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MISSION STATEMENT

The University of Minnesota Child Development Center is a model, demonstration and training site for early development with research opportunities to further the knowledge of early development, education, and quality care for young children. Simultaneously, it provides a “fee-for-service” childcare and development program for University of Minnesota affiliated staff, faculty, and students.

UMCDC (formerly UMCCC) was founded in 1974 and has been continuously accredited by the National Academy of Early Childhood Programs since 1987. It was reaccredited in April of 2010 (required every 5 years) with commendation. UMCDC will be visited, assessed, and reaccredited by an assessor in 2015.

HISTORY

In June 1974, the Board of Regents of the University of Minnesota authorized the development of a Child Care Center. It was assigned for administrative purposes to the Institute of Child Development in the College of Education.

In January 1990, UMCCC was administratively reassigned to the Department of Transportation and General Services in Support Services and Operations. UMCCC was expected to maintain appropriate linkages to academic programs to accommodate student and faculty interests in teacher-training, research, practicums, and observation opportunities.

In September 1992, UMCCC was moved to its current location, at 1600 Rollins Ave SE, where it doubled its capacity. The Center was designed as a high quality child care program.

In January 1994, UMCCC was transferred back to the administrative authority and interests of the College of Education, reporting directly to the Dean’s office, now the College of Education and Human Development.

In May 2011, UMCCC was renamed, the University of Minnesota Child Development Center (UMCDC) by the Board of Regents, to reflect the child development program, increase in research, observation opportunities, and as a practicum and potential student teaching site for University of Minnesota students.

AFFIRMATIVE ACTION

As part of the University of Minnesota, UMCDC is an equal opportunity employer and educator. The program offers a non-sexist, non-racist, multi-cultural, anti-bias curriculum and does not discriminate against staff, parents, or children on the basis of sex, race, creed, color, national origin, or physical or mental disabilities.

To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.
SPECIAL FEATURES

UMCDC maintains a model developmental program with infant, toddler, and preschool programs; a sliding fee scale; and a Parent Consultative Committee (PCC).

UMCDC is a member of the National Coalition for Campus Child Care (NCCCC), National Association for the Education of Young Children (NAEYC), MN Reggio Network, and the North American Reggio Emilia Alliance (NAREA).

UMCDC is licensed by the Minnesota State Department of Human Services Licensing and is accredited nationally by the National Academy of Early Childhood programs of the National Association for the Education of Young Children (NAEYC).

Special features of UMCDC:

- A commercial kitchen and highly nutritious child food program partially funded and inspected by the USDA-Child Care Food Program, Child Nutrition Section of the United States Department of Agriculture.

- Monthly health and safety visits with the Minnesota Visiting Nurses Association.

- **The Director, Ann Edgerton**, is licensed in Minnesota with a bachelor’s in Elementary and Early Childhood Education, a Master’s degree in Early Childhood Education and Early Development, and a Montessori diploma from London, England. She is experienced as a faculty member in her field, as an administrator of college/university and public programs in Early Childhood, such as Head Start, and Early Head Start. The Director serves on the University of Minnesota ECEC committee; works collaboratively with CEED, the Shirley G. Moore Lab School, the Institute of Child Development, and on assignments from the Dean of CEHD and/or the Senior Associate Dean of Research; and serves on several boards and committees, such as the MN Department of Education Core Competencies Committee and “People Serving People.”

- **The Education Coordinator, Sarah McKeever**, is licensed in Minnesota with a Master’s degree in Education.

- **The teacher supervisors, Area Coordinators**, are educated in Early Development, Birth to 8 years, and Child Psychology; most hold MN teaching licenses.

- Linkages with University departments include garden inspection and/or consultations regarding the building and environmental matters, such as an Industrial Hygienist; research activities, CEED, ICD, Child and Education Psychology, Occupational Therapy, Physical Therapy, Kinesiology, Music Education, dance, and senior Pediatric residents on a rotation.

- Environment: creative facility designed and planned to work effectively for our child development program and to use sustainable materials whenever we can.

- Auxiliary spaces for shared use are a foyer, courtyard, “The back 40”, atrium, outdoor nature play yards, mudrooms, flex room, multi-purpose room, and a research suite.

UMCDC is located at 1600 Rollins Avenue S.E. Minneapolis, 55455 (on the southeast corner of 15th and Rollins Avenues, across from Van Cleve Park).

OPERATING BUDGET

Parent user fees support a large part of UMCDC’s operating budget. However, a major contribution is made each year by CEHD through a central allocation and other in-kind contributions. Other financial resources include the United States Department of Agriculture Child and Adult Care Food Program, County fee subsidies for qualifying parent clients, other government sponsored financial assistance programs, and private contributions.
SERVICES

UMCDC is currently licensed to serve 140 full time equivalent (F.T.E.) children daily between the ages of three months and pre-kindergarten in a group child care setting (18 infants, 54 toddlers, 68 preschoolers).

Daily breakfasts, lunches, and afternoon snacks are prepared on site following USDA child nutrition guidelines and served to all children at UMCDC. Monthly vegetarian or non-vegetarian menus are available and posted each month on the website.

ELIGIBILITY AND AFFILIATION REQUIREMENTS

You must be an affiliated member of the University of Minnesota community to enroll your child or to keep your child at UMCDC. One parent or legal guardian of an enrolled child, or registered same sex domestic partner of an enrolled child’s parent or legal guardian, must meet one of the following requirements:

1. Undergraduate student(s) must be taking 12 or more credits per semester to be eligible for UMCDC full time Child Care. UMCDC is a full time, all day, development program with meals and 8 hours plus of care per day. If you are enrolled in less academic credit hours you may apply for half day care at the Shirley Moore Laboratory School on the University campus.

2. Graduate student(s) must take three credit hours or more toward your graduate degree to be eligible for full time care at UMCDC. If you are enrolled in a graduate program for less or no credits contact the Shirley Moore Lab School for part day program for you child care.

3. Civil service or bargaining unit staff member with 50% time or more paid appointment at the University.

4. Faculty or professional administrative position with 50% time or more paid appointment at the University.

UMCDC requires proof of affiliation each semester. Failure to respond to the second request for proof of affiliation will result in a charge of $35.00 and may result in termination. One of each enrolled child’s parents or guardians must be affiliated with the University in order to be eligible. (See definition of affiliation above). Affiliation is verified each fall and spring semester using the PeopleSoft data base.

Eligibility requirements are waived during the summer months up to August 1st. UMCDC will expect appropriate affiliation of parents and legal guardians of children enrolled in the summer months to be proven.

It is the responsibility of the parent or legal guardian to notify the Enrollment Coordinator if loss of affiliation occurs at any time. A two week notice of termination of child care services will be given in situations where affiliation requirements are found not to be met and the Enrollment Coordinator, or Education Coordinator, was not informed in writing by the parent or guardian of the loss of affiliation.

If the parent or legal guardian has notified the Enrollment Coordinator of loss of affiliation and this is the first occurrence of non-affiliation during the entire length of the enrollment of the family, child program services may be continued until the end of the semester or for three months, whichever is less. If re-affiliation is proven for the next semester prior to the child’s last day, child care services may continue.

Should loss of affiliation occur a second time, the parent or legal guardian is expected to notify the Enrollment Coordinator immediately. The parent or legal guardian must apply for a waiver of affiliation in order for services to continue. The waiver process is described in the following section (APPLYING FOR A WAIVER OF AFFILIATION).
APPLYING FOR A WAIVER OF AFFILIATION

If parents wish to request a waiver of affiliation, they must apply to the Enrollment Coordinator. It should be kept in mind that it is unlikely that the Enrollment Coordinator will grant such a request due to the extensive waiting list for UMCDC services. However, since individual circumstances vary, parents are encouraged to bring their requests. The following steps should be followed in applying for a waiver of affiliation: (1) A written note should be sent to the Enrollment Coordinator indicating a parent’s interest in applying for a waiver of the affiliation requirement. Indicate the semester in which this waiver would apply. (2) The Enrollment Coordinator will discuss this request with the Education Coordinator. (3) The Enrollment Coordinator will set up a meeting with parents or guardians requesting the waiver of affiliation to discuss the circumstances surrounding the situation. Then the Enrollment Coordinator will make a recommendation to the Education Coordinator. The Education Coordinator may accept or reject the Enrollment Coordinator’s recommendation. The Education Coordinator or Enrollment Coordinator will communicate a final decision to the parent within five business days of the meeting.

In circumstances of bereavement, loss of an affiliated spouse, a final request may be made to UMCDC Director for a waiver of 30-90 days.

TIMES, LIMITS, AND CLOSURE OF UMCDC

UMCDC is open five days per week, Monday through Friday, 52 weeks per year, closing on University holidays, and eight to ten days for staff development. A calendar of days closed is provided upon enrollment and is updated annually (located inside the back cover). The annual calendar is distributed to all parents and is posted in the reception area, on the website, and printed at the end of this Handbook.

UMCDC’s hours of operation are from 7:30 a.m. to 5:30 p.m. You may not enter the building until 7:30 a.m. and you must be out of the building by 5:30 p.m. UMCDC is closed on University holidays, staff development days, or during emergency weather conditions when the University announces it is closing. In event of a University closing, University Relations will notify faculty, staff, and students “as quickly as practical through internal and external communications systems, including, as appropriate, the University's e-mail, TXT-U, voice alert system, and home page, as well as broader external media resources (television, radio), once a decision is made to execute a closure,” (see the University’s policy on Campus and Building Closings at http://www.policy.umn.edu/).

UMCDC meets the Minnesota Department of Human Services (MN DHS) qualified staff and ratios to supervise children at all times. Children are the responsibility of their parent, legal guardian, or designated alternate adult before and after the official opening and building closing times of UMCDC (7:30 a.m. and 5:30 p.m.), and before the child is signed in or out each day on the sign-in/sign-out sheet posted in his or her age group area. Children are not permitted to run in the hallways, nor are they allowed to open the Center door or exit without the parent. Parents are expected to enforce this rule/boundary.

PARKING

The parking lot is owned and managed by the University of Minnesota Parking Services, not the U of M Child Development Center. Rules for parking are prescribed and enforced by Parking Services. Please take caution to abide by the parking rules or expect to be ticketed. All un-posted spaces are reserved for paid contract-parking customers. For information about obtaining a contract space call 626-PARK (Lot C57). Contract tags must be displayed in the front window of the vehicle while parked in the lot.

Marked/Signed spaces indicate approved, temporary parking for the following:

- Accessible reserved parking
- Short-term drop-off or pick-up parking for Child Care parents (20 minutes maximum)
- Metered parking (good for up to 4 hours). This is best used by visitors and parents who need to be at UMCDC longer than 20 minutes
- Official University parking space: must have an approved permit visible through the front window of the vehicle

Please comply with all signage, including “one way” signs, and drive slowly and carefully. Please do not park in the front pedestrian walkway.
**ARRIVAL, DEPARTURE, AND CLOSING**

- Upon classroom arrival, parents and children must wash hands (per NAEYC Accreditation Standards). **Parents must sign in their child each morning upon arrival** (mandated daily by MN DHS statute) in order to transfer responsibility of care from parent to authorized UMCDC staff. **After the child is signed in, the parent brings the child to the group, and ensures their child is assimilated into the group. UMCDC staff will assist parents with a smooth transition.**

- **At departure, parents must sign out the child and let the teacher know he or she is departing** (mandated by MN DHS). Once the child is signed out, he or she is no longer the responsibility of UMCDC staff. **Children are not permitted to run in the hallways or out the doors. Parents are expected to enforce this rule/boundary.**

Children are encouraged to arrive at UMCDC after 7:30 and no later than 9:30 each morning to allow them to participate in the full program. Children cannot arrive in the classrooms before 7:30 a.m. This is the teacher’s time to set up activities and prepare the room for the day.

