring they are correctly labeled. → Although this parent communicated in person they also repeat important information via Brightwheel message to ensure all staff can read and review later if needed → Seeks feedback about child's day and offers support at home
Preparedness	Child is unprepared for the weather Unprepared for show-n-tell day or activity Belongings are not labeled Take-home folder overflowing unchecked Forgot to bring diapers for the last 3 days Ran out of extra clothing or its too small	→ Child prepared for the weather → Prepared with all needed items for the day → Belongings are all correctly labeled with first and last name → Frequently reviews classroom calendars & take-home folder/mailbox/backpack → Willing to donate extras for families that may have forgotten
Communication	 Does not know how to use Brightwheel App Unaware of details for special events Feels irritated when staff does not tell them what is planned If child receives behavior reminder, parent feels the intent was parent shaming them Feels helpless. Unwilling to work with staff to improve behaviors that happen at school. Does not ask for suggestions. Unaware of teacher's names. Refers to child's teacher as "that blond girl that works in Jonny's room" May feel that staff does not like their child 	→ Reads & responds to Brightwheel messages daily → Comfortable addressing small or large concerns → If child receives behavior reminder or parent has a developmental question they address it by asking for suggestions. Trusts staffs training and experience in dealing with similar behaviors & knowledge of developmental milestones. Follows through on advice, and reports back on what they see at home → Knows child's teachers by name & takes time to learn a bit about them personally → Is confident their child and their family is valued by staff
Your child has a slight cold with no fever	 ☑ Gives child Tylenol & sends to childcare ☑ Fails to inform staff of cold symptoms or timing/dosage of medication ☑ Unprepared for early pick up if symptoms worsen later ☑ Failed to update staff regarding recent phone number change 	 → Allows child to sleep in, drink some water, & eat a bit → Notifies staff of child's mild symptoms via Brightwheel so that any staff caring for child can be aware of symptoms. Lists specific dosage instructions if medication is to be offered at care → Prepared for who will pick up the child if symptoms worsen
Child is missing a sweater, the 2 nd clothing item that has gone missing	 ✓ Uncomfortable addressing concerns & fails to mention missing items. Remains Irritated. ✓ Failed to label belongings Passively allows upset feelings to fester without giving staff the opportunity to find solution. Eventually is aggressive in tone. 	 → Messages best way to reach parents if symptoms worsen → Finds Brightwheel photo from yesterday when child last wore the sweater to show staff what is missing → Asks staff to look for item that was properly labeled → Understands keeping track of dozens of children's belongings can be challenging. Thanks staff for searching.
Gratitude	Demands that child follow special schedule & is upset when staff does not follow it precisely Does not often thank staff Does not feel a personal investment into the cohesiveness of the childcare center. Makes teachers feel that they cannot please this family and that their efforts are wasted.	→ Flexible with child's schedule. Does not expect staff to change classroom routine or upset schedules of the group to meet their child's needs → Frequently tells staff in person and via messaging how impressed they are with all their child has learned A difference maker in this childcare, this family is highly appreciated. Their gratifulds makes to school progressed and
Participation in special events Volunteerism	Unable to attend special events during the work day and makes no effort to have another special adult come in their place Does not volunteer to help at class parties, for special reading times, or offer to help donate items to special events	appreciated. Their gratitude makes teachers feel engaged and prompts them to do even more next time → An adult is present at each special event. Understands it means a lot to their child & that staff may need help → Offers to help with games at summer parties → Willing to donate to special events knowing donations help make these memorable events affordable and possible → Thanks staff for offering special events for their child. Cherishes the fun memories their child is making → Inspires other families to participate more & inspires teachers by appreciating everything they do!



At the time of enrollment, parents/guardians are provided with this information, including the Emergency preparedness plan. This handbook included our enrollment forms, emergency contact information, health, and immunization forms, and the child's personal information, such as eating, sleeping, toileting, and comfort measures. Please inform us of any childcare program needs your child may have so we can best provide for them while attending our program. The packet contains enrollment and tuition agreements, late payment and termination policies, and our program plan. Parents are offered an annual review of those and program plans.

Open Door Policy

Please remember that you are always welcome here. We have an open-door policy and encourage parents of enrolled children to stop by and visit. Please be considerate of the schedule and activities during visits.

During the day, in conjunction with our lockdown/safety precautions, they could be locked when classroom doors are shut. The children will be able to get out, but you will need to knock to get in. Please knock on the door if you need to enter when the door is shut.

Members of the general public and prospective families are expected to make an appointment before visiting our facility as a safety precaution for the children in care.

Childcare Providers

All providers are on the websites. Any new hires will be introduced on Brightwheel and added to the website. Please get to know the providers, as they will play a key part in your child/ren's life. We try our best to keep the same providers in the rooms, but staff sometimes needs to be adjusted due to staffing.

Children Ages Served

Little Learners is licensed by the MN Dept of Human Services to operate a childcare center. The rules and regulations governing us include local regulators such as food ordinances and city, fire, and health inspectors. National policies such as OSHA, USDA, ADA, IDEA, and childcare accreditation standards also affect our operations. You may access these rules and regulations via individual entities. We care for up to 116 children aged six weeks to 8 years.

Transitioning children

We consider the floor plan/layout of the building and development when transitioning children into rooms. We partner with families when we feel like a child is ready to transition out of a room. Families are given information about the new room and staff and can visit and ask questions before the move. We allow a two-week transition period that can slow down or speed up based on the child's adjustment and development. The child's age is part of the reason to transition but is not the final factor, except for infants out by 16 months due to licensing requirements.

24 in our Infant Garden (1-4 ratio),	0-1 (6 weeks to 15 months),
16 in our 1's Jungle Safari (1-7 ratio unless infant present)	1-2 (16 months- 24 months),
21 in our 2's Forest (1-7 ratio)	2-3 (20/24 months to 36 +(working on potty training)
20 in our "Preschool Circus" (1-10 ratio)	PreSchool 3-4 33(fully potty trained) months to the first day of kindergarten
20 in our "Owl" ays learning Preschoolers (1-10 ratio)	Pre Kindergarten 4-5 (first day of kindergarten)
15 school-agers included before/after and breaks)	First day of kindergarten through 10 years old



Adjustment Period

Initially, your child will be enrolled on a two-week trial basis. Both staff and parents will use this time to discover if your child fits comfortably into our childcare center. You can use this time to ensure that you are happy with our services. If this arrangement is not mutually satisfactory, either parent or Little Learners Child Care director may terminate the arrangement during this trial period. We require a full two-week notice of termination to end your contract with us (anytime after the two-week trial period). You will be required to pay your normal weekly tuition for two weeks. This notice must be in writing and must specify an exact termination date. Because tuition is due on Mondays, if you give notice of termination after Monday, we will require two further payments in addition to the week you have already paid for.

Example: You pay tuition, as usual, Monday, August 1st. You give written notice of termination on Wed. Aug 3rd. You will be obligated to pay tuition on Monday, Aug 8 & Monday, Aug 15.

Little Learner's Child Care reserves the right to terminate this contract and stop providing care for any child based on the needs of the group as a whole.

Policy Information

- 1. Little Learner's Child Care Hours of licensed operation: 6:30 am-5:30 pm. We do not contract care after 5:25 pm as all children need to be out of the center by 5:30. Each family is contracted for several hours. We allow a window of 15 minutes for drop-off before we expect a phone call or message about you being late. If your drop-off or pick-up time needs to change, please contact Sarah W. We schedule staff to meet the needs of our families in advance. If we do not hear from you within 30 minutes of the scheduled drop-off time, we assume you no longer need care for the day.
- 2. If your child will not attend on a particular day, please notify us via Brightwheel. If you cannot be here by your scheduled drop-off time, please notify us by calling the center phone or brightwheel. If your children are not here within 30 minutes of your scheduled time without notification to the center, we assume you do not need care for the day, and your children will not be admitted. After two no-calls no, show we assume you no longer need care, and care will be terminated.
- 3. Advance notice is appreciated for any doctor/dentist or other appointments for your child where your drop-off/pick-up time may vary.
- 4. Be sure to let us know if someone else will pick up your child. Make sure the person knows that we will be asking for identification. Your child will not be released to anyone else without proper authorization.
- 5. We understand that circumstances beyond your control may arise, and we will do our best to work with you during these times. Let us know if you have pick-up or drop-off issues, and we will try to work with you.
- 6. Please leave treats/ candy/ breakfast snacks, toys, and books at home or in your vehicle! While comforting to your child, these items can be very upsetting to the rest of the group and can be life-threatening to children in care due to allergies.
- 7. Our educational methods are simple. We believe children learn through PLAY. We believe learning should be fun, and it does not always take shape and form of a classroom. We focus on school readiness through the *Parent Aware* program. We teach taking turns, sharing, and being kind to others. We aim to make it fun to learn. Nutrition and physical exercise are cornerstones of our program.
- 8. We ask that parents are always with their children at arrival and departure times. Please hold your child's hand during those times to ensure safety in the parking lot and when entering or exiting our building. NO CHILDREN ARE ALLOWED TO BE ANYWHERE IN BUILDING WITHOUT PARENT or GUARDIAN



- 9. Our policy is always to apply sunscreen to exposed skin during summer unless we have a signed parental waiver opposing sunscreen application. Please apply before drop off to ensure proper coverage
- 10. Parents/Guardians/Authorized Pickups must check their children in and out daily via Brightwheel
- 11. Our Child Care Program Plan is always available for parents to review. We welcome the input and suggestions of parents at all times. We encourage and sincerely welcome any suggestions you may provide.
- 12. Our program mandates that children are supervised at all times. Little Learners has evaluated and assessed risks associated with the care of our children and have created a risk assessment plan located in the office and available to you.
- 13. No drop-off will be allowed during blackout times (please reference each room's schedule)
- 14. Payment is required to be made before care. No Pay N Play. If a payment plan is not arranged within a week of late payment, care will be suspended immediately

Daily Schedule and Hours of Operation

Monday-Friday, 6:30 am-5:30 pm.

Our daily schedule will be structured but flexible enough to allow choice and spontaneity. Our routine will also vary from winter to summer. During the summer months, we will plan to spend more time outdoors. All children in the waddler, toddler, and preschool rooms and up are required to be in their rooms by 8:15. Drop-offs after this time are very disruptive to the group and are not allowed unless there is previous approval from room staff. Drop off/pick up during nap/rest times need prior approval.

Preschool 2

7:00 am-7:30 am Breakfast 7:30 am-8:15 am Free choice

8:15 am-8:40 am Circle Time **NO DROP OFFS**

8:40 am-9:30 am Curriculum/Centers 9:30 am-9:45 am Bathroom

9:45 am-10:30 am Outdoor time (Weather permitting)

10:30 am-11:00 am Music & Movement

 11:00 am-11:15 am
 Book

 11:15 am-11:30 am
 Bathroom

 11:30am-12:00pm
 Lunch

12:00 am-2:30 pm Book/Nap time/Quiet ActivityNO DROP OFFS/PICK UP

2:30 pm-2:45 pm Indoor structured activity (math/science)/bathroom

3:00 pm-3:30 pmAfternoon Snack3:30-pm-4:45 pmWalk/Table Activities4:45 pm-5:30 pmCombine/Gym

5:30 pm Pick up time for all families

Preschool 1

7:00 am-7:30 am Breakfast
7:30 am-8:30 am Building/Sensory

8:30 am-9:00 am Curriculum/Circle Time **NO DROP OFFS**

9:00 am-9:30 am Art

9:30 am-10:00 am Gym/Manipulatives/Free Play

10:00 am-10:15 am Bathroom/Snack

10:15am-11:30/45am Outdoor time (Weather permitting)

11:45am-12:00pm Bathrooms 12:00pm-12:30pm Lunch



12:30pm-12:40pm Story time/quiet reading

12:45pm-2:45pm Nap/quiet activity NO DROP OFFS/PICK UPS

2:45pm-3:00pm Bathroom 3:00pm-3:30pm Afternoon snack

3:30pm-4:00pm Indoor structured activity (math/science)

4:00pm-5:00pm Fenced area

5:300-pm-5:30pm Bathroom/Combine/Gym

Toddler Room

Approximate Time Activity
6:00am-7:30am Arrival, Free Play

7:35am - 8:00am Breakfast 8:00am-8:15am Diapers/Bathroom 8:15am-9:30am Fence/Walk

9:30am-10:30am Free art/Stations/Diapers 10:30am-10:50am Group Time/Gross Motor 10:50am-11:30am Wash hands/Lunch 11:30am-12:00pm Free Play/Sensory/Bathroom

12:00pm-2:30pm Nap NO DROPS OFFS DURING THIS TIME

2:30pm-2:50pm Art/Sensory/Diapers 2:50pm-3:15pm Afternoon snack 3:15pm-4:00pm Fence area/walk

4:00-pm-5:30pm Small group activity/Diapers/Gross motor/Gym

Waddler Room

7:30am-8:00am Breakfast 8:00am-8:30am Diapers /Free Play

8:30am-9:00am Group

9:15am-10:145am Outside (weather permitting)/gross motor

10:15am-11:00am free play/art/wash hands

11:00am-11:25am Lunch

11:25am-12:00pm Diapers/Free Play

12:30pm-2:30pm Nap NO DROPS OFFS DURING THIS TIME

2:30pm-3:00pm Table Activity/Art Activity/Sensory

3:00pm-3:30pm Snack 3:30pm-4:00pm Fence area

4:00pm-5:30pm Free Play/Diapers/Merge/pick up

Infant Room

6:00am-7:00am Arrival and free play

7:00am-7:30am Breakfast

7:45am-9:00am gross motor/diaper change/

9:00am-10:30am Nap NO DROPS OFFS DURING THIS TIME

10:30am-11:00am Quiet gross motor, art and stories

11:00am-11:45am Lunch

 11:45pm-12:15pm
 Clean up/Diapers/Free play

 12:15pm-1:00pm
 Walk/outdoor play/gross motor

1:00pm-2:30pm Nap NO DROPS OFFS DURING THIS TIME

2:30pm-3:00pm Puzzles/art/reading/quiet activity

3:00pm-3:20pm Snack

3:30pm Free play/stories 4:00pm Diapers

4:00pm-5:30pm Free play/reading/pick up

individual attention, including lots of time for talking. The body position of non-mobile infants and their location in the center will be changed frequently. We provide safe open spaces for children who are creeping and crawling. Infants and toddlers will be encouraged to play with a wide variety of safe toys and objects and have a wide range of motion.

^{*}Each age served/room has a more specific schedule to follow (posted in each room and located in the Child Care Plan).

Infants and toddlers (children under two years of age) will have a flexible schedule that reflects the child's individual needs. They will be given individual attention, including lots of time for talking. The body position of non-mobile infants and their location in the center will be changed



Activities

While not imposing beliefs on others, seasonal art projects and songs will reflect holiday themes. We celebrate the following occasions: Christmas, Valentine's Day, Easter, Halloween, Thanksgiving, and other minor holidays. If your family has different religious beliefs or traditions, we encourage you to share them with us, and we can discuss adding them to our celebrations.

If your child would like to bring a treat to share for their birthday, please provide enough for all children in their room. WE REQUEST NO LARGE CUPCAKES(mini is ok). We will have a small celebration with songs and games.

Please see attached Daily Activities for more specifics.

I will plan activities and provide children with a variety of experiences. Some of the activities will include:

- □ Language development: Books, music, story-time, fingerplays, flannel board stories
 □ Large muscle skills: Balls, hula hoops, bean bags, swinging, outdoor play
- ☐ Small muscle skills: Arts/crafts, stringing beads, pegboards, blocks
- ☐ Creative expression: Dramatic play, puppets, music/instruments, flannel board
- ☐ Self-help skills: Assist with mealtime preparation, dress self for outdoors
- ☐ Literacy skills: Books, storyboard, alphabet, writing center, and writing games

The staff and program will provide activities that are both quiet and active, teacher-directed and child-initiated.

PLAY is the major component of our program. Your child will be active both indoors and outdoors. Your child must be dressed in comfortable, washable play clothes that adapt to food spills, paints, and water play. Enough time, materials, and space will allow children to explore the world around them actively. Children will be able to use various art materials and manipulative and housekeeping equipment.

Birthdays

If your child would like to bring a treat to share for their birthday, please provide enough for all children in their room. WE REQUEST NO LARGE CUPCAKES(mini is ok). All food items must be store-bought and age-appropriate for the class. Check with classrooms on preferences or ideas. We will have a small celebration that will include songs and games.

Outdoor Play

Regular physical activity has important health benefits. Weather permitting, daily outside play is provided. Going outside offers an environment that encourages exercise and a different setting. For infants and toddlers, getting dressed to go outside is valuable one-on-one time for teachers and children. Being outside reduces the spread of infectious diseases.

Our outdoor guidelines for healthy development, children including infants, should go outside when:

1. Weather seems comfortable and when it's somewhat uncomfortable. In summer, children should wear light-colored, lightweight sun protective clothing and hats, sunscreen, play in shaded areas, and have drinking water available.

Sunscreen MUST be applied before arrival. (Excluding infants) This ensures that your children are fully protected. We will reapply after 80 minutes of sun exposure or if playing with water or sweating. The class will bring along sunscreen or reapply when going out again in the afternoon. The staff does not put sunscreen on the children in the morning before going out. To give extra protection, please provide a sun hat. Families must supply sunscreen; if they do not, we will apply the center's sunscreen

- 2. In winter, dress in warm, dry layers and play in wind-protected areas. We will use the weather humidity/wind chill/air quality guidelines.
- 3. If it's snowing, raining, or when snow is on the ground, the children wear water-resistant clothing. Snow and rain are important learning materials.



- 4. Children will go outside with runny noses, colds, or ear infections. If children cannot go outside due to illness, they cannot participate in normal activities, therefore, will have to stay home.
- 5. Children will go outdoors when weather permits daily.

We reference this chart https://health.mo.gov/safety/childcare/pdf/weatherwatch.pdf when determining the amount of time we remain outside. Our room of thumb is anything above 10 degrees when we go outside. The time outside is 1 to 2 minutes for each degree. When taking short walks, not all snow gear is used. We ensure that all exposed skin is covered except the face unless the family provides and requests. Fresh air and exercise are important to a child's health. We will carefully monitor outdoor play and provide adequate water and shade. Please be sure your child has appropriate clothing for all seasons. In addition to our fenced area, we will use the city park, school parks, and middle school fields. We transport with a walking rope or strollers. Children are only allowed to use the walking rope until they reach 2.5 and have demonstrated the ability to safely hold on to the loop (not around the wrist).

These learning goals and objectives are created to promote the physical, intellectual, social, and emotional development of the children in each age category as described in part 9503.0005, subpart 2, for which care is provided. This program was developed by a qualified teaching staff person and will be evaluated in writing annually.



Effective March 14th, 2022

Rates

Include up to 10 hours daily between 6:30 am-5:30 pm. Anything over 10 hours will be billed at \$5 and hours per kid. Rooms, not ages, determine rates.