Parents (or authorized adults) must sign in and out each day in their child’s bungalow or at the field trip or evacuation site and accompany children into and out of the building at all times. **Signing your child in and out is a legal matter that is required by MN DHS Licensing. Teachers use the sign-in sheets to keep accurate count of children.**

If you will be away from your office or regular schedule, **be sure to leave a phone number where you can be reached in case you are needed for an exclusion or an emergency. A fine is assessed if we are unable to reach you within one hour. (See SERVICE CHARGES AND PENALTIES).**

**Late Arrival/Evacuation/Field Trip:** If you will arrive later than your usual drop off time, please call UMCDC and leave a message for your child’s teachers. If your child’s group is on a field trip when you arrive, it **is your responsibility to await their return or to take your child to the field trip site.** If your child’s group is in the process of evacuating the building or taking shelter when you arrive or are leaving, please see **EVACUATION AND TAKING SHELTER.**

Parents should be in the building by 5:15 p.m. to pick-up, dress, and sign out your child in order to ensure departure is complete by 5:30 p.m., when the building is closed.

**Late Pick-up:** The building closes at 5:30 p.m.; you should no longer be in the building. All children must be picked up by 5:30 p.m. If you will be late, it is helpful if you call before 5:00 p.m. to let teachers and your child know. A late fee is charged to parents who arrive at or after 5:30 p.m. (the building closes at 5:30 p.m.). (See **LATE PICK-UP POLICY** for payment details). Chronic lateness is defined as arriving at or after 5:30 p.m. 3 times during a semester and is cause for termination of child care services. **Children benefit from routine arrival and departure times; parents are urged to keep regular schedules whenever possible. Regular arrival and departure times are necessary for optimum and appropriate staffing, and for staff to complete their duties. No one should be in the classroom from 5:30-5:45 p.m.**

**Prior notification is required for anyone other than the child’s parent (custodial parent) or legal guardian to pick up a child.**

UMCDC staff will not release a child to anyone other than the child’s parent (custodial parent) or legal guardian unless we have been notified in advance by the child’s parent or legal guardian that an alternate will be picking up the child. We will not release the child to either of the emergency contacts listed on the Emergency Card unless the parent or guardian has informed us in advance that the emergency contact is the alternate pick-up person for a specific day or days. The exception to this would be in the case of an exclusion or an emergency and **only then if the authorized to pick up and transport “yes” boxes under the emergency contact’s name on the EMERGENCY CARD have been checked.** For example: If the child has not been picked up by 5:30 p.m. and we have not heard from nor been able to contact the child’s parent (custodial parent) or guardian, an emergency situation exists. We would then call the emergency contacts. The child would be released to one of the individuals if she/he has been authorized on the EMERGENCY CARD to pick up and transport the child.

UMCDC is required to document in the child’s record the names, addresses, and phone numbers (or any legal restraining order or court divorce record of court ordered custodial agreement) of any individuals authorized by the child’s parents or legal guardians to transport the child to and from UMCDC. **A CHILD PICK UP BY AUTHORIZED ALTERNATE must be completed in advance by the**
parent, legal guardian, or UMCDC staff person at the direction of the parent or legal guardian over the phone, and signed and dated by the person completing the form. If a UMCDC staff person is completing the CHILD PICK UP BY AUTHORIZED ALTERNATE, the identity of the parent or legal guardian will be verified with a photo ID on an official document, e.g. Driver’s License, Passport, etc.

If UMCDC staff has never met the authorized alternate for pick-up, they will be asked to provide government photo identification.

EVACUATION AND TAKING SHELTER

To comply with the Department of Human Services licensing rules and for the general safety of the children and the staff, UMCDC conducts fire and tornado drills. Tornado drills are usually conducted on the first Wednesday of the month, April through October. Fire drills are conducted once a month on a random day and time. NOTE: If the fire alarm is going off, do not assume that it is a drill.

Fire Alarms:
In the event the fire alarm is sounding, parents must follow these procedures:
If the fire alarm sounds as you are dropping off your child, but your child has not yet been signed in:

- Proceed to the designated evacuation site. If you have not reached your child’s bungalow, the designated site is the sidewalk south of the main entry on the parking lot side of the fence. If you have entered the bungalow, follow your child’s teachers and group outside. Remain with your child until the “all clear” is announced. Fire drills are of a very short duration. It takes less than two minutes to evacuate the building and a very short time to determine everyone is out and to sound the “all clear”.

If the fire alarm sounds while you are in your child’s bungalow for pick up:

- Follow your child’s teachers and group outside and remain with your child. Do not stop to dress your child. Do not remain in the bungalow. Do not assume that it is only a drill and you do not have to participate. Someone from administration checks all rooms to ensure that no one has been left behind, but this may not be possible in the event of a real fire. The “all clear” signal cannot be given until everyone is out. Leaving the building as quickly as possible is crucial in the case of a fire, but also minimizes the amount of time children and staff have to be outside during a drill.

If the fire alarm sounds as you are in the hallway leaving the building with your child (i.e., your child has been signed out):

- Proceed to the main entry and leave.

Tornado drills:
In the event a tornado drill is in progress, parents should proceed to the designated shelter site. The designated site is the crib rooms for Infants, and the Multi-Purpose room for everyone else. If you choose to leave during a tornado drill, remember to sign your child out. Your child’s teachers will have the sign in/out sheets with them. In the event of a tornado warning, you are to seek shelter in the Multi-Purpose room and remain until the danger has passed.

RESEARCH ACTIVITIES AND PERMISSION

Research projects conducted at UMCDC are sponsored and supervised by a faculty member. All are reviewed and approved by the University of Minnesota Institutional Review Board (IRB): Human Subjects Committee. UMCDC’s Education Coordinator and the Director further screen, then approve or deny all proposals for research.

Research opportunities are important to the University and are part of the mission statement of the Center. Families who attend the Center are asked to participate and contribute to approved research projects throughout the year if you are comfortable. These research projects are designed by faculty and graduate students from the Institute of Child Development, CEED, Childhood Education and Early Development, Educational Psychology, or other departments within the University.
The procedure for involving children from UMCDC is as follows: (1) Faculty members/graduate students write a summary of the proposed research. (2) The proposal is approved by the University Committee on the Use of Human Subjects, (3) and then by the Director and/or Education Coordinator of UMCDC. (4) The proposal is then reviewed by the Area Coordinators involved. (5) Once approved, (6) a consent form is placed in parent mailboxes. (7) Next, the researcher spends several hours in the classroom getting to know the children in the group. (8) After the children are familiar with the researcher, they may be invited to the UMCDC conference room, to remain in the classroom, or to go to the research site to participate in a project. Projects usually consist of playing a game, answering questions, or completing a task. To respect children, they always have the right to say “no” to participating, or to stop at any time.

Most children seem to enjoy this novel experience. A list is kept of each child participating, and it is posted in the classroom. Before studies are initiated, a summary (i.e., Request for Research Population) is sent home through the Parents Mail. These summaries are distributed in advance to all families in the participating classrooms. All studies are also posted on the Parent Bulletin Board, which is located in UMCDC’s foyer and in the Bungalows. Parents having questions or concerns may contact their child’s teacher, the Education Coordinator, Director, or the researcher conducting the project.

*Administration, Teachers, and student workers who have contact with children have had criminal background checks conducted by the Minnesota Department of Human Services and complete a Confidentiality Statement.
ADMISSION POLICIES

ACCEPTANCE

Parents are notified when a space is available. At the time of acceptance, a non-refundable registration fee of $100 is charged and will be applied to the first parent billing. Enrollment of a sibling also requires a $100 registration fee, and will be added along with other charges to the parents’ existing account.

PRE-ADMISSION

To enroll, parents meet with the Enrollment Coordinator and/or Director to review enrollment forms and UMCDC’s policies. An intake meeting with the child’s Area Coordinator is scheduled. Enrollment of siblings does not usually require a meeting with the Enrollment Coordinator, but an intake meeting with the child’s Area Coordinator is still required.

The child cannot begin attending UMCDC without a current, signed IMMUNIZATION RECORD and the completed EMERGENCY CARD.

ENROLLMENT FORMS

When your child is enrolled in the UMCDC program, you are given this handbook (which includes health policies), and several required admission forms. You must read, understand, and agree to abide & implement all policies in this handbook. The Center requires you to sign and date a form stating this. You will also receive a Child Care Program Plan from your child’s Area Coordinator (Bungalow Teacher/Supervisor).

| 9503.0045 CHILD CARE PROGRAM PLAN – MINNESOTA DEPARTMENT OF HUMAN SERVICES |
| Subpart 1. General requirement. Must develop a written child care program plan, and the license holder must see that it is carried out. |

Minnesota State child day care licensing rules prohibit the enrollment of any child without a signed physician’s statement declaring the status of the child’s health and immunization schedule consistent with current medical standards. ENROLLMENT AGREEMENT FORM, UNIVERSITY AFFILIATION, REDUCED FEE APPLICATION FORM, EMERGENCY CARD, RESEARCH PERMISSION, and other forms must be completed and submitted before the child is enrolled and may attend. The EMERGENCY CARD must be kept current by each parent. We ask that student parents also submit their class schedules each semester.

In the case of separated or divorced parents, UMCDC’s enrollment agreement is with the University-affiliated parent or legal guardian; this is the parent responsible for meeting all obligations of the enrollment agreement.

UMCDC, as part of the University of Minnesota, is subject to the Minnesota Government Data Practices Act. UMCDC gives written privacy rights statements when collecting private or confidential information on parents or children enrolled. This written statement is included on the forms we use to collect private or confidential data and includes the reason the data is being collected, how we will use the data, with whom we will share the data (University of Minnesota Department of Audits, Community Services Department of Hennepin County, etc.), whether the client may refuse or is legally required to provide the data and the consequences of refusing to supply the data. While the University Attorney’s Office serves as the general Responsible Authority for the University of Minnesota, the Director of UMCDC is delegated the Responsible Authority for the Child Development Center.
PARENT INFORMATION

Parent Mail: Parents are assigned a mailbox for each child. Please check each parent box daily.

Bulletin Board: A parent bulletin board is located on Administrative Avenue and on Toddler Lane. Information is also posted on the kiosk in the reception area as you enter. Each Bungalow maintains a special parent-staff communication board in the classroom, usually near the sign-in/out sheet.

Child Care Program Plan: Each Bungalow has an area packet containing a written Child Care Program Plan that is given to parents upon their child’s enrollment into that age group. This plan describes all aspects of the area: developmentally appropriate goals and objectives, recording and reporting of children’s developmental progress (social, emotional, physical, and intellectual growth), involvement and responsibilities of parents, staffing, and the classroom’s daily schedule. Please refer to the area packet whenever you have questions about your child’s classroom, or discuss your questions with the Area Coordinator.

Who to see:

Director – regarding UMCDC; mission, program policies, philosophy, curriculum, child development, legal compliance, oversight, management of personnel matters, professional development and staff training, child development, assessment, and University research.

Education Coordinator – regarding day to day operations, classroom practices, resource & referral, family concerns, staffing, and procedures.

Enrollment Coordinator/Administrator – regarding enrollment/disenrollment, waiting list questions, affiliation, summer leave of absences, front desk matters, calendar/meetings/appointments, kitchen, USDA, menu or food, Child and Adult Care Food Program (CACFP) updates, affiliation, building/facilities, billing/parent fees and payments.

Area Coordinator – regarding bungalow and classroom operations, practices, procedures and routines, supervision of Bungalow teaching staff, and volunteering.