Rates are determined by room not age	5 days	4 days	1 day	
Infants 6 weeks to 12-16 months (no part-time infants unless splitting spots) Minimum of 3 days	\$235	\$208	\$60	
Waddler 16 to after 24 months or start of potty training	\$220	\$195	\$56	
Toddler 24 months to till potty trained	\$210	\$185	\$53	
Preschooler(potty trained) 33 months to first day of kindergarten	\$195	\$168	\$50	
School Age kindergarten and older Before AND After school (4 hours daily) Before OR After School (2 hours daily) School out days/summer (meals included)	\$90 \$50 \$160		\$19 \$12 \$45	

Flexible Partial Day Rates/Drop in

(Not available to contract on infants/waddlers only on a drop in basis)

Time slots must be reserved in advance and based on availability

Toddler and up age group up to 6 hours

\$38 half day

Discounts/Charges

Parents will be responsible for the processing fees on Brightwheel. 2.9% for credit cards and \$.60 for ACH (bank payments),

- 15% discount on the oldest child in full-time families.
- Added days or hours not added two weeks prior will be billed on a drop-in rate
- Late charges will be accessed at \$10 each day payment is not paid to start Tuesday morning.
- Room rates will change after a successful transition period of 2 weeks.
- A. All enrolling children will have a one-time registration fee of \$50. Max for a family enrolling at the same time is \$75. Non-refundable. \$150 to hold a spot, \$100 will go towards your first week's tuition costs and is NON-REFUNDABLE
- B. All enrolling families must pay for their child's week of care in advance. This is non-refundable. We have a "NO PAY, NO PLAY" policy.
- C. Payments are to be made electronically (ACH) or by credit card on Brightwheel.
- D. Payment is made weekly unless previously arranged. The parent's responsibility is to ensure that the total amount is paid on time regardless of bank or billing service. Please check with your bank to ensure the correct amount is coming out, or check on Brightwheel. Invoices are sent out every Sunday with future charges.
- E. Your weekly payment is due every Monday morning by 1010, regardless if your child is in care that day.
- F. Late payments will be assessed as \$10 for each day that your payment is late.
- H. You will be charged \$35.00 for each "hold" placed on your check for insufficient funds. You will be expected to pay cash until the hold is removed from our bank.
- I. We ask that you are respectful of our hours. We charge a late fee of \$10.00 per child for arriving anytime after your scheduled pickup time. If you are more than 10 minutes late, we begin charging \$1 per minute/child. a.



Example 1. you have two children and arrive 9 minutes late; you will be charged \$20. b. Example 2. If you have two children and arrive 15 minutes late, you will be charged \$30

- J. Rates are subject to change. You should expect a rate increase annually of 3-5%. You will be notified one month in advance of all rate changes.
- K. We receive payment for 52 weeks of the year regardless of whether your child is present. This includes your child's sick days, vacation days, holidays, childcare closure days, etc.
- L. Our staff will conduct parent conferences twice annually, including a written assessment of a child's intellectual, physical, social, and emotional development.
- M. Occasionally parents will use Little Learner's Center staff for "babysitting" services outside our Center. Little Learner's Child care center claims no responsibility for staff or their actions while they are not "on the clock" at our center. Parents are to use their judgment and discretion while choosing babysitters. Little Learners will not share opinions or information concerning employees with families.
- N. Oldest child discount of 15% is given to full-time families with multiple children.

Auto billing is a benefit but, like other systems, is not perfect. Please touch base ASAP if you would like to dispute or correct charges that are not coming through. It's the parent's responsibility to ensure all charges are paid correctly and promptly.

O. End-of-year tax and child care flex info can be found in Brightwheel billing.

Rest and Nap Policy

Each child will nap or rest as appropriate to their age and stage of development. Each child will have their own clean and separate bedding/cot. Infants sleep in cribs with individual bedding. Quiet time for older children consists of resting, coloring, or reading. Naps and rests are provided in a quiet area that is physically separated from the children engaged in an activity that will disrupt a napping or resting child.

A few things regarding napping in group care with toddler preschool

- o In group care, all the children need to be provided with an uninterrupted nap/rest time. As passionate as you are that cutting a nap will solve your problem, other families believe a nap is what prevents their problems (the tricky part in group care is working with lots of different families). Some kids transition out of naps times earlier than others...we follow their cues and then transition away from them. In the past, we have worked with families to shorten naps or provide quiet activities for their awake children, but most families see a change when they find a consistent routine...sometimes routines take time.
- Based on licensing and policy, if a child rests(wakes) for 30 minutes, we will provide a quiet activity.
 Most of the children in our center still nap until they head to kindergarten.
- We follow the child's cues, allowing them to fall asleep if tired.
- While the children rest/nap, staff must take breaks, prep, and clean. Keeping children awake is not feasible in our environment as staff needs this time to function.
- o Children can be very emotional and constantly struggle more without a good nap.
- Lots of research about the importance of sleep. Below are a few examples. Like any stage your child will go through, these things can be tough

https://raisingchildren.net.au/toddlers/sleep/understanding-sleep/toddler-sleep

$\underline{https://www.babycenter.com/child/sleep/napping-2-to-3-years_7672}$

While I understand your frustration with the nighttime routine, we, unfortunately, can not keep children awake at rest time. We can do our best to have the last one fall asleep(if not a safety concern) and wake them up after 1.5 hours.



Cribs and cots are placed so there are clear aisles and unimpeded access for both adults and children on at least one side of each piece of napping and resting equipment. Cribs and cots are placed directly on the floor and are not stacked while in use. Children in non-infant rooms are welcome to bring a labeled blanket and a small pillow with a removable pillow case to use during rest and nap time. Blankets will be sent home each week to be laundered. Infants may not sleep with a blanket as mandated by DHS Licensing until they are 1. Separate crib sheets are provided for each infant in care. Crib bedding is washed by our staff every week. Bedding or blankets are always washed if soiled or wet.

All children 16 months and up will be sleeping on cots. The waddler room has a variance that allows children aged 12 months-16 months to sleep on cots.

A child who has completed a nap or rested quietly for 30 minutes must not be required to remain on a cot. This child will be offered a quiet activity.

Every infant is provided with a crib. The cribs are checked monthly for safety and are made of sturdy construction that conforms to the code of federal regulations.

Reduction of risk of sudden unexpected infant death:

- ☐ Each infant will be laid to sleep on the infant's back unless we have documentation from the infant's physician directing an alternative sleeping position. We do not have to accept the note if it's against licensing or we are uncomfortable
- The physician directive must be on a form approved by the commissioner and remain on file at the licensed location.
- An infant who independently rolls onto its stomach after being placed to sleep on its back may be allowed to remain sleeping on its stomach if the infant is at least six months of age or the license holder has a signed statement from the parent indicating that the infant regularly rolls over at home.
- We will place each infant in a crib on a firm mattress with a fitted sheet that is appropriate to the mattress size, that fits tightly on the mattress, and overlaps the underside so it cannot be dislodged by pulling on the corner of the sheet with reasonable effort.
- Nothing will be placed in the crib with the infant except for the infant's pacifier, as defined in the Code of Federal Regulations, title 16, part 1511.
- If an infant falls asleep before being placed in a crib, we will move the infant to a crib as soon as practicable, and we will keep the infant within sight of the staff until the infant is placed in a crib.
- When an infant falls asleep while being held, we will consider the supervision needs of other children in care when determining how long to hold the infant before placing the infant in a crib to sleep.
- The sleeping infant will not be in a position where the airway may be blocked or with anything covering the infant's face.
- Placing a swaddled infant down to sleep in a licensed setting is not recommended for an infant of any age. It is prohibited for any infant who has begun to roll over independently. However, with the written consent of a parent or guardian, according to this paragraph, we may place the infant who has not yet begun to roll over on its own down to sleep in a one-piece sleeper equipped with an attached system that fastens securely only across the upper torso, with no constriction of the hips or legs, to create a swaddle.
- Before swaddling for sleep by a provider licensed under this chapter, we will obtain informed written consent for swaddling from the infant's parent or guardian on a form provided by the commissioner and prepared in partnership with the Minnesota Sudden Infant Death Center.



Welcome baby!

As you transition your infant to group care, here are a few things to work on before the baby comes:

Feeding: Make sure your child has been introduced to and is proficient at using a bottle.

- Bottles are warmed with tap water..no more than 120 degrees..it's helpful if you follow
 this method as other methods get bottles warmer than we are able, which can result in
 infants not taking the bottles.
- Formula bottles expired after 1 hour, and breast milk after 2 hours. If your infant
 doesn't finish the bottle on the first attempt, the caregivers may try a few other times
 before the bottles expire, but the goal is to have the infant finish to deter snack feedings.

Safe sleep:

All infants will be laid to bed on their backs and can have a one-ply sleep sack and
pacifier if used. Sleeping infants MUST be in their assigned cribs. Please ensure your
infant is adjusted to sleeping in a crib (flat surface).

Eat/Play/Sleep

- To help get infants on schedules and alert them for play tummy/development time, we use an eat-play sleep schedule.
- Play(awake time) ranges from 45-120 minutes.
- Infants will be laid down awake/semi-wake to help with self-soothing and will not be fed to sleep.
- Sleep goal is to have infants nap 45-120 minutes or wake right before the next feeding.

O and A infants

Should caregivers rock/soothe a baby until they fall asleep?

• No, the gentle movement of rocking can be calming for babies. However, it's best to place a sleepy baby in a crib before they fall asleep than to rock a child until fully asleep and then place the baby in the crib. Laying a fully asleep baby in a crib risk waking the child when the rocking stops or when they sense that they are lying on a mattress and not in the adult's arms. Laying a sleepy baby in the crib helps a child learn to fall asleep on their own.

Should caregivers give a baby a bottle or nurse to help them relax and fall asleep?

Sucking is calming for most infants; however, infant formula and breast milk have added
natural sugars that can cause tooth decay, even before teeth come through a child's gum. A
pacifier is a better alternative than a bottle to help a child go to sleep.

Will keeping a baby awake during the day help them sleep longer at night?

 No, An overtired baby has more sleeping problems than a well-rested baby. Trying to keep a sleepy baby awake during the day will result in a cranky, overtired baby day and night.

Sleep is important for good health for children and adults. The amount of sleep that is needed varies by person and by age. Infants and toddlers need much more sleep than older children, teens, or adults, making daytime naps an important part of the day for young children.

Getting enough sleep is important for:

- Children's brains, including learning, attention, and memory.
- Children's behavior.
- Children's health, including prevention of obesity, diabetes, and heart disease.



Meals & Snacks

We must follow USDA nutrition guidelines. Little Learner's Child Care Center serves nutritionally balanced, high-quality food at no additional charge for enrolled families. We offer daily breakfast, lunch, and snacks. We will encourage your child to try everything, but they will not be forced to eat. Children who choose not to eat will not be served again until the next scheduled meal or snack. No separate menus will be made except under medical circumstances. Mealtime can be a valuable learning and social experience. As always, pleasant conversation and table manners will be encouraged at mealtime.

- Your child must arrive 10 minutes before the end of the scheduled breakfast time to receive breakfast and before the scheduled lunch time to receive lunch. If your child misses a meal time, you must feed them unless other arrangements are made.
- 2. Snacks will be provided at three or 3:30, based on the room schedule.
- 3. Your child may bring special treats to share with the other children on birthdays and other special occasions. However, they must provide enough for their entire classroom, and due to Health Department regulations, the treat must be commercially prepared, individual portions, and not homemade. (Bakery mini cupcakes are fine. Bakery cakes are not).
- 4. Children may have water to drink whenever they wish during the day. We will carry water jugs and disposable cups when we go on longer outings. Water Bottles are not allowed except on field trips, and water bottles must be properly cleaned and filled with fresh water at home. When water bottles are used, they will be three-stepped at the center or sent home dirty
- 5. A daily menu will be posted on our bulletin board.
- 6. We Do Not provide alternative food for family preference. If you choose not to eat what we provide, you must supply their food and follow all required meal components.
- 7. If parents choose to provide their meals, we do not provide a discount, and the meals must include all of the following per USDA requirements:
 - A. 1 Serving of fluid Milk
 - B. 1 serving of vegetables and one serving of fruit
 - C. 1 serving of protein
 - D. 1 serving grain/bread
 - E. We cannot guarantee that peanuts are not in our facility.

Breastfeeding Friendly Infant Feeding Policy

Little Learner's families feed their children the best way they see fit. For this reason, we promote and support nursing mothers by providing a comfortable space to nurse or express milk in our infant classroom. All parents are welcome in the center at any time, and accommodations will be made for you to nurse your child within the center if you'd like.

We also follow best practices when storing, warming, and serving expressed milk and formula.

Little Learner's Child Care Must follow USDA nutrition guidelines. Children will be fed formula, breast milk, milk, or nutritionally adequate solid food in prescribed quantities at specific time intervals based on each child's cues. Only breastmilk and infant formula are served to infants 0 through 6 months old until the child can sit up with little assistance.

Each child's feeding schedule will be available in the bottle preparation area. It is the parent's responsibility to prepare bottles safely. Bottles and perishables brought from home MUST be labeled with each child's first and last name.

ALL BOTTLES NEED CAPS/LIDS AND BE READY TO BE FED TO THE CHILD. Due to the number of pieces in Dr. Brown bottles that cannot be labeled, ALL Dr. Brown bottles will be sent home daily. If you want us to clean bottles and keep them here, do not use Dr. Brown's bottles.

The staff does not recommend Dr. Brown Bottles.

50 Chestnut St E. Annandale, Mn 55302 littlelearnerschildcare.ann@gmail.com



Breast Milk Guidelines: We encourage breastfeeding infants!

Please use safe practices at home when pumping and storing milk.

- 1. Wash hands, breasts, and breast pump. Express milk only after ensuring hands are clean.
- 2. Use a clean bottle or storage bag.
- 3. Fresh breast milk is safe for 48 hours if refrigerated. We are allowed to warm up breast milk once and offer it to the child within 2 hours of warmth. All unused milk will be returned to the family.
- 4. Frozen breast milk should be thawed overnight in your refrigerator. You should fill bottles with only the appropriate amount for one feeding as once feeding begins, the bottle is only safe for one hour.
- 5. Label each bottle with the child's name and be sure your bottles are immediately refrigerated once you arrive at our center.
- 7. Take your bottles home at the end of each day. We cannot clean your bottles per health and sanitation codes. Sanitation of bottles is the parent's responsibility.
- 8. Each day; you must bring in enough prepared bottles/covered sippy cups as your child usually drinks, given the period they are in care. You may bring one frozen breast milk bag and one empty bottle if more milk than expected is needed.
- 9. Breast milk is warmed in tap water under 120 degrees.
- 10. Breastmilk is only served in the infant room as safe handling is impossible in other rooms. If you choose to feed your child breast milk after 16/18, please reach out to discuss options.
- 11. When transitioning to an open up around 9 months staff with transfer amount into cup and provide a 1-1 while infant drinks
- 12. After transitioning away from bottles staff with communicate desired method of breastmilk handling/storage
- 13. Any container that holds breastmilk will be sent home to be washed.

Breastmilk Handling Policy

- ★ There will be a yellow sticker on all breastmilk bottles.
- ★ All UNUSED breastmilk from feeding will be returned to the appropriate child cooler bag to be sent home.
- ★ Freshly expressed breast milk:
 - Will be placed in the cupboard on the right side.
 - o It will have a 2-hour time stamp on it.
 - If it <u>HAS BEEN</u> used but not fully finished in 2 hours, it will be placed in the child's cooler bag to go home.
- ★ Follow the CDC Guidelines
 - Storage, and Preparation of Breast Milk (cdc.gov)

Formula guidelines

Use best practices at home to prevent illness and disease.

- 1. The formula is supplied by parents and must be commercially prepared, unopened, and labeled with the infant's name and date. The formula needs to be sent home after one month of opening.
- 2. Please provide three bottle labels with the child's first and last name to be kept at the center.
- 2. Bottles prepared at home must be capped and transported properly in an insulated bag and placed in the refrigerator immediately upon arrival.
- 3. Parents who prepare formulas at home should provide the center with a backup for unforeseen circumstances. Parents will be taking these used bottles home each day. You must wash bottles at home.

The formula needs to be sealed and unopened, and the remaining will be sent home after 30 days due to food guidelines.

Infant Food Guidelines

Each infant will decide when they have had enough to drink, and we will follow these cues. Little Learner's Child Care provides solids, following USDA Solid foods that are gradually introduced around six months of age, as developmentally appropriate. Due



to choking risk, children need to be sitting up with limited assistance. Parents wishing to delay the addition of infant cereal, vegetables, and fruits beyond eight months of age will need to have a signed diet statement from their physician explaining why the cereal, fruit, or vegetable should be delayed. If parents choose to supply their infant with food, they must be prepared. Infant food may be brought. Otherwise, we have a small selection of infant puree foods. Containers must be labeled with a child's first and last name. NO GLASS CONTAINERS allowed in the infant room based on dropping and safety. Baby food must be used within the same day it is opened or discarded, or sent home with parents. Containers from home will be returned daily to be cleaned at home. Infants will be offered a cup by nine months and utensils at the appropriate age or developmental stage. They will be held for feedings or fed sitting up. Bottles will never be propped, nor will an infant be put to bed with a bottle. The infant will be reoffered multiple times before it expires before disregarding the bottle.

We prefer NO Dr. Brown bottles...Lots of parts that cannot be labeled effectively.

6 Months

Introduce solids
Fill out "infant dietary"

- Breakfast: Fruit
- Lunch: Vegetables (green before oranges)
 - Most start with one, or the other, then increase to 2 shortly after.
 - May be served with or without rice cereal or oatmeal
 - Breastmilk/Formula (1-2oz) will be served with meals in a sippy cup when eating at the table
 - Give rest of bottle before nap time

9 Months

Start transitioning from solids to finger food (3 meals at 10.5-11 months)

- Breakfast
- Lunch
- Snack
- Breastmilk/Formula (1-2oz) must be served in a cup at all meals
- > Silverware at meals
- Give rest of milk in the cup before nap time
- > Wean off pacifier

Refer to a suggested feeding schedule, if you have questions

12 Months

Should be on all finger foods (3 meals)

- Breakfast
- Lunch
- Snack
 - Milk should be served in a cup at all meals
 - Water may be served at snack, IF 2 of the five components are met
 - > Silverware at meals
 - Transition formula to whole milk
 - 1 month transition period, or we need a doctor's note. Cannot transition rooms until on whole milk
 - ➤ No more pacifier



Special Needs/Allergies diet restrictions and medical conditions

Parents/Guardians have the responsibility to inform the program when their child has special needs, allergies, or conditions requiring attention. If a child is admitted to having any of the above needs, procedures stipulated by our licensing requirements will be followed, and a **form from the child's dr is required.** An individual child care plan (ICCP) will be developed to meet the child's needs. This plan must be updated annually and kept in the child's file, with any medication, on field trips, and during transportation. The program will provide any training (within reason) required by your child's ICCP, however, there may be times when you are requested to assist in training to ensure the child's nurse specialist is included in this training. If your child has special eating or nutritional needs, please inform us to create an individual care plan with a doctor. Staff will be informed of any children with food allergies. This information will be posted near food prep and children's eating areas. You will be required to send the substitute component if it's a dietary preference vs. an allergy.