Teacher & Assistant Teacher – regarding day to day curriculum with your child, routines, documentation, assessment, child development, conferences, input and concerns.

6-WEEK SURVEYS

Initial Enrollment: When your child has been in attendance for 6 weeks, you will receive a survey. Please return them to the front desk. The survey is reviewed by the Director, Education Coordinator, and Area Coordinator. The survey helps us to better understand how you are initially experiencing the UMCDC and to answer questions, make clarifications, or improvements, if necessary.

Inter-Bungalow Movement: Six weeks after your child transitions from one area to another (Infants to Toddlers, or Toddlers to Preschool) you will have an opportunity to complete another questionnaire.
WAITING LIST POLICIES

WAITING LIST ORDER OF PRIORITY

UMCDC maintains a lengthy computerized waiting list. When submitting an application for your unborn child, UMCDC requires documented evidence from your physician of a confirmed pregnancy at/after the first trimester. The date of application, preferred start date, and the age of the child determine a child’s position on the external waiting list. As openings at UMCDC occur, enrollment of a child in any one of our three age groups is determined by these criteria in the following priority order:

1. Child of a full time UMCDC staff member. (Retention)
2. Internal movement – moving a child from a younger bungalow to an older bungalow on the basis of the child’s age and available opening. (Movement within the bungalow, from the younger room to the older, is determined by the teaching staff).
3. Child currently enrolled at UMCDC on a part time schedule returning to a full time schedule or vice-a-versa.
4. Previously enrolled child returning from an approved and paid leave of absence. (See SUMMER LEAVE OF ABSENCE POLICY)
5. Sibling of a child currently enrolled or enrolled at the time of the sibling’s conception or initial adoption application. (UMCDC application form must be submitted and application fee paid.)
6. Child on the waiting list.

SIBLING PRIORITY POLICY

In order that we may better serve their families, siblings of enrolled children at UMCDC have a priority status on the waiting list. Prior parent fee payment history will be considered before an offer of enrollment is made. A sibling born after the older child is no longer enrolled at UMCDC has priority status as long as she/he was conceived (or the adoption process started) prior to the older child’s departure from UMCDC. An application for the sibling must be submitted and application fee paid.

PART TIME ENROLLMENT

UMCDC has one set of part time enrolled children per Preschool classroom. Children in part time enrollment arrangements share a full time enrollment slot. One child attends on Monday, Wednesday, and Friday, and another child attends on Tuesday and Thursday. UMCDC does not offer any other part time scheduling arrangements. Please contact the Shirley Moore Lab School for half day programs/part time programs.

If your preschool child is enrolled Full Time and you wish to move them to a Part Time position, a PART TIME REQUEST FORM must be completed and returned to the Enrollment Coordinator. There is no guarantee that a part time preschool spot will become available. Requests to return to a full time enrollment schedule must be made in writing at least two weeks in advance of the requested start date.

The date the request is received, as well as the availability of the requested enrollment arrangement, determines if and when the change of schedule can be accommodated.
MOVEMENT/TRANSITION TO OLDER GROUPS

Movement between the areas (from Infants to Toddlers, or from Toddlers to Preschool) is based on the availability of an opening and the age of the child. Intra-bungalow movement (movement from the younger room to the older room in the same bungalow) is determined by the Enrollment Coordinator, Area Coordinator, and primary teachers. It is also dependent upon availability of an opening. Factors in addition to the age of the child may be considered in intra-bungalow movement, such as length of time in the classroom.

Chronological age, by date of birth, is the major factor determining who will move from a younger bungalow to an older bungalow when an opening becomes available.

An exception may be made to chronological age movement if the teacher, the parent(s), and the Education Coordinator agree to have the child wait in the younger area until they are developmentally ready to move. Exceptions could be made to avoid having the child go through a transition prior to leaving the program, to complement room dynamics, or to balance the gender make-up of a classroom.

The child’s Area Coordinator notifies the parent(s) when movement is going to occur. Children and parents are to visit the area to which they are moving, prior to movement actually taking place.

We understand that many parents have an interest to suggest a particular bungalow, however parental preference for a child to be placed in a specific bungalow cannot be a consideration for movement. When an opening becomes available for the chronologically eldest child to move to the older area, they must move to the older area or leave the program. A parental request for the child to remain in the younger classroom for other than developmental reasons cannot be honored unless it is for the purpose of sparing the child from going through an additional transition prior to the family leaving the program.

CHILDREN TRANSITIONING TO KINDERGARTEN

Children who will be transitioning to Kindergarten must have a last day within the first ten days to two weeks of August. It is in the best interest of transitioning children, for purposes of UMCDC maintaining full enrollment, to accommodate new faculty, staff, and University students.
THE STAFF

EMPLOYMENT/BACKGROUND STUDY

**Background Study**: All UMCDC employees are in conjunction with the University’s Department of Human Resources application and employment system. All employees must pass the MN Department of Human Services Applicant Background Study.

**Full Time Staff**: UMCDC full time staff are PNA civil service or bargaining unit employees of the University. Salaries of civil service and bargaining unit staff are determined by compensation plans developed by and agreed to by the University of Minnesota. Area Coordinators must have at least three years demonstrated experience teaching young children, supervisory experience, and have and maintain a teaching license. Full time teaching staff are educated and experienced in early childhood education, many hold undergrad or graduate degrees and/or teaching licenses.

**Part Time Staff**: Part time staff are referred to UMCDC by the University’s Department of Human Resources and are either student or technical bargaining unit University employees. UMCDC administrative staff screen, orient, and supervise.

When a Director is hired the search committee is chaired by Sr. Research Dean, David R. Johnson, Ph.D., the head of ICD, or one of the co-directors of CEED. The committee consists of a parent, a teacher, a UMCDC Area Coordinator, and the Education Coordinator. The final approval is by the Dean of the College of Education and Human Development.

PROFESSIONAL TRAINING AND INSTRUCTION

Each year the Director and teaching staff in group child care programs are required by state law to participate in relevant training equal to 1 to 2 percent of annual hours worked. Additionally, teaching staff that hold current MN licensure must complete 125 Continuing Education Unit’s every 5 years.

UMCDC provides on-going professional staff development opportunities including weekly staff and Area Coordinator meetings, special workshops, Regents Scholarships for accredited courses offered at the University, Staff Development Days, professional workshops, and conferences. Staff participate in pediatric first aid, CPR, OSHA, Abusive Head Trauma training, and Risk Reduction plan, and NAEYC accreditation training on standards, processes, and procedures. Infant staff is also trained in SUIDS (Sudden Unexpected Infant Death Syndrome).

Staff Development Days are included in your weekly fees (see DAYS CLOSED inside the back cover).
STAFF COMPOSITION

ADMINISTRATION
1 full time Director
1 full time Education Coordinator
1 full time Assistant Administrator/ Enrollment Coordinator
2 full time Principal Office Specialists
2 part time Student Secretarial Assistants/Receptionists
1 part time Student Building and Grounds Worker

FOOD PROGRAM
1 full time Cook
1 full time Food Service Worker
1 part time Student Kitchen Helper

TEACHING STAFF

INFANTS
18 FTE children ages 3 to 16 months old in one bungalow, two classrooms (1:3 ratio)
1 full time Area Coordinator*
2 full time Teachers
3 80% to 100% time Assistant Teachers
Regular part time student child care workers to meet ratio

TODDLERS
54 FTE children ages 16 to 33 months old in two bungalows, four classrooms (1:4 and 1:5 ratio)
2 full time Area Coordinators*
4 full time Teachers
4 full time Assistant Teachers
1 full time “Floating” Teacher
Regular part time student Child care workers to meet ratio

PRESCHOOL
68 FTE children ages 33 months to pre-kindergarten age in two bungalows, four classrooms (1:8 and 1:9 ratio)
2 full time Area Coordinators*
6 full time Teachers
3 75% to 100% time Assistant Teachers
Regular part time student child care workers to meet ratio

1 full time Floating Teacher
CCW’s – Childcare student workers – number varies

*Area Coordinators are also part of administration
PARENTS HIRING UMCDC STAFF TO DO PRIVATE CHILD CARE

UMCDC does not approve or give references for any full or part time teaching staff or student child care workers. UMCDC will not provide lists of “babysitters” or allow posting at the Center for liability reasons.

Parents may request and employ UMCDC full or part time staff to independently perform child care services outside of their paid scheduled work time. UMCDC staff may accept or reject such requests and are free to establish their own pay level and work agreements. Both parties must understand that UMCDC and the University of Minnesota bear absolutely no legal or professional responsibility for such private, independent “babysitting” arrangements. UMCDC maintains the following requirements related to this type of parent/caregiver relationship.

1. ARRANGEMENTS TO HIRE AND TO BE HIRED: These arrangements must be made outside the employee’s paid job responsibilities at UMCDC. Employees of UMCDC are not to be approached while they are at work. Phone calls must be made before or after work hours rather than while the employee is working in the classroom or play yard.

2. PRIVATE CHILD CARE NOT PROVIDED ON UMCDC PREMISES: Employees of UMCDC may not provide private child care on UMCDC premises. A UMCDC employee may perform parent authorized drop off and pick up of children only outside of their paid UMCDC work time to sign the child in or out.

   Exceptions:
   • Staff Parent: When a UMCDC staff member provides child care for their own child at the end of the day while on paid work time, it must be done in compliance with DHS teacher/child ratios and with the knowledge and approval of the employee’s supervisor
   • In the event of an emergency: Exceptions may be made on an individual, as needed basis in an emergency situation such as UMCDC closing early, an automobile accident involving the parent or parent designated pick up person, etc. However, even in emergency situations, the employee’s paid work time must not overlap with private child care provision. (See #4 CONFLICT OF INTEREST)

3. PARENT AUTHORIZED PICK UP: Parent authorized pick up of a child by a UMCDC employee must not overlap with the employee’s paid work time or closing responsibilities (see #4 CONFLICT OF INTEREST). Parents must provide authorization each time that an alternate to the parent is picking up the child.

4. CONFLICT OF INTEREST: An employee must never accept payment from a parent to provide child care services while he/she is working on a paid assigned UMCDC work schedule.

   • Teaching staff may not take children into their classrooms for the purpose of providing individual child care while they are signed in as UMCDC staff.

The employee must not display behaviors or attitudes that show preferences or prejudices regarding any child for whom he/she has provided private child care. Both of these situations represent a conflict of interest and put the employee in violation of University of Minnesota policy.

5. CONFIDENTIALITY: Information gained from private in-home child care arrangements by UMCDC employees must remain confidential. Information, other than that shared with all parents about UMCDC, its family clients, or its staff, is not to be shared by UMCDC employees with parents employing them to provide private child care.

6. TERMS OF AGREEMENT: The terms of the agreement (to hire and be hired) between the parent and the employee must remain strictly a private agreement. UMCDC and the University of Minnesota cannot be held liable for any disagreement or dissatisfaction between the two parties.
PROGRAM PHILOSOPHY AND PRACTICES

CENTER PHILOSOPHY

Philosophically, UMCDC is based on socio-cultural, social constructivist and ecological theories inspired by the schools of Reggio Emilia and Pistoia, Italy. The Center is accredited by the National Association for the Education of Young Children, NAECY with which UMCDC practices are aligned. Some examples of the theoretical work on which the center draws are Vygotsky, Piaget, Bronfenbrenner, Erickson, Honig, Gonzalez-Mena, Katz, Pruet, Montessori, Rinaldi, Edwards, Gandini, Lally & Mangionne.

Teachers see themselves with children as facilitators, co-researchers and co-constructors of knowledge in areas of psycho-social, motor and cognitive development. Teachers develop and create curriculum around children’s interest(s), observations, assessment and the teachers’ knowledge of development. Thus, the curriculum is a balance of teacher and child initiated projects and activities. Teachers view children from the perspective of an asset model that is children are born wired to learn with curiosity and the desire to learn. The role of caregivers (teachers & parents) is to assist and facilitate development.

The physical Environment incorporates natural elements and is meant to be sensory rich, and engaging to children. Simultaneously, the Bungalows are comfortable “homey,” walls, shelves and closet areas organized and uncluttered. Like cities in Italy, the environment is seen as the “third teacher.” Therefore, attention is given to the bungalow foyer, “play castles” and classroom(s), to lightscapes, natural elements e.g. plants, furniture, equipment, and intentional materials for problem solving, projects and activities.

Curriculum(s) provides a framework for developmentally appropriate experiences to engage children, give them opportunities to explore, problem solve and investigate. In infancy this curriculum is primarily embedded in routines, caregiving relationships and practice of basic physical development. In toddlerhood time is given to curriculum based in play, psycho-social and cognitive domains while continuing to work on a variety of motor skills. For children in pre-k there is a new mastery and sense of competence from the earlier years which leads to an increase in cognitive domain activities, “executive functioning,” exercising self-regulation, working on projects collaboratively, and “planning.” Curriculum is responsive to children’s interests and needs.

Readiness is looked at developmentally. The indicators in the assessment tool that UMCDC uses are progressive and give a picture of each child’s progression. A significant indicator of readiness and of success for life is “self-regulation.” This includes perseverance, the ability to wait, to meet one and another’s needs, to share and to self-calm. We assist in the development of self-regulation and readiness with routines so that children can anticipate, thus helping them to wait, to learn some ways to self-calm and by setting boundaries that make children feel safe and secure, mentally and physically. Through our interactions, routines, explorations, guided activities and small group projects we exercise these skills. Our aim is that when children leave for school they have a basic taxonomy of cognition, a working model to acquire knowledge about things they want to or will need to learn at school and “executive functioning.” This model includes basic steps for children and caregivers to use when engaging in explorations, problem solving, individual, small and large group activities. The steps include problem solving, naming/identifying comparing/find likeness, contrasting/find difference, seeing patterns, finding or predicting “what’s next,” generalizing, and creating.

Assessment is an integral part of our program to support children’s learning and development of curriculum. We use a variety of methods such as observations, work samples, photos and the California Department of Education/Child Development Division assessment tool, Desired Results. We do not use “tests,” we choose to use “naturalistic assessment,” that is, teachers use daily interactions, activities, quotes and dialogues, individual, large and small group activities, and projects to document development.

Assessments are done on an ongoing basis. Every full time child is assessed in the first 60 days of enrollment; part time children are assessed in the first 90 days. Infants, toddlers, and preschool children are assessed twice a year. Dates for the next assessment are marked on the front of the assessment tool so that timelines are adhered to.

Teachers coordinate conference schedules to meet with parents during Center hours. Teachers are required to make and to document/log three attempts to meet with parents at the close of each assessment period. These assessments, using the Desired Results tool and other documentation are used in the conference process. Parents are expected to give input a week to ten days prior to the conference by filling out a Desired Results form to enhance the assessment process. If concerns arise, teachers, supervisors, and/or the parents together discuss how to help strengthen the child.
**Assessments are kept in confidence**, therefore, not stored in the classroom. We do not want parents to compare their child to another or to have unauthorized personnel look at sensitive material. Any deviation from this policy of confidentiality will be investigated. Staff are held accountable for infractions.

In a developmental lag or concern we begin by meeting with you, the parents, to review our concerns and to get your input. Then, with your consent, steps are then taken to arrange for a developmental screening and referral for diagnostic assessment (see Referral Process).

**DIVERSITY, MULTICULTURALISM, AND ANTI-BIAS**

The University of Minnesota Child Development Center demonstrates an ongoing commitment to integrate diversity in every aspect of its program. Because children live in a diverse and complex world, they interact daily with people different from themselves. The curriculum helps children develop, explore and strengthen their self and group identities, while interacting respectfully with others in a multi-cultural environment. The curriculum is a proactive approach to reduce prejudice and promote inclusiveness and diverse, and kindness. The teaching staff guides children to think about unfairness and asserting themselves in the face of bias. This teaching approach values diversity and challenges bias. We teach children to recognize and respect both likenesses and differences among individuals. The philosophy at UMCDC is a commitment to address bias and practice our value for diversity in a developmentally appropriate way for preschool. UMCDC strives to balance its institutional culture with individual cultural interests of the families it serves. Respect for the Center’s diverse community is reflected in UMCDC philosophies, policies, Developmentally Appropriate Program curriculum, assessment, and program goals.

**CHALLENGING AND/OR HURTFUL BEHAVIOR**

Challenging or hurtful behaviors, e.g. biting, hitting, kicking, are identified as **hurtful or challenging behaviors**. UMCDC has procedures and policies in place to deal with these. We believe that most **hurtful or challenging behaviors** are a young child’s inexperienced attempt to meet his or her immediate needs or frustrations. The teacher’s role is to observe and create an environment that is uncluttered, organized and engaging for the children in the classroom. We support and assist children in their interactions with one another. From infancy on we work with children to meet and satisfy their needs and desires while modeling and giving them opportunities to exercise and strengthen their competency in conflict resolution, self-regulation, and self-calm to bring down their arousal state.

At about age 3, children are fascinated with the concepts of good and bad, and the acting out of roles that depict these concepts. In our experience, these play activities are not intended to harm another person, but rather indicate an attempt to experiment with power and the behaviors associated with power figures. While we do not interpret these activities as desiring to hurt, we understand that these behaviors can be frightening to other children, or accidentally hurtful. For this reason, we prohibit bringing certain items to the Center, such as weapon facsimiles, or other toys that suggest or promote these activities or TV “violence.”

A primary focus of curriculum activities is to develop self-regulation and conflict resolution skills. We interpret some activities, as mentioned above, as children’s attempts to experience being strong and powerful. If this is the case, we look for alternate ways for children to experience being strong, powerful, and competent. Examples are: being the teacher’s helper, having special jobs (carrying the clipboard to the next activity, showing younger children how to do things, etc.); providing an interesting and challenging environment; instead of power rangers, working to engage the children in powerful community helper roles such as firepersons, nurses and doctors, and redirecting potentially fear-producing activities.
GUIDING CHILDREN TOWARDS SELF-REGULATION

Self-regulation is an important indicator and predictor of success throughout life. It begins in infancy by a child being in a nurturing environment with responsive caregivers. When an infant is cared for and played with in a consistent, predictable manner they come to be attached and trust that “the world is an okay place.” As they grasp this they are comforted and learn to stop crying, that is to regulate the crying when they are responded to. This is the beginning of self-regulation. Simultaneously, they begin to learn “self-calming,” e.g. they may learn to suck their thumb, rub a cheek on a satin blanket trim, and/or use a pacifier. Self-regulation is made up of: impulse control, seeking other’s to help regulate, responsiveness to support, self-comforting/calming focusing attention, and perseverance. These components are taken directly from the California Department of Education/Child Development Division developed by West Ed/PITC (Program for Infant and Toddler Caregivers) assessment tool used at UMCDC. You might want to read the progression of these components in your infant’s binder or discuss in a conference (the assessment tool is birth to 36 months). The next indicators of self-regulation use the next level of the assessment tool, from 36 months to 5 years. At this level, impulse control is measured with self and with others (friends, classmates), that is in such things as “turn taking” and the “shared use of space.” These will be in your child’s preschool binder and a copy of the tool is posted in your Bungalow. It has been our experience that children vary a great deal, some walk early, some walk later, some talk early, some later, some toilet learn early, some later, and some develop stronger self-regulation early and some a bit later. As children get toward the age of five they begin to develop greater awareness of social and other rules. This means that they can begin to play games and can wait a turn or do so if reminded by an adult, or they may remind others to follow a rule, “You can’t cross the street alone; wait on the curb until the teacher or your mom/dad is here.” You may notice they can focus or refocus themselves during a story or story time circle. Also, rather than grabbing a toy back, they probably use a conflict resolution technique or seek the help of an adult. Self-regulation is important for a myriad of reasons, among them, key to the child, is the ability to establish relationships, to have friends and a sense of belonging (community) with others. Unregulated children often feel left out, unsure, and unhappy. We strive to assist your child in building the skills that lead to self-regulation. At home you may have many ways to build on these around play dates, meals, baths, and sleep time, etc. Boundaries, consistency, predictability (around routines), your engagement, responsiveness, and constancy assist your child to develop self-regulation.

As a Child Development Center licensed by the State of Minnesota, Department of Human Services Rule #3, UMCDC must abide by the following guidelines 9503.0055 BEHAVIOR GUIDANCE.

Subpart 1. General requirements of a Center:

Must develop written behavior guidance policies and procedures, and the license holder (UMCDC) must see that the policies and procedures are carried out. The policies and procedures must:

A. ensure that each child is provided with a positive model of acceptable behavior;

B. be tailored to the developmental level of the children the center is licensed to serve;

C. redirect children and groups away from problems toward constructive activity in order to reduce conflict;

D. teach children how to use acceptable alternatives to problem behavior in order to reduce conflict;

E. protect the safety of children and staff persons; and

F. provide immediate and directly related consequences for a child’s unacceptable behavior.

Subpart 2. Persistent unacceptable behavior:

Must have written procedures for dealing with persistent unacceptable/challenging behavior that requires an increased amount of staff guidance and time. The procedures must specify that staff:

A. observe and record the behavior of the child and staff response to the behavior; and

B. develop a plan to address the behavior documented in item A in consultation with the child's parent and with other staff persons and professionals when appropriate.
Subpart 3. Prohibited actions:

Must have and enforce a policy that prohibits the following actions by or at the direction of a staff person:

A. Subjection of a child to corporal punishment. Corporal punishment includes, but is not limited to, rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting, and spanking.

B. Subjection of a child to emotional abuse. Emotional abuse includes, but is not limited to, name calling, ostracism, shaming, making derogatory remarks about the child or the child's family, and using language that threatens, humiliates, or frightens the child.

C. Separation of a child from the group except as provided in subpart 4.

D. Punishment for lapses in toilet habits.

E. Withholding food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior.

F. The use of physical restraint other than to physically hold a child when containment is necessary to protect a child or others from harm.

G. The use of mechanical restraints, such as tying.

For children with mental retardation or a related condition or children under the age of five, as specified in parts 9525.0004 to 9525.0036, physical and mechanical restraints may be permitted if they are implemented in accordance with the aversive and deprivation procedures governed by parts 9525.2700 to 9525.2810.

Subpart 4. Separation from the group:

No child may be separated from the group unless the license holder has tried less intrusive methods of guiding the child's behavior which have been ineffective and the child's behavior threatens the well-being of the child or other children in the center. A child who requires separation from the group must remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person. When separation from the group is used as a behavior guidance technique, 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 the child must be returned to the group as soon as the behavior that precipitated the separation abates or stops. A child between the ages of six weeks and 16 months must not be separated from the group as a means of behavior guidance.

Subpart 5. Separation report:

All separations from the group must be noted on a daily log. The license holder must ensure that notation in the log includes the child's name, staff person's name, time, date, and information indicating what less intrusive methods were used to guide the child's behavior and how the child's behavior continued to threaten the well-being of the child or other children in care. If a child is separated from the group three times or more in one day, the child's parent shall be notified and notation of the parent notification shall be indicated on the daily log. If a child is separated five times or more in one week or eight times or more in two weeks, the procedure in subpart 2 must be followed.