Individuals with Disabilities Education Idea (IDEA)

As a childcare provider, we continually monitor the development of all children in our care through ongoing observations and recordings. We want the best outcome for all children. Childcare providers are considered a primary referral source for early childhood intervention under the federal IDEA special education law. We are required to refer a child in our program who has been identified as having developmental concerns or risk factors that warrant a referral as soon as possible, but in no case longer than seven days after the identification. While this is a mandate, we want to keep an open line of communication with parents and caregivers about their child and any concerns we have before a referral is made. We can assist you with the referral or partner with you in this process. Frequently starting with a pediatrician is beneficial.

Clothing & Supplies

1. The parents will provide disposable diapers, wipes, ointments, medication, lotions, and sunscreen. Everything is to be marked with your child's name and replaced as needed. In the event, a child needs a diaper, and the parent does not supply it, there is a charge of \$1 per diaper.

Procedures for diapering are approved by our program's health consultant and are posted in the diaper-changing areas. Diapering may only be done in designated areas. Staff uses both stand-up and changing table methods to change children. Please talk to the director if you are choosing to use cloth diapers.

- 2. Parents should provide special care items like blankets for kids above 1. Label everything! Blankets will be sent home every Friday for washing
- 3. Your child should wear play clothes suitable for the outdoors. In anticipation of dirt and accidents, it is advisable to keep an additional change of clothing and underpants here at all times.
- 4. During winter, your child should come with all gear for outdoor play.
- 5. During all months, we may participate in play activities requiring two pairs of footwear. No flip-flops or dress shoes for outside...Tennis shoes are preferred. No outdoor boots are allowed as footwear in rooms.
- 6. Due to space, car seats can only be left if two caregivers drop by and pick them up.

See a list of required supplies per room in the back of the handbook.



Daily Communication

We will send home detailed daily reports for your infant & toddler online through the Brightwheel app. These notes highlight your child's day and tell you about diaper changes, naps/rest time, supplies your child may need, meals, and other communication areas. Each teacher will utilize Brightwheel differently depending on the day, age of children, and personal style. This app will communicate about your child's day in real-time and allow you to communicate with your child's teacher. https://www.mybrightwheel.com/parents/ Most information is not updated until rest time as the staff's main priority is the care of the children.

Activities

Developmental activities are important to your child's physical and mental well-being. Our activities are not rigidly structured but informally scheduled to meet your child's needs. We ensure to include both quiet and active activities as well as teacher-directed and child-initiated. We strive to provide a variety of activities for your children, such as story time, arts and crafts, small muscle activities (puzzles, blocks), daily outdoor play (weather permitting), large muscle activities, individual quiet time, and free play. Studies have shown that PLAY is one of the most important components of early childhood learning. We will also work with educational activities that develop creativity, imagination, and basic numerical and alphabetical skills. Infants will be provided with suitable toys for brain growth.

Curriculum

In line with the Parents aware program, rooms four and under will be using the 123 Learn Curriculum and kindergarten readiness. Mother Goose Time This curriculum allows for flexibility in creating lesson plans and helps to create an intentional learning environment. Each child served will also be observed regularly, and the staff will use those observations to adjust lesson plans and program flow. In addition, they will be used to assess the children using the Desired Results to ensure they are reaching the Early Childhood Indicators of the Process. Conferences with each family will be held in the winter and the fall to go over each child's intellectual, physical, social, and emotional progress and will be documented in the child's file.

Field Trips and Impromptu walks/walking trips

They will be offered to preschool children. Additional costs may be charged to parents to cover field trip costs. Parents will be notified in advance of the field trip destination and purpose and must permit before a child can participate in a field trip. If a family chooses not to participate in field trips, they are responsible for finding alternative care for the day as all available staff goes on the trip.

As for walks to the park or around the general area, parent and doctor phone numbers will be carried with staff, along with a first aid kit. We will provide appropriate strollers or wagons for your children as needed. Staff will always carry a cell phone in case of emergency. Walks to the city park, school park, and middle school are not considered field trips as those are used for outdoor play space.

I understand and am required to give my permission for my child to go on impromptu walking field trips in the neighborhood with their class and Staff. This includes spontaneous outings to the following locations for education and fun in care:

Library, Middle School, Elementary school, city park including trails around the lake, and city rink.



Transitions and Graduations to a new room

Many factors are considered when deciding to transition or graduate a child to a new classroom. This includes the child's development, availability in the program, and the ages and abilities of the other children in that classroom.

Teachers and the Director will communicate with the parents when they feel it is appropriate to start each child's transition. We encourage parents to express any concerns or questions they may have before or during the transition into the next classroom. If a parent feels their child is not ready, we will have a meeting to address concerns and questions. Before graduation, your child will typically have multiple opportunities to get acquainted with their new classroom setting. When the staff-to-child ratio allows, your child may be able to try out their new classroom for half or the whole day. Graduations can happen throughout the year, but the bulk of graduations will occur in June and September throughout the center.

From time to time, it may be necessary for the center to transition children to another classroom due to enrollment or staffing factors. Children that are either the youngest or the oldest in a classroom may be transferred to a different classroom throughout the day. They may be moved to the next class if they are the oldest in their classroom. They may be moved to the day's class if they are the youngest. The center decides what's best for the children and the center on any given day. Infants could start transitioning to the Waddlers Classroom around 12-16 months old. Children could start transitioning to the Toddler Classroom between 16-24 months. Toddlers could start transitioning to the Preschool Classroom around 33 months.

Community Service Activities

We believe it is important to teach children the value of giving back to others. If you have any nonprofits or ideas, please feel free to bring them to the director, as we would like to do as much as possible.

BEHAVIOR GUIDANCE POLICIES AND PROCEDURES

Each child will be provided with a positive model of acceptable behavior, Little Learner's focus. Children's behavior will be guided by setting clear limits or guidelines based on the children's development. We will talk with children about expected behaviors and model those behaviors consistently for them. We will state positively what children can do, using specific terms (e.g., "you need to walk" rather than "don't run"). Undesirable behavior will be redirected to another activity. Children will be



given a wide variety of age-appropriate activities to choose from and will be given the attention they need before they demand it. Behavior management will help children develop self-control, self-esteem, and respect for the rights of others. We will provide immediate and directly related consequences for a child's unacceptable behavior. Our main focus is to protect the safety of children and staff persons.

We understand that there will be times when a child will become distraught, fussy, or won't quit crying. Our first action in these situations will be an attempt to determine the cause of the distress. It may be related to a basic need such as hunger or comfort, or it may be that the child just needs some extra time and attention. We understand that crying is normal and that all babies will have times when they cannot stop crying. At these times, we will stay calm and do whatever we can to soothe your child.

We will focus on redirecting children and groups away from problems toward constructive activity to reduce conflict. A "take a break" may be used when other techniques have not been successful. A "break" will remove a child from a situation that has caused conflict before a child can hurt himself or others. This may mean a child is redirected to a different activity or take some time to relax. When used, the break will immediately follow the behavior, and we will stay with the child and talk about what behavior was unacceptable and what else s/he might have done or said instead. Rather than use a specific area, We will have the child "take a break" near the others, emphasizing relaxation / cooling down rather than isolation and punishment. After the break, the child will be praised and helped rejoin the group. To teach children how to use acceptable alternatives to problem behavior to reduce conflict, we will talk with the child about how they could better handle the situation.

We recognize that no single technique will work with children every time. We will follow the center plan if a child exhibits persistent unacceptable behavior. The center's persistent and unacceptable behavior plan will require staff guidance and time. The plan procedure is the following:

- 1) staff (director or teacher) will conduct observation and record the child's unacceptable behavior and staff response to the behavior in the observation summary sheet
- 2) staff will develop a plan to address the behavior documented and observed on the sheet with consultation and partnership with the child's parent and with other staff persons and professionals when appropriate.

Our behavior guidance policy is designed to:

Ensure that each child is provided with a positive role model of acceptable behavior

- -Be tailored to the developmental level of all enrolled children
- -Redirect children and groups away from problems and towards constructive activities to reduce conflict.
- -Teach children how to use acceptable alternatives to problem-solving to reduce conflict
- -Protect the safety of children and staff persons
- -Provide immediate and direct related consequences for a child's unacceptable behavior.

Young children need to be taught appropriate behaviors. Appropriate alternatives to corporal punishments as children grow and develop.

As infants become more mobile, the staff will create a safe space and impose limitations by encouraging activities that distract them from harmful situations. Brief verbal expressions of disapproval help prepare infants and toddlers for later use of reasoning. For toddlers, disapproval will be followed with comments about expected behavior.

Preschoolers have begun to develop an understanding of rules and can understand "break time" to calm down. (Out-of-group activity by sending a child to calming activity such as a puzzle, sensory, or other table activity) However, children will not be isolated from the group. The staff will follow up by asking how t, the child feels about their feelings and suggest appropriate behavior.

School-age children will develop a sense of personal responsibility and self-control and recognize the removal of privileges.

We promote positive behavior in the following ways:

1. The classrooms are designed to be developmentally appropriate



2. There are sufficient toys and activities to stimulate children of all a.

All Staff is trained on all prohibited actions, including

- Subjecting a child to corporal punishment includes but is not limited to:
 Rough handling, Shoving, Hair pulling, Ear pulling, Shaking, Slapping, Kicking, Biting, Pinching, Hitting, and Spanking
- Subjecting a child to emotional stress, including but not limited to Name-calling, Ostracism, Shaming, Making derogatory remarks about a child or the child's family, and Using language that threatens, humiliates, or frightens the child
- 3. Separation of a child from the group except within rule requirements.
- Punishments for lapses in toileting.
- 5. Withholding food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior.
- The use of physical restraint other than to physically hold a child where containment is necessary to protect a child or others from harm.
- 7. The use of mechanical restraints, such as tying.

Separation from the group.

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

- A. Less intrusive methods of guiding the child's behavior have been tried and were ineffective.
- B. The child's behavior threatens the well being of the child or other children in the program.
- C. A child who requires separation from the group must:
- 1) Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person;
- 2) The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation; and
- 3) The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.
- D. Children between the ages of six weeks and 16 months must not be separated from the group as a means of behavior guidance.

Separation Report.

All separations from the group must be noted on a daily log that must include the following:

- A. The child's name;
- B. The staff person's name;
- C. Time;
- D. Date;
- E. Information indicating what less intrusive methods were used to guide the child's behavior;
- F. How the child's behavior continued to threaten the well-being of the child or other children in care.
- G. If a child is separated from the group three or more times in one day, the child's parent shall be notified, and the parent notification shall be indicated on the daily log.
- H. If a child is separated five or more times in one week, eight times or more in two weeks, the procedures in subpart two must be followed.

Undesirable behaviors

Children's behaviors are often unpredictable. Our staff understands that temperaments are controlled by many factors, including a child's sleep patterns, health and wellness, home environment, and behaviors that the children and staff around them affect. We will try to surround your child with calming love and support. However, there are times when we must consider what is best for the other children in the group if a child's undesirable behavior is inhibiting the staff's ability to care for others. We may need to send a child home for the day if we feel their



unwanted behaviors have infringed on another child's safety or right to learn. We hope that parents will work on our team to address a child's behavior at home to encourage them to correct their behaviors at childcare. Examples of behaviors that would warrant us requiring a child to be sent home with a parent would include but are not limited to: inconsolable crying that staff is unable to sooth for a period of over one hour, refusal of a child to walk to/from a planned outing as this could negatively affect the group and directly relates to safety of the group outside the childcare center, a child that verbally indicates to staff they will be a flight risk or that demonstrates behaviors that indicate they will run away from a planned activity or into traffic or any dangerous spaces, undesirable behaviors that staff is unable to correct within a one hour time frame that may pose a danger or extreme disruption to the group; examples of this may include refusal to stop screaming or yelling at staff, continued use of profanity that is not halted after reminders, intentional excessive and/or deliberate destruction of property, and any other behavior that threatens bodily harm to staff or children that is not quickly halted with staff correction. Other behaviors that may warrant the need to send a child home for the day would include Biting if a child were to have five bites in one day. We ask for your full support if you are called to pick up a child due to undesirable behaviors. We hope you will support our decision, understand the limitations we are faced with within a licensed childcare facility, and help us work alongside our staff to find solutions to the problem at hand. No financial refund will be given if a child is sent home.

SEPARATIONS

Additionally, as a licensed facility, we must make and follow policies related to separating a child from a group.

*Separation occurs when a child is removed from the group and is temporarily unable to participate in the program activity. No child may be separated from the group unless the license holder has tried less intrusive methods of guiding the child's ineffective behavior and the child's behavior threatens the child's well-being or other children in the center. All separations from the group must be noted on a daily log. After three separations in one day, the parents will be notified; after five separations in one day, a child will be sent home. After five separations in one week or 8 in two weeks, a behavior plan may be made/followed, and the child may be sent home. No financial refund will be given if a child is sent home. If the staff or director cannot keep all children safe due to extremely unsafe behavior, the child will be sent home, and a meeting will happen before the child resumes care.

An Incident report will be sent home for persistent unacceptable behavior.



calling the center imme- your child. If you wait to 's behaviors are often un patterns, health/wellness every attempt to surrour their undesirable behavior to pick up a child due to	this provides opportunities to talk to your care for your child while encouraging pos diately upon notification. The best persor ask questions at pick-up time, there is a characteristic or predictable. Our staff understands that and home environment. Behaviors can and your child with calming love and suppors have infringed on another child's safety our desirable behaviors, we hope you will	child about classroom expecitive behaviors. If you have on to answer your questions is nance that specific staff may temperaments are controlle be affected by the children cort. However, we may need or right to learn. We ask for support our decision, unders'	eant to be one tool we use to communicate ctations as well as the opportunity to talk to questions about an incident, please conside likely the staff that is currently working with have gone home for the day. If you many factors including a child's sleep and staff around them as well. We will make to send a child home for the day if we fee your full support in this area if you are called tand the limitations we are faced with within thand. No financial refund will be given if a child home to the day if we have the called the limitations we are faced with within the day.
Child's First/Last No	ameC	lassroom Enrolled in_	Age
	Date of Incident _		
Witness	Notified viaBrightwheelPhone	callThis form at pickup epared By	Time Notified: AM PM
	It (what happened?) Check all that o		
will be sent he o Your child attempte #of attempts at time to o Your child pushed, an o Your child tripped an o Your child scratched o Your child threw toys o Your child was using Further Describe Describe Injury to a	ent will be called. by (not including attempted bites) =child orme for the day. d to bite another child/staff his form was written iit, kicked another child/staff nother child/staff his form the child/staff another child/staff of the child/staff his forbige to the child/staff his forbige to the child/staff his forbige to the reminders list # undesirable language hincident (use back of form if necessible the child (was another child hurts to the child (was another child hurts).	*Your child has veriflight risk or has a they will run awa *undesirable betwithin a one-hou or extreme disruptor child had or your child was alitically of your child was specified.	It to walk to/from a planned outing erbally indicated to staff they will be a lemonstrated behaviors that indicate y from a planned activity or into traffic naviors that staff is unable to correct in time frame that may pose a danger oftion to the group ther undesirable behavior srupting learning for others bitting
Location where i	o Classroom	La Maril Area	L CALLY.
		o Meal Area	o Field Trip
o Hallway	o Outside	 Playground 	o Other
alternate constructive participate in the prog intrusive methods of gu		child is removed from the ated from the group unless been ineffective, and the arations from the group anderRedirection	group and is temporarily unable to sthe license holder has tried less the child's behavior threatens the nust be noted on a daily log if ineffective staff used
wellbeing of the child 1st triedGentle Separation IF Separation was Asked to take of this is Separation # This is Separation #	to break and return when calm Today (after 3 in one day parents mu This week OR in two weeks (after the child may be sent home)	ust be called, *after 5 in or	ne day child will be sent home)
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wellbeing of the child 1st triedGentle Separation IF Separation was Asked to take of This is Separation # This is Separation # made/followed and/of Follow up plan (if need Report Prepared By (Te	a break and return when calm Today (after 3 in one day parents m This week OR in two weeks (after the child may be sent home)	ust be called, *after 5 in or er 5 in one week or 8 in tw Supervisor Signature	ne day child will be sent home) o weeks a behavior plan may be Date _



Toilet Learning

We will begin when we both agree that your child is ready. We must work together during this time until a consistent routine is established. You will send several pairs of pants plus several changes of clothing to use during training. Appropriate clothing is a must. Please, no complicated outfits during this time! No belts, onesies, tights, or difficult snaps. If your child has an accident and wets, be assured we will not scold or spank them. Soiled clothes will be sent home in sealed bags. No child shall be punished or shamed for accidents during this learning period. Children that are not fully and completely potty trained will remain in the Toddler room. Our staff will try to work with your child during this process and celebrate successes. When the teacher, director, and parent decide a child is thoroughly potty trained, no longer needs diapers/pull-ups and can go to the restroom unassisted, the child may graduate to the preschool classroom. DO NOT SEND YOUR CHILD UNDERWEAR UNLESS YOU HAVE HAD A CONVERSATION WITH YOUR CHILD'S CAREGIVERS. Children need to be successful in toilet bowel movements before the discussion. This decision needs to be a group one.

Toys

We have adequate developmentally appropriate toys for all the children to play with, and it is much easier to share and take turns with toys that are intended for everyone's use. Please refrain from bringing toys from home except on designated show-n-tell days. Your child will be expected to help pick up and put away toys and games and be praised for their efforts.

Holiday/Weather Closures

Little Learner's Child Care is CLOSED on the following Holidays with pay: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Day after Thanksgiving, Christmas Eve Day, and Christmas Day. Should one of the above-listed holidays fall on a Saturday/Sunday, We will take the preceding Friday or the following Monday as a paid holiday. Up to 3 staff in-service/training days will be planned as paid closed days. We close if our school district closes due to travel-related safety. We will take cold weather on a case-by-case basis. If we can remain open and ensure the security of your children, we will do so. Our Brightwheel system will alert you as soon as the school notices closing.

2023 Closed Paid holidays

April 7th-Good Friday
May 29th- Memorial Day
July 3rd-Signed up Required
July 4th- Independence Day
September 4th- Labor Day
November 23th and 24th- Thanksgiving Weekend
December 22nd and 25th- Christmas Observance
December 29thand Jan 1st New Years Day Observance

2 In-Service day TBD



Maternity Leave, Layoffs, Summer Time Off

As part of our Family Leave Policy, we have three options for you to consider:

Option 1: Continue enrollment at 3/2 days per week, as space is available. This means the center will plan for the child to attend the same days a week, and a start and end date for the Family Leave will need to be approved.

Option 2: Pay a holding fee of \$200 per month or \$50 per week. This means the center holds the space, but the child does not attend for any portion these days. A start and end date for the Family Leave will need to be approved.

Option 3: Leave with the hope that a spot stays open. You can re-register up to 1 week in advance for a future enrollment date. The cost to re-enroll is \$50."

We will do our best to accommodate your desired option.

Should you need us to "hold a spot" for your expected child or hold a full-time spot for your older child while you are on maternity leave, we will do our best to accommodate your needs. After nine weeks, you must pay the full price to hold a spot. Know that we always reserve the right to charge a fee to hold a spot open. A typical arrangement would be a charge of a one-week deposit for your current child and the new infant. That deposit would be applicable towards the first week of your full-time return. Deposits are non-refundable should you decide not to return for any reason.