Subpart 6. Children with mental retardation or related conditions:

For children with mental retardation or related conditions or children under the age of five, as specified in parts 9525.0004 to 9525.0036, the standards governing the use of aversive and deprivation procedures in parts 9525.2700 to 9525.2810 apply.
UMCDC’S REFERRAL PROCESS

1. UMCDC teaching staff will communicate with parents regarding the concern or behavior.

2. UMCDC teaching staff will observe and document children’s behavior(s) at the onset of a concern regarding personal or developmental behavior.

3. UMCDC teaching staff will request the Area Coordinator or Education Coordinator to conduct at least 2 or 3 observations of the behavior(s) of concern.

4. UMCDC teaching staff will receive communication regarding the observations within two weeks.

5. UMCDC teaching staff, Area Coordinator, and/or the Education Coordinator and/or will meet with the parents to discuss the behaviors, observations, and create an Individual Child Care Plan (ICCP), which parents must sign within 30 days.

6. **Resources**: If it is indicated that additional, professional observation is necessary, UMCDC teaching staff will provide parents with a list of potential resources outside of UMCDC that may provide the needed observations: (Please contact and make an appointment to get the results and a plan within 90 days of our conference meeting to ensure the best care for your child.)
   - Local school districts (free of charge)
   - Washburn Child Guidance Clinic (observations and consultation free of charge)
   - participation in a day treatment program is charged to parents)
   - Fraser Child and Family Services (observations and consultation free of charge)
   - Life Track Resources (initial observations free of charge – use of program resources is billed to parents’ insurance)

7. See **Behavioral/Developmental Leave of Absence Policy**

8. UMCDC teaching staff will work with these professionals to arrange for observation and consultation.

9. UMCDC teaching staff, parents, and intervention staff will meet periodically to evaluate the outcome of the intervention and the child’s progress.

10. In the event that the UMCDC teaching staff, parents, and intervention staff cannot come to agreement about the outside professional observation, assessment and program being offered to the child and family, enrollment may be terminated by UMCDC.

11. When a child’s behavior results in either of the following situations, the Education Coordinator will meet with the child’s family and teaching staff to set a date for termination of child care services:
   - The child’s behavior poses a threat to the physical and emotional safety of other children and/or him or her and teaching staff can no longer assure the safety of all children in their care,
   - If after several attempts at intervening with any specific behavior, such as developmental delay, UMCDC may decide the child’s needs may not be met through enrollment here, or if teaching staff is only able to meet the needs of that individual child through frequent and persistent one-on-one attention and care. This compromises our ability to adequately meet our mission and the needs of all of the children in care and also indicates that UMCDC is no longer the most appropriate environment for that child.
Referral Process

Communicate Concern (Parent or Teacher) ➔ Classroom Teacher Observe and Document Behavior ➔ Consult UMCCC Staff Resources ➔ Parent / Teacher Conference

UMCCC Observations with Recommendations ➔ Implement and Document Interventions ➔ Concern or Resolution ➔ Signed Parent Consent ➔ Referral to School District / Private agency to Begin IEP/IFSP Process

Additional Parent Teacher Conference

Twin Cities Resources: The Referral Process is done in a timely manner.

- ECE Screening – Find location for free screening at [www.mnparentsknow.info](http://www.mnparentsknow.info) or 651-582-8412
- Minneapolis Public Schools ECSE Screening – 612-348-TOTS
- Pacer Center – [www.pacer.org](http://www.pacer.org) or 800-537-2237
- Lifetrack Resources – [www.lifetrackresources.org](http://www.lifetrackresources.org) or 651-227-8471
- Fraser Child & Family Center – [www.fraser.org](http://www.fraser.org)
MANDATED REPORTING RESPONSIBILITY

Children need a safe, protected, nurturing environment that assists them to grow, learn, and feel loved by their caretakers. In order to grow and learn, children’s minimum needs for good nutrition, shelter, medical care, bathing, clean clothes, intellectual stimulation, appropriate guidance and boundaries, predictability, love, a feeling of connection and a safe, non-violent home setting must be met. When these needs are not met, a child cannot grow and learn as easily.

MALTREATMENT OF MINORS MANDATED REPORTING
POLICY FOR DHS LICENSED PROGRAMS

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

Where to Report
If you know or suspect that a child is in immediate danger, call 911. All reports concerning suspected abuse or neglect of children occurring in a licensed facility should be made to the Department of Human Services, Licensing Division’s Maltreatment Intake line at (651) 431-6600 or (651) 431-6500. Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the Hennepin County Social Services agency at 612-348-3552. If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota Statutes or Rules that govern the facility, you should call the Department of Human Services, Licensing Division (651) 431-6500.

What to Report
Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556) and should be attached to this policy. A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing facility, the report should include any actions taken by the facility in response to the incident. An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays.

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

Retaliation Prohibited
An employer of any mandated reporter shall not retaliate against the mandated reporter for reports made in good faith or against a child with respect to whom the report is made. The Reporting of Maltreatment of Minors Act contains specific provisions regarding civil actions that can be initiated by mandated reporters who believe that retaliation has occurred.

Internal Review
When the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made, the facility must complete an internal review and take corrective action, if necessary, to protect the health and safety of children in care. The internal review must include an evaluation of whether: Related policies and procedures were followed; The policies and procedures were adequate; There is a need for additional staff training; The reported event is similar to past events with the children or the services involved; and There is a need for corrective action by the license holder to protect the health and safety of children in care.
Primary and Secondary Person or Position to Ensure Internal Reviews are Completed
The internal review will be completed by the Education Coordinator. If this individual is involved in the alleged or suspected maltreatment, the Area Coordinator will be responsible for completing the internal review.

Documentation of the Internal Review
The facility must document completion of the internal review and provide documentation of the review to the commissioner upon the commissioner’s request.

Corrective Action Plan
Based on the results of the internal review, the license holder must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.

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

The mandated reporting policy must be provided to parents of all children at the time of enrollment in the child care program and must be made available upon request.

As mandated reporters, UMCDC staff are required to make a report if there is “reason to suspect” that a child is being neglected or abused or subjected to witnessing domestic abuse, or has been within the past three years. (Please see the resource guide for mandated reporters located in the child’s area of enrollment, MN State statute code section 626.556.) This includes failure to place and secure a child in a car seat. (See CARSEATS below.)

Should you have difficulty in providing for your own child’s emotional or physical needs, or safety you are encouraged to ask for help. Our staff can help you find a community resource that can offer assistance. Some 24-hour community resources which can help you when you find that you are experiencing more stress than you can handle, include:

- Parents Anonymous of Minnesota 651-487-2111 or National Parent Hotline 855-427-2736
- Minnesota Crisis Connection 612-379-6363
- Minneapolis Crisis Nursery 763-591-0100
- Hennepin County Child Protection 612-348-3552
- Ramsey County Child Protection 651-266-4500
- Warmline 612-863-6336

SUSPECTED CHILD ABUSE/NEGLECT

All child care staff are required by Minnesota law to report any suspected incidents of child abuse or neglect to appropriate authorities. (See MANDATED REPORTING RESPONSIBILITY.)

CAR SEATS

Abuse/neglect includes seeing children who are not placed in car seats. Effective June 9, 2009, Minnesota’s seat belt law is a primary offense, meaning drivers and passengers in all seating positions must be buckled up or in the correct child restraint. Law enforcement can stop motorists directly for seat belt violations, including unbelted passengers. A seat belt ticket can cost between $25 to more than $100.

Effective July 1, 2009, a child who is both under age 8 and shorter than 4 feet 9 inches is required to be fastened in a child safety seat or booster seat that meets federal safety standards. Under this law, a child cannot use a seat belt alone until they are age 8 or 4 feet 9 inches tall – whichever comes first. It is recommended to keep a child in a booster based on their height, rather than their age. www.buckleupkids.state.mn.us
TOUCH AND NURTURING

Physical touching is an important part of the care and nurturing of young children. Children feel loved, accepted, and supported through the sensations of touch by nurturing adults and peers. However, physical touch should be respectful of children’s body cues and only occur with their permission. Nurturing touch is necessary for every child’s emotional growth. Affectionate nurturing includes: hugging, holding on lap, rocking, carrying, rubbing or patting backs, cuddling, and hand holding. Children always have the right to refuse these touches except for safety purposes.

Staff members are trained to be sensitive and responsive to children’s requests or denials for physical interaction. They model appropriate nurturing touches to CCWs (Child Care Workers and students).

Except for safety or cleansing, children will always have the right to refuse touch. Children are also taught to respect adults’ and other children’s touch preferences.

It is our policy to inform parents of the nature and type of routine physical contact that your child will experience. Please feel free to discuss or question anything you read in this document.

While tickling may be an appropriate form of playful touch, it is kept to a minimum because of its potential for getting out of hand and being over stimulating.

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

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

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

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

Children are taught through assisted interactions, modeling, and verbal guidance to use words and problem solving rather than hurtful physical reactions to settle their differences with others.
PARENT PARTICIPATION

PARENT CONSULTATIVE COMMITTEE

**Purpose:** UMCDC’s Parent Consultative Committee (PCC) supports the Center, parents and families and works closely with the Director and/or the Education Coordinator. The PCC is not an approving body. Its role is to provide feedback to the Center administration on matters of policy, to help with fundraising, and other Center-based events and activities that benefit parent involvement, children, and the Center overall. All center parents are welcome to become part of the Parent Consultative Committee.

The Parent Consultative Committee confers with the Director and/or the Education Coordinator or committees on topics of interest, such as:

- Parent involvement
- Fundraising
- UMCDC’s strategic plan, outcomes, objectives, tasks and activities.
- Parents’ perspectives
- Events e.g. Week of the Young Child, Kindness Week, Book Week
- Annual surveys and other activities that help maintain our high quality child care program.

Primary responsibilities of each Parent Consultative Committee representative include: (a representative or two from each classroom, please)

- Attendance at scheduled meetings
- Communication to maximize parent involvement in center activities
- Participation in fundraising activities and recruitment of parent volunteers for activities such as Week of the Young Child, Peace and Kindness Week, Literacy Week, Spring Clean Up, and Backyard Project
- Recruitment of parents to serve on the Parent Consultative Committee

Other Parent Consultative Committee activities include:

- Organizing center-wide social events such as potluck dinners, picnics or welcome to new parents.
- Fundraising for specific items, e.g. field trip(s).
- Providing parent representatives in each bungalow to coordinate bungalow and/or teacher/classroom needs to the parent community and assist with communication

OTHER PARENT PARTICIPATION FUNCTIONS

UMCDC staff offer several ways for parents to be involved in the program:

- Area family potluck dinners, classroom events, or parent dialogues/teas are scheduled throughout the year.
- Active parent participation is needed to assist on the following UMCDC strategic committees of the staff: Nature/Science (e.g., gardening), Parent Partnership (e.g. events), and Curriculum (e.g., donation of materials).
- Parents are invited to participate and help with field trips.
- Parents are welcome to visit UMCDC and observe their child anytime, but you are encouraged to consult with the Area Coordinator for purposes of space, schedule, and materials.
- Parents’ expertise, skills, and talent are welcome ...please let us know what interests you, your special skills e.g. music, science, art.
- At times, written parent input via a survey, evaluation of UMCDC is conducted. Other routine questionnaires ask for your input about how well we’re doing with your child such as the 6 week parent questionnaire, we always ask for your input prior to each conference on a form placed in your parent mailbox.

Note: UMCDC has an “Open Door Policy.”
ASSESSMENT TOOLS AT UMCDC

The teaching staff use a variety of tools to assess development. Among those used are “work samples” (for the older children), photos, checklists, anecdotal notes, children’s direct quotes and a developmental assessment tool known as “Desired Results.” “Desired Results” was developed by West ED/PITC (program for infant & toddler caregivers) and the California Department of Education/Child Development Division. Assessment is done naturalistically, that is children are never put in a “testing” situation. By this we mean that these aforementioned ways to assess are done while the children are at work or play. Note: Assessment binders never leave the Center, but may be viewed privately in a UMCDC conference room. However, you will be given a copy when your child goes to kindergarten, disenrolls from, or leaves the program.

An unmarked copy of the assessment tool, “Desired Results” is in each classroom. Also, you will find a copy of your child’s developmental profile, Desired Results in their individual binder in the Bungalow area coordinator/staff office which you can ask to see on request.

PARENT-TEACHER CONFERENCES AND PARENT INPUT FORM AND SURVEYS

Parent-Teacher developmental conferences are offered twice a year (MN DHS Licensing 9503.0090).

9503.0090 Subp. 2. Parent conferences and daily reports. The license holder must ensure that the parent of a child is informed of the child's progress. The license holder must ensure that:

A. individual parent conferences are planned and offered by program staff at least twice a year

You will be asked to fill out a DESIRED RESULTS PARENT INPUT FORM a week to ten days before each conference. Think about strengths of your child and/or share any concerns. Either parents or staff may call for additional conferences as needed. Please return to the AC or teacher at least 3 days prior to the conference.

For all children anticipating kindergarten entrance in the fall after their 5th birthday, teachers use UMCDC’s “DRDP-SR” Assessment Tool.

OTHER SCHOOL APPLICATION FORMS

If parents are applying for their child to attend a private school, kindergarten, or other placement, a fee of $75 will be assessed for every private school application form, at the time of your request. Parents must notify teachers and complete the required paperwork at least two weeks in advance of the time you want the form to be submitted to the private school, as UMCDC must hire a substitute to maintain ratios as the teacher completes the work.

CONFIDENTIALITY AND “EVERY CHILD IS AN INDIVIDUAL”

You are always welcome to ask to see your child’s profile and/or your child’s “developmental Desired Results binder” (or to request a conference). A variety of regulations and guidelines of “best practice” ranging from University policy to MN Dept. of Human Services – Licensing, and criteria requisite to NAEYC accreditation require data privacy and confidentiality of your child’s information. We know, as do you, that children develop unevenly. Some children walk at 10 months, others at 14 months, some children’s toilet learning is early, other’s later, the same with talking and other skills. It is best to not compare your child with another. Your child’s development may be quite uneven from one domain to another e.g. from motor to speech. This is expected; we look at each child as an individual and as part of a group. We plan carefully to help facilitate him/her progress in this natural human unfolding.
Who has access to your child’s developmental profile?
The teachers in your child’s classroom and Bungalow area coordinators have access. No students (CCW’s or other UMCDC teaching staff have access, except in case of transition to the next age group). UMCDC’s Education Coordinator and/or Director have access as well.

All other instances of assessment or screening must be done with parental consent e.g. calling in a school district because of a concern, to observe for purposes of diagnosis. See RESOURCE AND REFERRAL section for further details.

ASSESSMENT TRAINING

Staff training is done at orientation and/or on staff development days. Only the classroom teacher is responsible to mark the assessment tool after taking and reviewing the photos, gathering work samples, writing down quote(s), anecdotal note(s), or an observation(s) by you. The assistant teachers support the classroom teacher by assisting in taking photos, documenting and gathering information.

PURPOSE OF ASSESSMENT AND HOW TEACHERS USE

Teachers assess your child individually and how they work with other children, in groups, and with assistance (scaffolding); what can a child do with assistance or independently. They also look at the group profile. Teachers, “use assessments to refine how they plan and implement activities to integrate their teaching and the curriculum. Teachers meet weekly to do this for their classroom and for review with the area coordinator. Teachers develop short and long range plans for each child and the group based on children’s knowledge, skills, interests and other factors.” From: Developmentally Appropriate Practice in Early Childhood Programs – Serving Children from Birth through 8 years.” Copyright 2009 and NAEYC current standards of NAEYC “Torch.”

FREQUENCY OF ASSESSMENT AND YOUR INPUT

As you know we often daily share information, and you give us information formally or informally. You are always welcome to ask for a meeting to discuss any joys or concerns that you have. We invite you to share your observations from your child’s time with you to contribute to our assessment process. These can be verbal, in writing, a work sample of your child’s, a photo, quotes or narrative of a visit, travel or an experience(s) with your family. When we work as partners, communicating and sharing, we feel that we’ll both do our best for your child.

We observe your children daily; it may be informally or formally. In all areas we mark the tool and hold conferences with you twice annually. The first time an assessment conference is offered is after we complete the first “Desired Results”; this is done within 60 days of enrollment if your child is full-time, or 90 days if your child is part-time, i.e. if your child attends T, TH or M, W, F.

CULTURAL SENSITIVITY AND LANGUAGE

If at any time you would like to discuss matters related to your child, family and your culture, our practices, curriculum or assessment in regard to cultural sensitivity we welcome the opportunity to listen and to discuss these.

Language should not be a barrier to our communication in any way around assessment or in other ways. Please let us know if we can assist you with translation or interpretation.

TWO-WAY DAILY COMMUNICATION – Developing a “Partnership of Caring”

Daily contact between parents and teachers is an essential component of high quality early development programs. By sharing information concerning your child’s activities and welfare, we can together work toward meeting your child’s developmental needs.
in a partnership approach. If your child is sick or will be absent for any other reason, parents are asked to call and leave a message by 9:30 a.m. to explain the reason. If the child will be late we also want parents to call. **Please, remember it it’s the best to have your child here by 9:30 a.m.** so they can fully participate in developmental activities.

Teachers of Infants and Toddlers provide parents with daily written notes about the child’s food intake, elimination, sleeping patterns, mood, and general behavior.

Parents of Toddlers and Preschoolers will receive a “Daily Journal” each day. This will include pictures of the children’s activities, a write up of specific interests the children partook in, and what measures the children worked on through the Desired Results Developmental Profile assessment. This will be emailed to parents during mid-day so that you may receive and look at it before you come to pick up your child.

**Daily notes are a DHS licensing requirement only for Infants and Toddlers. 9503.0090 subpart 2 part 2D**

Teachers of preschoolers do not provide the same kind of daily notes because preschool children are more verbal and there are more children in each classroom.
VISITORS

ADULT VISITORS/TOURS

Because UMCDC is a model, demonstration, training, and research site, many visitors want to observe and/or participate in the program in a variety of ways. We receive many types of requests for visitations. It is a policy requirement that all visitors and parents must sanitize their hands at the front desk, sign in and out at the front desk, and wear a nametag. Further policies related to the specific type of visitor include:

Parents of enrolled children: The UMCDC “open door” policy invites parents to visit or observe the program at their convenience. It is advisable that you check first with your child’s teachers. Lunch visits: Parents wishing to join their child for lunch must purchase a lunch ticket for $3.00 at the front desk preferably by 5:00 p.m. the day before, but no later than 9:30 a.m. the day of the visit, and notify the bungalow Teaching staff. The kitchen may or may not be able to accommodate your lunch request if requests are erratic. If payment has not been received for your meal ticket by the end of the month, your child’s account will be billed for the amount due.

Tours and potential waiting list parents must schedule a time to visit in advance by calling the UMCDC front desk. Regular tours lead by the Center’s Director are offered every other week. Tours cannot exceed six people. Parents who have been offered an enrollment space will be offered priority for a tour. Tours are held every first Tuesday and third Wednesday of the month, both at 9:30 a.m. Questions related to the waiting list should be directed to UMCDC’s Enrollment Coordinator.

University and community people: If a general interest in the overall program and/or facility is desired, we will try to schedule these during routine tour times. In some cases we offer another tour. Tours are only at 9:30 AM (Not during, nap, lunch time, etc.) Children are not allowed on tours.

Special educational and/or individual visitations: Sometimes it is necessary to plan individualized tours and informational visits due to the nature and purpose of the visit. Examples of these special visitors include: University recruitment, pediatric residents, student interns, researchers, potential employees, faculty and student groups, in-service observations by community early childhood staff, and visiting scholars.

UMCDC RESERVES THE RIGHT TO DENY VISITATION TO ANY ONE AT ANY TIME FOR THE PURPOSE OF PROTECTING THE RIGHTS OF CHILDREN, PARENTS, STAFF, AND ITS PROGRAM WORK LOAD.

NON-ENROLLED CHILDREN AND TEENAGE VISITORS

School age children: A child under the age of 16 years who has attended a kindergarten program is, by state Rule 3 day care licensing standards, “considered a school age child and cannot be present in the Child Development Center.” The only exceptions here are when the child accompanies the parent or staff person into the classroom to drop off or pick up an enrolled child.

Teenagers over the age of 16: If a teenager requests to participate in the program, prior approval by the Director and/or the Education Coordinator is required. They must wear a nametag and their name must be written in the weekly staffing schedule. A volunteer, between the ages of 16 and 18, cannot be left alone with the children and must be closely supervised at all times by an Area Coordinator, Teacher, or Assistant Teacher. MN DHS Lic. 9503.0034.

Preschool age child: A child who has never attended kindergarten is, by state licensing standards, defined as a preschool age child. Visits must not exceed ½ hour and must have prior approval of the Director or Education Coordinator and the Area Coordinator. The parent must accompany and supervise the child at all times, since that child is not legally enrolled.
ENROLLED SIBLING

Due to Department of Human Services State Licensing Rule #3, staffing and group size requirements, we are unable to permit visits during the program day between Infants and their Toddler or Preschool age siblings. In the case of an emergency, ratios can be met by staff merging children within the age span of 36 months between the oldest child and the youngest child in the group.
FEES AND PAYMENT

INCOME REPORTING

Families with a gross annual income less than 125% of the state median income (this figure is ever changing) for a family of three are eligible for less than the UMCDC service fee. A REDUCED FEE APPLICATION FORM must be completed with copies of your last 1040 tax forms attached upon enrollment. Each February, May, and October, you will again have to provide documentation to continue to qualify for a reduced fee rate.

In accordance with UMCDC’s policy, fees are determined on the basis of the preceding year’s actual reported gross annual income for the household in which the child lives. (If a joint custody arrangement exists, a copy of the court order must be submitted and fees will then be based on 70% of the combined gross annual income of both households.)

If the anticipated gross annual income for the current year is expected to be at least 10% greater or less than the actual gross annual income reported for the preceding year, the AMENDED INCOME portion of the form must be completed.

If you are applying for a Reduced Fee, you must supply all W-2’s from the previous year along with the REDUCED FEE APPLICATION FORM by February 15th, May 15th and October 15th. The previous month’s pay stubs must be submitted to verify income each quarter as per UMCDC dates.

Failure to comply with the specified three yearly REDUCED FEE APPLICATION FORM updates will result in you being charged at the highest rate for your child’s area of enrollment until the forms are received by the UMCDC staff. In addition, a $50.00 penalty fee will be charged to your account. The updates will be compared with income previously reported. If there is a discrepancy greater than 10%, you will be placed in a new income category and you will be billed for the difference between what you have paid and what you should have paid. This amount will be prorated to March 1st, June 1st, and November 1st of the current year. Since this can result in a substantial assessment, a repayment plan may be worked out with the Billing Specialist and Enrollment Coordinator if authorized by the UMCDC Director. If you over-estimate your income resulting in overpayment of fees, no refund will be issued.

Income is defined as money earned or received by household members before deductions. Salaried wages, tips, unemployment compensation, interest, dividends, grants, income from rental property, etc., all qualify as income for the purpose of determining the fee. Loans are not regarded as income.

If your gross annual income places you in the highest income category, it is not necessary to submit a REDUCED FEE APPLICATION FORM.