III Child

When your child is ill, they need to be with their parents. To protect the other children we care for, we must enforce that you make other care arrangements if your child has the following symptoms:

- ☐ Temperature above 100 degrees (orally) or 99 degrees (underarm)
- , Vomiting or diarrhea (returns when a child is cleared from dr or resumes normal stool)
- Rash other than a mild diaper or heat-related rash. Chicken Pox until all lesions are crusted over.
- ☐ Any communicable diseases
- □ Sore or discharging eyes, ears, or profuse nasal discharge
- Bacterial infection such as strep or impetigo until 24-hour antibiotic therapy is completed
- Any child who has lice, ringworm, or scabies that is untreated and contagious to others Significant respiratory distress: fast, difficult, or different breathing, uncontrolled coughing, &/or Unexplained wheezing lethargy
- Any child who is unable to participate in child care program activities with reasonable comfort or who requires more care than the staff can provide without compromising the health of the other children
- If your child develops any of the above symptoms during the day and appears too ill to be in care, a parent or
 alternative person specified on the enrollment form will be contacted and asked to pick up your child as soon as
 possible and not more than one hour after notification. Your child will be kept isolated from the group. Staff will keep
 the child as comfortable as possible in a supervised location. A child's doctor or emergency personnel will be
 contacted, and treatment will be sought if necessary.
- 2. You must notify us within 24 hours of diagnosing a severe contagious illness or parasitic infestation. The other parents will also be notified. Contagious illnesses will be reported to all parents the same day the information the is received. Staff will post a notice in a prominent place stating the illness, incubation period, early signs to watch for, and exclusion recommendations. These postings will be updated with each new case of the illness.
- 3. A child should be fever free for a minimum of 24 hours before returning to care without fever-reducing medication.
- 4. Please do not put us on the spot about an ill child returning to our care. If in doubt, refer to the guidelines above or consult a physician. Children with minor colds can attend childcare.
- 5. If your child requires prescribed medication, you will be asked to sign a permission slip, and the child needs to be out until 24 hours on prescription. All medications must be in their original bottles. Pharmacists will fill two bottles (one for home & one for childcare) if requested.
- 6. Non-prescription medications such as sunscreen, creams, fever reducers, cough syrup, etc., may be administered to a child with a parent's permission. Suppose a child is under two, and the label states, "ask a physician" for dosage. In that case, parents must call their physician before bringing their child to the center and have the clinic fax a note stating authorization, dosage and amount, and instructions on when to administer medication.
- 7. Behavior or health issues which may affect the safety, health, and general well being of other children at Little Learner's Child Care may result in limited exclusion or termination of enrollment.
- 8. Masking symptoms with medication and hiding and not communicating contagious illness are grounds for termination.
- 9. It is in your best interest to communicate with staff whenever you bring children into dr.

Please read the below info about teething.



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Teething – Facts vs Myths A Guide to Program Policy

What is Teething?

Teething is a normal developmental process of the teeth erupting through the gums. Typically, primary teeth begin to erupt around the age of six months and continue to erupt until around 24 to 30 months. By the time a child is three (3) years old, they have twenty teeth.

General Tooth Development:

Two bottom teeth (central incisors) appear first.

Four to eight weeks later, the four front upper teeth (central and lateral incisors)

One month later, the lower lateral incisors appear.

Then, the first molars (the back teeth used for grinding food) appear.

Finally, the eyeteeth (the pointy teeth in the upper jaw) appear.

- Around age six, baby teeth are replaced with permanent teeth; starting with the central incisors and progressing toward the back of the mouth.
- Then, the addition of premolars or bicuspids (aid in tearing and crushing food)
- Children teethe all the way through 12 years of age.

Implications for child care:

Since teeth erupt continuously from six months to two years of age, many unrelated illnesses are blamed on teething. The teething facts are outlined below:

- Teething can take place up to three months before you actually see the tooth come through.
- The process of cutting the tooth through the gum does not go on continuously, but through occasional starts and stops.
- It is generally a painless process, however, the degree of pain is perceived differently by people, therefore some irritability may be present.
- There is increased saliva, drooling, and a desire to chew on things. There may also be rubbing at the mouth, or pulling at the ears.
- Drooling has a direct effect on the intestinal system. Stools may become more frequent but the consistency or form of the stool does not change.
- Teething does not cause fever, diarrhea, sleep problems or diaper rash, or lowered resistance to any infection.
- These symptoms may be noted occasionally throughout the teething process due to the fact that when children put things into their mouths they are virtually eating the bacteria and viruses that live on these objects. As these bacteria and viruses get into the child's system, it is these germs that cause fever, diarrhea, etc.
- Fever is common from six months to the first two years of a child's life. After six months of age infants start to lose the natural protection provided by their mother's antibodies. Mild illnesses may cause fever throughout this time.
- When a child exhibits symptoms of an infection during the teething process, these symptoms; fever, diarrhea and vomiting, are excludable conditions for child care. This means a child is infectious and could spread these germs to other children and staff. (See Standard Exclusion Guidelines - Form E-200.)

- Over -

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Teething Management:

- Wipe the baby's face often with a clean cloth to remove the drool. This keeps rashes from developing.
- Provide something hard and/or cold to bite on. Make sure the item is big enough so
 that it cannot be swallowed. A wet cold washcloth or cold teething ring is a good
 source of comfort. Frozen bananas or popsicles may also be useful. Remember to
 launder the washcloth after each use and clean and sanitize teething rings after
 each use.
- Avoid hard foods that a baby might choke on such as raw carrots or crackers.
- Never tie a teething ring (or pacifiers) around a child's neck. These could get caught on something and strangle the child.
- Gentle gum massage with a <u>clean</u> finger or an ice cube may relieve discomfort.
 Remember to wash your hands before and after doing gum massage. (Do not give ice cubes to children to eat. This is a choking hazard.)
- · Avoid salty or acidic foods.
- If a parent insists on using acetominophen for discomfort, follow the manufacturer's instructions on the label. Prescription Medication Authorization/Administration (Form M-200) will need to be completed.
- · Prevent baby bottle tooth decay:
 - Do not allow infants to nurse or breast feed for extended periods of time (e.g. sleep all night at the breast).
 - Do not use the bottle as a pacifier, or allow the child to walk around with it or drink it for extended periods.
 - Do not give infants/children bottles containing milk, formula, breast milk, sugar water, fruit juices, etc. during naps or at night.
 - Never give a child a pacifier that has been coated with any type of sweet liquid.
 - Introduce a cup when an infant can sit up without support. As children approach their first birthday, they should be encouraged to use a cup rather than a bottle.
 - Bottle use should be discontinued by a child's first birthday.
 - Juices should never be consumed from a bottle use a cup instead (see Juice Overuse – A Guide to Program Policy, page 56).
 - Make sure your child is getting fluoride through water they are consuming.
 - As soon as a child's first tooth erupts, oral hygiene measures should be used.
 (Note: consult with your health care provider before you begin brushing your child's teeth.)
 - First oral exam should be within six months of the child's first tooth, and no later than 12 months. Regular visits to a dentist should start by age 3. The earliest signs of baby bottle tooth decay white spots on the upper front teeth are often hard to spot. Pediatricians and pediatric dentists often need the use of special equipment to make an early diagnosis. If you, the child care provider, suspect a child does have baby bottle tooth decay, encourage the parents to talk with their pediatrician.

Source:

Contemporary Pediatrics, "Nothing but the tooth": Dispelling Myths about Teething 7/2004 Maternal Child Health Bureau, Open Wide: Oral Health Training 2005

www.mchoralhealth.org/openwide

Nemours Foundation, <u>Teething Tots - What's Normal, What's Not</u> 1997 On-Line) Available: http://www.kidshealth.org/parent/behavior/teething.html

National Association for the Education of Young Children, Healthy Young Children 2002 Edition

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Health Care Summary

- 1. Upon enrollment or within 30 days, your child's medical record must be submitted to the director. It must include a current examination and be signed by the child's source of medical care. A record of a physical is again required annually for children till the age of 3
 - a. You have 30 days after the child's birthday to return to continue care. Your child CANNOT return until the form is returned.

Immunizations

Immediately upon enrollment, documentation of current immunizations must be submitted. We do not provide care for children that are unimmunized unless the family has a plan with a dr or health care provider. It is a parent's responsibility to make sure that immunization records are updated as needed. Parents must inform Little Learners Childcare Center when their child has a unique medical condition, need, or allergy.

In a case of Measles, Mumps, Rubella, Pertussis, Polio, or Diphtheria occurs in the childcare setting, children who are inadequately immunized will be excluded through the incubation period of the last reported case of the disease, as determined by the local health department. This exclusion is necessary because these children may become infected and contribute to further disease spread. Little Learners' refuse to enroll unimmunized children based on personal beliefs rather than a medical condition. For legal information,\www.childcarelaw.org 415- 558-8005.

Within 30 days of enrollment, parents must provide a Health Care Summary form signed by a physician. Failure to supply this documentation will cause exclusion from Little Learner's Child Care. Parents must keep these forms up-to-date by getting a new form on the 1st, 2nd, and 3rd birthday well exam.

We recommend and appreciate the first vaccination done on a day the child can stay with families for monitoring and care. Kids react differently, and some have increased fussiness, which can pose challenges in care

<u>Injury</u>

If a child is injured at Little Learner's Child Care Center, our staff will administer first aid or CPR as necessary. A minor injury will be given first aid, communicated via Brightwheel, and followed up with a phone call if needed. Accident reports will be posted on Brightwheel, and parents must sign at pick-up. If you would like a hard copy, please request one from the staff. If emergency treatment is indicated, staff will call 911 and a parent or other authorized adult listed on the emergency form and explain the situation. If a child needs to be transported, they will likely be brought to Buffalo Hospital in Buffalo, Mn, which will be at the parent's expense. Staff will accompany the child and remain with the child until a parent arrives. The child's health and consent forms will be sent with them.