PAYMENT POLICIES

UMCDC is a University department relying on revenue from the parent fees for most of its operating expenses. It is essential that fees be paid promptly and regularly.

New families will receive an initial prorated bill from the date of enrollment.

Fees must be paid in advance on a bi-weekly basis.

Fees are based on enrollment schedule rather than on actual attendance. Sick days, vacation days, holidays, staff development days, and emergency closings are considered to be part of the enrollment schedule.

Billing statements for child development services will be mailed to the address listed on your application. Please alert the Billing Specialist or UMCDC Staff of any changes in address. Returned mail will result in a $30.00 administration fee.
Payment is due upon receipt by the Friday after the University payday and will be considered past due if not received by 11:59 PM. A late charge of $30 will be added on the next billing statement and the balance must be paid in full within 5 program days or child care services may be terminated.

If paying by check, payments must be attached to the bottom portion of your invoice. Payments not attached to your invoice will be returned to you, which could delay processing and result in a late fee. If you do not receive your invoice, please contact the billing specialist to obtain another copy.

Payment by check should be made payable to the University of Minnesota or visit online at www.pay.umn.edu.

Payments can be made via credit card online at www.pay.umn.edu.

After termination of service, uncalled payments are referred to the University’s business office collection. This may result in a legal action being taken, including garnishment of wages by the University.

If special circumstances occur and you cannot follow the fee payment policy, you must discuss this matter with the Billing Specialist or the Enrollment Coordinator immediately. An individual adjusted payment plan will be submitted for approval by the UMCDC Director.

Any discrepancies or disagreements concerning your billing statement should also be discussed immediately with the Billing Specialist.

NON-SUFFICIENT FUNDS CHECK

We will charge a $35.00 handling fee for the processing of any check returned to UMCDC due to insufficient funds. Upon receipt of the second Non-Sufficient Funds check, all future child care tuition payments must be paid by cash, cashier’s check, money order, or online.

SERVICE CHARGES/PENALTIES

In addition to the finance charge assessed when parent fees are not paid in a timely fashion, UMCDC has found it necessary to impose service charges or penalties in other situations or parental non-compliance with the University policy, MN State Department of Human Services, Rule #3, licensing regulations, and UMCDC operating policies. Parental non-compliance with policies not only requires additional time and effort on the part of the UMCDC staff, it may also put UMCDC in a position of non-compliance with other governing agencies, subject to fines, other penalties, and/or licensing citations.

The additional charges UMCDC will assess are as follows:

1. A check returned for non-sufficient funds – $35.00 (see NON-SUFFICIENT FUNDS CHECKS under the heading of FEES AND FEE PAYMENT).
2. Late pick-up charge: 1) First infraction – $35, 2) Second infraction – $45, or 3) Third infraction – $55, depending on frequency, per each fifteen minute interval and if first, second, or third time in a semester (Please also see BUILDING CLOSURE AND LATE PICK-UP POLICY).
3. Failure to respond to the second request for proof of University Affiliation – $50.00 (See ELIGIBILITY REQUIREMENTS under the heading GENERAL INFORMATION).
4. Failure to comply with the due dates of the REDUCED FEE APPLICATION FORM update – $50.00 (See INCOME REPORTING under the heading of FEES AND PAYMENT).
5. Returned mail will result in an administrative fee – $50.00. (See PAYMENT POLICIES under the heading of FEES AND PAYMENT).
   a. Incorrect, incomplete, or outdated information on the EMERGENCY CARD is a MNDHS Licensing infraction. If a situation occurs – $50.00
b. Failure to respond within a week to update your child’s emergency card is a MNDHS Licensing infraction – $50.00 (See EMERGENCY CARD under the heading HEALTH AND SAFETY POLICIES FOR PARENTS).

c. Incorrect, incomplete or outdated information of the EMERGENCY CARD regarding your child’s Health Care Provider – $100.00 (See EMERGENCY CARD under the heading of HEALTH AND SAFETY POLICIES FOR PARENTS MN DHS).

d. Failure to respond and to pick up, within an hour of notification, an ill or injured child – $50.00 (See CARE OF ILL OR INJURED CHILDREN).

e. Failure to respond to the second request for updated or current health record information – $50.00 (See HEALTH RECORD INFORMATION under the heading HEALTH AND SAFETY POLICIES FOR PARENTS).

7. Failure to respond to the second request that you provide diapers for your child (Once you owe UMCDC on diaper) your account will be billed $30.00 (See DIAPERING under the heading INFANT TODDLER PROGRAM in the HEALTH AND SAFETY POLICIES FOR PARENTS section).

Note: Failure to submit the state-required medical and emergency information beyond the third request will result in termination of UMCDC child care services.
LEAVES OF ABSENCE

SUMMER LEAVE OF ABSENCE POLICY

We have only ten summer leaves of absence. An enrolled child may take an extended leave (6 weeks or more) in the summer (first day after spring semester finals through last day before fall semester begins) from UMCDC provided that a Leave of Absence request is applied for at least two weeks before the departure date and the leave of absence fee is paid. The fee is based on the requested return date and must be paid in advance. Payment of this fee does not guarantee re-enrollment on the requested date or in the same bungalow. Another child will be enrolled on a permanent basis to fill the space left by the child on leave. A minimum $350 waiting list fee per child will be charged for the three month period ending in mid-August. Any leave longer than the summer three months will be charged at the regular UMCDC tuition rate to hold your place; this is due in advance of each month of it being held. The child on leave will be given priority placement on the waiting list or anytime thereafter. Priority placement does not supersede all other priority positions on the waiting list (see WAITING LIST POLICIES: ORDER OF PRIORITY).

MEDICAL EMERGENCY LEAVE OF ABSENCE POLICY

In the event a child enrolled at UMCDC becomes seriously ill and/or whose health is threatened with an unusual medical emergency condition, the Director may waive the requirement for a two week advance written notice of withdrawal. A written statement from the child’s health care provider will be required, indicating the date of onset and the nature of the health crisis.

If the parents plan to re-enroll the child at a later date, UMCDC will waive the requirement for a $350 holding fee per three month period to keep the child’s name on the top of the waiting list and every attempt will be made to re-enroll the child on or close to the preferred re-enrollment date.

MEDICAL EMERGENCY ENROLLMENT/ATTENDANCE POLICY

A signed statement from the child’s health care provider must be submitted documenting the onset of the medical emergency plus an estimated date when it is anticipated the child will be well enough to resume regular attendance.

It is required that the parent will call/contact UMCDC each day to indicate whether or not the child will be attending that day. This is to help the teachers plan for the over-enrollment of the child who has a special medical condition.

BEHAVIORAL/DEVELOPMENTAL LEAVE OF ABSENCE POLICY

In some situations, UMCDC may not be able to meet the needs of an individual child, as the Center is unable to provide the “least restrictive environment in which a child may experience success.” When a child’s behavior results in either of the following situations, the Education Coordinator will meet with the child’s family and teaching staff to set a date for termination of child care services:

1. The child’s behavior poses a threat to the physical and emotional safety of other children, and/or him or herself, and/or teaching staff can no longer assure the safety of all children in their care, and/or

2. Through extensive attempts at intervening with any specific behavior, such as developmental delay, UMCDC has exhausted the available program, staff, community and professional resources. Teaching staff is only able to meet the needs of that individual child through frequently or persistent one-on-one care. While this compromises their ability to adequately meet the needs of all of the children in their care, it also indicates that UMCDC is no longer the most appropriate environment for that child.
The director may waive the requirement for the family’s two week advance written notice of withdrawal. Intervention agencies include local school districts, certified guidance clinics, or other social service agencies. In anticipation that the combination of intervention services and UMCDC termination will result in the desired behavioral/developmental education plan, parents may choose to have their child’s name place on a waiting list for re-enrollment at a later date. UMCDC requires a $350 holding fee per three month period to keep a child’s name on the top of the waiting list.

**Conditions for Re-enrollment**

1. A representative of the intervention agency or diagnostician
   a. Observes the anticipated room of re-enrollment, and
   b. Meets with the family, UMCDC Education Coordinator and teaching team prior to the reenrollment date to discuss the feasibility of the written educational/service plan, IEP/IFSP, and
   c. Translates that plan into the context of UMCDC’s Individual Child Care Program Plan, ICCP.
2. The child **has received intervention services** for the behavior(s) or concern, and
   a. The provider of intervention services documents that the child is now able to participate in a full-day group childcare program without requiring extraordinary accommodations that comprise the teacher’s ability to care for the other children in care, and without posing a threat to the safety of children, him or herself, and staff or licensing standards and
   b. The placement is evaluated after 2-4 weeks of re-enrollment to determine if UMCDC is the most appropriate environment for that child.
3. The child **continues to receive intervention services** for the behavior(s) or concern because the child’s anticipated success in a full-day group childcare setting is dependent upon continued intervention services.
ENROLLMENT WITHDRAWAL

PARENTAL NOTICE OF TERMINATION OF CARE

When you wish to discontinue enrollment at UMCDC, a written notice must be submitted to the Enrollment Coordinator at least two weeks prior to your child’s last enrollment day. Parents will be responsible for full two week payment of tuition from the date the written notice is signed by the parent and received by the Enrollment Coordinator. Parents providing a written notice three weeks in advance of their child’s last enrollment day will receive a credit of $25 on their parent fee account. Parents providing a written notice four or more weeks in advance of their child’s last enrollment day will receive a credit of $50 on their parent fee account. If parents request that an advance written notice of three or more weeks be rescinded, resulting in only a mandatory two-week advance notice, no credit will be given. Credits will appear on the final billing statement. All fees must be paid on or before the child’s last official enrollment day at UMCDC.

We encourage parents to complete a departure evaluation survey on or before the child’s last day. Teachers will make every effort to make your child’s last day at UMCDC very special.

PROGRAM TERMINATION OF CARE AND/OR REMOVAL FROM WAITING LIST

In the event that any of the following situations occur, enrollment may be terminated at UMCDC.

1. Late or Non-payment of fees by parent or legal guardian, i.e. 30 days in arrears.

2. Willful misrepresentation of declared gross family income.

3. Lack of required affiliation of a parent or legal guardian with the University of Minnesota.

4. Failure to provide the required health, immunization, special medical updates and/or emergency information.

5. Abusive and/or disrespectful behaviors/language (e.g. swearing, foul language), harassment, and/or verbal threats toward staff, children, other parents or property of the Center.

6. Inability of UMCDC staff to care adequately for or to meet the child’s needs. (See REFERAL PROCESS)

7. Lack of cooperation from parents or legal guardians with the program’s efforts to resolve differences and/or to meet the child’s needs through parent/staff meetings, attending conferences or failure to use outside resource or referral services for testing, diagnosis, and/or Individualized Family Service Plan (IFSP) or Individualized Education Plan (IEP) so as to gain support for your child.

8. Chronic lateness in picking up child at end of the day (see LATE PICK-UP POLICY AND PENALTY).

9. Outdated, incomplete or incorrect numbers on the EMERGENCY CARD resulting in no one being reachable within an hour of trying, for the third time in a calendar year.

10. If unable to reach the child’s physician because of outdated or inaccurate information on child’s emergency card for the second time during the family’s enrollment history, the family’s enrollment will be terminated

11. Failure to pick up an injured or ill child within an hour of being notified, for the third time in a calendar year.

A parent may grieve the notice of termination within two working days of its receipt—refer to Grievance Procedures—Grievance of Notice of Termination.
LATE PICK-UP POLICY

Please call, if possible, when you know you will be late. A late pick-up charge will be assessed, but we won’t worry about you and will be able to reassure your child regarding the time you will arrive.