Fire Prevention and Safety

Your child will practice exiting the childcare center safely and learn about fire prevention and safety. Primary and secondary fire exits are noted on the floor plan and posted in a prominent area in each work unit. Both routes are practiced throughout the year. The person detecting a fire will call 911. The lead teacher will evacuate all children, taking with them the attendance record. The assistant teacher/aide will attempt to close the fire by closing windows and doors and shutting off the lights before leaving. The director will attempt to take the first aid kit and emergency cards. The group will proceed outdoors, away from the building, to the designated waiting area (sidewalk north of the building) and await further instructions. Attendance will be taken, and any missing child will be reported to the fire marshal. No one is to re-enter the building until the all-clear is given. A report will be made to DHS (MN 651-431-6500) within 48 hours of a fire that requires the fire department.



Staff are trained in the use and are aware of the location of the fire extinguisher. Fire extinguishers are checked annually. Written instructions on using the fire extinguisher, fire evacuation plans, and staff duties are posted in each work unit.

Directions to use the fire extinguisher: Hold upright, pull the pin, Stand 10 feet, aim at the base of the fire, Squeeze the trigger, and sweep side to side

Lockdown/Active Shooter

Staff are trained and practice lockdown drills. Each classroom's door can be locked from the outside and will be pulled shut in the event of an active shooter. Please reference the emergency plan for specifics.

Emergency Shelter and Equipment

If emergency shelter is needed outside of this facility, staff and children will proceed to

Annandale City Hall, 30 Cedar Ct. Annandale Mn

An emergency kit is located at the center. The center's emergency plan is posted on the bulletin board and sent out upon enrollment.

Tornado protocol

Tornado drills are practiced every month, April through September. They are documented in a log. In the event of a tornado warning, all children will be taken to the tornado shelter in the hallways between classrooms. Lead teachers will bring the attendance sheets and take attendance. The director will take the battery-operated radio, flashlight, first aid kit, blanket, and activities for the child. No one will leave the shelter until the all-clear is given.

Pandemic Protocol

In the case of a pandemic, we will cooperate with state and local government disaster planning agencies working to prepare for or react to emergencies presented by a pandemic outbreak.

See our current COVID pandemic policies for specific details.

Licensing

The State of Minnesota Human Services Department empowers us. In addition, we must meet the criteria of the State of MN Health Department. We also must meet guidelines set forth by a Health Nurse. Minnesota Rules govern us, parts 9503.0005 to 9503.0170 (DHS Rule 3) and Minnesota Statutes, Chapters 245A and 245C. These statutes require that we maintain certain records, pass unscheduled inspections, meet fire and other safety codes, and further our education and training in the childcare field on an ongoing basis. Little Learner's Child Care license is posted on the communication board.



Parking

When dropping off children at the curb/door, please pull up so other families can easily pull behind and drop them off. Avoid the bus drop-off lane during the hours of 3-3:30 pm.

Pet Policy

Our policy is that no animals will be granted access to the main facility, except pre-approved police K-9 animals that may present during a show and tell event. The only animals the children will encounter are those that may be present during a field trip.

Non-Discrimination

We at Little Learner's Child Care shall not discriminate against any child. Your child is placed here without regard to race, creed, color, sex, religion, or national origin.

Chemical Use Policy

Little Learner's Center is a smoke-free environment. There will not be any tobacco smoking on the property or within 50 feet of the property. All caregivers at Little Learner's Center are prohibited from abusing prescription medication or being under the influence of a chemical that impairs the individual's ability to provide care. We will provide notification and training on said policy to all caregivers.

Inclement Weather

We take guidance from the school district, national weather center, and licensed health consultants when determining the need to close. Also, if severe weather is predicted during the scheduled day, we may schedule to close early, and you will be contacted via brightwheel or phone/email. In addition, Little Learners may close due to impassable roads that make it impossible for staff to arrive at work. All children will stay at the center and be cared for during inclement weather.

Media Policy

We will occasionally take pictures of the children in the facility. Your permission must be obtained to do so. Please note your child's image will never be used for research or experimentation. Pictures are posted on our Brightwheel as well as our Facebook page.

Grievance Procedure

If you are dissatisfied with some aspect of the services provided in our licensed program, please bring the concern to our attention. We can most likely reach a mutual agreement and resolve any issues you might have.

- 1. If your grievance is with a staff member, please start there. Our staff is expected to be professional and willing to work out differences. Please be respectful of their supervision responsibilities. Pick-up can be a challenging time to talk. If you need to, please arrange a time to speak with staff ahead of time so that we can arrange coverage.
- 2. If things are not resolved after speaking with staff, or if you are uncomfortable confronting them, you should bring your grievance to the Director, Sarah Wiles.
- 3. If we cannot meet state and local requirements for licensed childcare centers, as a final step, you can involve the Department of Human Services, Division of Licensing, at 651-431-6500.



We must be able to work together to make your child's time at Little Learner's Child Care Center as happy and peaceful as possible. The basis on which we, providers and parents, must work together. We must discuss our differences in opinions. We should also share our stories of your child's successes and achievements. Please reference "Supportive Families" located in front of the handbook.

Please feel free to share any questions or concerns with us.

Mandated reporter Policy

Please review the below link on the Mandated reporter policy https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7634A-ENG

Damage to Childcare Property

We understand that items may be broken or damaged in regular coarse playtime activity, however, if we feel the damage done by your child is excessive, deliberate, or the result of intentional misuse we will expect the child's parent or parents to pay for the repair or replacement of the item(s). Your signature on the contract agreement form indicates that you are aware of this policy and will pay for damages to our property caused by your child. If damage occurs that will require you to replace or repair our property, we will sit down and discuss the injuries and how to proceed.

Insurance

Little Learner's Child Care Center carries \$1,000,000 general liability coverage.

We aim for this contract to serve as a general guideline to help all parents and children in the best way we can. Little Learner's Child Care Center has established the procedures included in this contract because we believe they will help both of us, parent and child care providers, to understand each other's goals and expectations better and work better together. If you have any additional questions or concerns, please contact us, and we will be happy to work with you to reach a mutual consensus. We look forward to working with you and your family. We strive for patience and understanding in teaching and caring for your children. We are successful only with your support.

Termination of Services

Should we ever need to terminate your childcare services, we will do so with a two-week verbal notice as long as possible under the circumstances. Little Learner's Child Care Center is not required to give advance notice of termination under the following circumstances:

- 1. Non-payment
- 2. Non-compliance with policies
- 3. Failure to meet immunization policies
- 4. Continual disruptive behavior which is harmful to other children or staff and is not being corrected
- 5. Safety Concerns

Closing note

Our Childcare Program plan and all of its contents are reviewed annually by a staff member that is qualified as a teacher or higher. All contents of this plan are available to parents on request – please contact littlelearnerschildcare.ann@gmail.com



Infants (Label everything with first and last name)

	1 container of formula or if preparing bottles. As many prepared and labeled bottles as needed that day +1
	extra
	3 bottles under 12 months
	2 Pacifiers under 12 months (if used)
	Lotions, ointments, wipes
	2 changes of clothing appropriate for the season
	1 bag of diapers -
	Tearless sunscreen labeled (summer)
	Sun hat that secures under chin labeled or initialed inside
	Non Slip flexible Shoes (if walking)
	Family Picture
Waddle	er (Label everything with first and last name)
	diapers and wipes
	1 changes of clothing
	Blanket
	Proper winter outdoor wear and boots ~labeled
	Inside and outside Non slip flexible shoes with toes covered
	Sunscreen
	Lotion, ointments,
	Family Picture
	Family Picture **S (Label everything with first and last name)
	rs (Label everything with first and last name)
Toddlei	
Toddlei	1 bag of diapers labeled on all sides or pull ups if potty training
Toddler	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps
Toddler	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps Blanket Proper winter outdoor wear and boots ~labeled
Toddler	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps Blanket Proper winter outdoor wear and boots ~labeled Inside and outside footwear (tennis shoes prefered) No dress shoes No flip flops
Toddler	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps Blanket Proper winter outdoor wear and boots ~labeled Inside and outside footwear (tennis shoes prefered) No dress shoes No flip flops Sunscreen (NO SPRAY)
Toddler	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps Blanket Proper winter outdoor wear and boots ~labeled Inside and outside footwear (tennis shoes prefered) No dress shoes No flip flops
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Prescho	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps Blanket Proper winter outdoor wear and boots ~labeled Inside and outside footwear (tennis shoes prefered) No dress shoes No flip flops Sunscreen (NO SPRAY) Lotion, ointments, wipes Family picture polers & older children may need (Label everything with first and last name) Change of clothing Sunscreen(NO SPRAY) 2 pairs of shoes/gear for the weather and running (1 inside 1 outside). No Dress Shoes. No Flip Flops.
Prescho	1 bag of diapers labeled on all sides or pull ups if potty training 2 changes of clothing appropriate for potty training with no belts or difficult snaps Blanket Proper winter outdoor wear and boots ~labeled Inside and outside footwear (tennis shoes prefered) No dress shoes No flip flops Sunscreen (NO SPRAY) Lotion, ointments, wipes Family picture polers & older children may need (Label everything with first and last name) Change of clothing Sunscreen(NO SPRAY) 2 pairs of shoes/gear for the weather and running (1 inside 1 outside). No Dress Shoes. No Flip Flops. Lotions, ointments, pull-ups (if needed), wipes



Here are the top 10 must-haves for infants-preschool!

Infant Swaddle



Sleep Sack



Bottle Labels



Bottle Labels



Label Everything



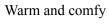
Great for potty teaching



Great fall gloves



Awesome first walkers



Rain Boots