BUILDING CLOSURE & LATE PICK-UP POLICY

The building is closed at 5:30 p.m.; everyone should be out of the building by that time. Therefore, you should be in the building to pick up your child by 5:15 p.m. In the winter you have to dress your child and year round it is sometimes difficult to get your child(ren) to disengage in their play with friends. Teachers are paid to sanitize and complete duties from 5:30-5:45 (with no parents or children present in the classroom or classroom foyer). These duties do not include child care after 5:30 p.m. or presence in any classroom area.

A per child late fee is charged anytime parents or guardians arrive or sign out at or after 5:30 p.m. to pick up their child(ren). Sign-out sheets are with teachers in summer and/or when teachers are outside with children.

Please remember teaching staff are on duty, in ratio for the safety of all children, plan to arrive 20 to 30 minutes early, so you can make an appointment or have a chance to talk. By coming early your child can share things in the room or outdoors that they’ve worked on or made with you.

The definition of “late arrival” is entering your child’s classroom and/or signing out at 5:30 p.m. or after. NOTE: Once a parent or responsible authorized adult is in the classroom, he/she is responsible for the child; If you choose to arrive close to closing time, please be respectful to the staff and leave the classroom. Closing staff responsibilities include clean up, locking doors, returning phone calls, making notes and reports; this is done in the last fifteen minutes.

Late arrival is documented on the daily parent sign-in and sign-out sheet. The closing teacher circles the name of the child whose parent is late. The parent or authorized adult is required to initial the sign-in sheet when he or she arrives. The teacher will enter the time. Your child may be taken to another bungalow.

The late pick-up penalty amount is a set fee that will be added to your billing statement, see page 31.

If you have children enrolled in different bungalows you are required to have each child signed out by 5:30 p.m. and be out of the classrooms and building.

It may be distressing for your child to remain in the classroom or another area after all of the other children have been picked up by their parents. The closing staff will make every effort to reach the parent or other names provided on the child’s EMERGENCY CARD to ascertain who will pick up the child and by when.

When you arrive after UMCDC has closed, ring the doorbell located on the wall on the right side of the door.
EMERGENCY SITUATION

If we do not hear from you by 5:30 p.m. an emergency situation will be assumed and the following EMERGENCY SITUATION policy will be implemented.

In the event of sudden illness, accident, hospitalization, etc., and the parent is unable to contact UMCDC and is unable to pick up the child and we have been unable to contact parents or other responsible adults listed on the child’s emergency card by 5:30 p.m. and no one has contacted us, we will assume an emergency situation exists.

UMCDC will first contact the University of Minnesota Police. After assessing the situation, UMPD will then transport the child to Community Based First Response at the Minneapolis Police 4th Precinct. If First Response is unable to contact a guardian/parent, Child Protection becomes officially involved, as a health and Welfare Hold is signed on the child, and the child is transported to St. Joseph’s Emergency Shelter.

UMCDC’s insurance policy does not allow staff to take children home with them.

LATE PICK-UP CHARGES

Late pick up charges are assessed on a "frequency per semester" basis. A semester is defined as the first day of the semester until the last day before the new semester begins. Summer counts as one semester. Fifteen minute increments begin at 5:30 p.m.

1. First infraction per semester – $35.00 for each 15 minutes late or portion thereof (per child).

2. Second infraction per semester – $45.00 for each 15 minutes late or portion thereof (per child) plus warning of termination due to chronic lateness.

3. Third infraction per semester – $50.00 for each 15 minutes late or portion thereof (per child) plus a notice of termination due to lateness will be given (see GRIEVANCE PROCEDURES).

The situation of three late pick-up infractions being incurred in a semester is very rare. However, if it does occur, a notice of termination of child care services two weeks from the date of the third infraction will be assigned by the Enrollment Coordinator. The termination may be discussed with the UMCDC Education Coordinator. A hearing discussion (with the Director) must be requested in writing to the Education Coordinator within two (2) working days of the termination notice.
GRIEVANCE PROCEDURES

GENERAL GRIEVANCE PROCEDURE

The following procedure will apply when a parent has a concern or complaint about some aspect of the child development program:

- If applicable, the parent shall discuss the issue with first the Bungalow Teacher or Area Coordinator involved.
- If no resolution is reached with the Bungalow Classroom Teacher or Area Coordinator, then the parent shall discuss the issue with the Education Coordinator.
- If the Education Coordinator’s decision regarding the matter is unsatisfactory to the parent, she/he may request to meet and share her/his concern to the Director.
- The final decision is made by the Director.

GRIEVANCE OF NOTICE OF TERMINATION

Within two working days after receipt of the notice of termination, the parent shall give to either the Education Coordinator or the Enrollment Coordinator written notice of her/his intent to grieve.

The final decision is made by the Director, as she/he shall solely adopt, reject or modify the recommendation of the Education Coordinator and/or the Enrollment Coordinator within two working days after receipt of the recommendations. In the rare event of the Director’s absence, the party will be notified and the decision made on her/his return. In the absence of the Director, the Enrollment Coordinator will make the final determination.

Regardless of the duration of the grievance process, the child or children of the parent who has received the notice of termination shall remain in UMCDC for a period of not more than three weeks from the receipt of the notice.
PROGRAM INFORMATION

FOOD PROGRAM (USDA, CACFP)

Nutrition is a major factor in the physical, social, mental, and emotional development of children. UMCDC offers a good opportunity to establish nutritionally sound eating habits as well as an understanding of the social relationship: good food, serving portions, health, and growth.

Our goal is to have a positive influence in broadening children’s food experiences while being conscious of young children’s tastes, appetites, choke-able food restrictions, and socialization of eating together.

Nutrition education is integrated into the program through implementation of cooking projects and placement of a Teacher at each table to serve meals family style. This provides an understanding of appropriate eating habits as well as an opportunity for social conversation.

UMCDC’s menus are reviewed and approved by the USDA to comply with or to exceed the minimum USDA Child Care Food Program requirements for meal composition and serving size.

UMCDC’s cook is responsible for providing infants, toddlers, and preschoolers with a nutritious and balanced breakfast, lunch, and afternoon snack. A variety of high quality, wholesome, unprocessed foods that comply with or exceed USDA Child Care Food Program minimum requirements are offered: Whole grains, pastas and rice; un-hydrogenated Sun-butter; limited meat; sparse use of sugar, salt, and butter; complementary proteins; yogurt; milk; fresh fruits and vegetables; and creative, well-prepared menus. Commercially prepared food is seldom served.

Four-week cycle menus are posted monthly on the Nutrition Boards on Administration Avenue and on the Infant Lane Bulletin Board. Copies are distributed to parents in their mailboxes. Both vegetarian and non-vegetarian menus are posted on the menu bulletin board on Administration Avenue and on the UMCDC website.

Each bungalow has posted the daily schedule of activities that includes the exact time when breakfast, lunch, and afternoon snack are provided. Parents are required to have their child in attendance during these meal periods in order for the child to be offered meals. Food cannot be saved for a child to be served by the parent due to food safety and program needs.

We provide infants with commercial baby food and formula containing no added sugar or salt. Breast milk may be stored and served to your child in accordance with Minnesota DHS licensing, or mothers may prefer to come to UMCDC and nurse in the room set aside for this purpose.

As part of our curriculum, food experiences may include food items that could be considered as treats (i.e. cookies, muffins, frosting, pudding, etc.)

We hope you and your child enjoy UMCDC’s food program. Parents may purchase lunch, for $3.00, if they notify the front desk no later than 9:30 a.m. on the day of your lunch visit.

SPECIAL DIET – FORMS AND DEFINITIONS

Parents of children with special dietary needs must consult with UMCDC’s cook as well as the child’s Teacher regarding substitutions. If your child has an intolerance or allergy to a USDA Child Care Food Program required food (such as milk), a SPECIAL DIET STATEMENT FORM, available upon request from the front desk, must be completed, signed by your child’s health care provider and submitted to the cook before we can serve your child a menu substitution. UMCDC is unable to refrain from serving a food item to your child unless your child’s health care provider has signed the SPECIAL DIET STATEMENT FORM. “Without disability” means a non-life-threatening allergy; a “disability” is life threatening, e.g. requiring an Epipen, as per government definition, guidelines and form.
Parent requests for vegetarian or religious/cultural substitutions are accommodated within government and program guidelines. The cook decides what vegetarian alternatives for meat, poultry, or fish are to be provided. These are usually cheese, Sun-butter, beans, or eggs. Both vegetarian and non-vegetarian menus are posted on the menu bulletin board on Administration Avenue and on the UMCDC website. Please ask at the front desk for a **VEGETARIAN DIET REQUEST FORM**, which must be completed before menu substitutions will be made.

**FOOD BROUGHT FROM HOME IS RESTRICTED**

For medically authorized special dietary needs, UMCDC reserves the right to require that parents provide the food substitutes from home. Such food must be brought into UMCDC on the day it is to be served, dated and labeled with the child’s name and instructions for serving. UMCDC requires that these meals and/or snacks meet USDA CACFP (Child and Adult Care Food Program) Requirements, see chart below.

**BREAKFAST**

<table>
<thead>
<tr>
<th></th>
<th>Ages 1-2</th>
<th>3-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluid Milk</td>
<td>½ cup</td>
<td>¾ cup</td>
</tr>
<tr>
<td>Juice or fruit or vegetable</td>
<td>¾ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>Grains/Breads:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread; whole grain, bran, germ or enriched</td>
<td>½ slice</td>
<td>½ slice</td>
</tr>
<tr>
<td>Cold dry cereal; whole grain, bran, germ, enriched or fortified</td>
<td>¼ cup</td>
<td>1/3 cup</td>
</tr>
<tr>
<td>Cooked cereal, rice, macaroni and noodle products</td>
<td>¼ cup</td>
<td>¼ cup</td>
</tr>
</tbody>
</table>

**LUNCH**

<table>
<thead>
<tr>
<th></th>
<th>Ages 1-2</th>
<th>3-5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluid Milk</td>
<td>½ cup</td>
<td>¾ cup</td>
</tr>
<tr>
<td>Meat or poultry or fish</td>
<td>1 ounce</td>
<td>1 ½ ounces</td>
</tr>
<tr>
<td>or cheese</td>
<td>1 ounce</td>
<td>1 ½ ounces</td>
</tr>
<tr>
<td>or cottage cheese, cheese food, or cheese spread</td>
<td>¾ cup</td>
<td>3/8 cup</td>
</tr>
<tr>
<td>or egg</td>
<td>½ egg</td>
<td>¾ egg</td>
</tr>
<tr>
<td>or cooked dry beans or peas</td>
<td>¾ cup</td>
<td>3/8 cup</td>
</tr>
<tr>
<td>or sun-butter, soynut butter or nut or seed butters</td>
<td>2 T.</td>
<td>3 T.</td>
</tr>
<tr>
<td>or soynuts, tree nuts, or seeds</td>
<td>¼ ounce</td>
<td>¼ ounce</td>
</tr>
<tr>
<td>or yogurt, plain or flavored, unsweetened or sweetened</td>
<td>½ cup</td>
<td>¼ cup</td>
</tr>
<tr>
<td>or an equivalent quantity of any combination of the above meat/meat alternatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vegetables and/or fruits (2 or more)</td>
<td>¼ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>2 separate servings of vegetables and/or fruit</td>
<td>Total</td>
<td>Total</td>
</tr>
<tr>
<td>Grains/Breads</td>
<td>½ slice</td>
<td>½ slice</td>
</tr>
</tbody>
</table>

**SNACK (Select two of the following components)**

<table>
<thead>
<tr>
<th></th>
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<th>3-5</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
<td>Juice or fruit or vegetable</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td>Meat or meat alternate</td>
<td>½ ounce</td>
<td>¼ ounce</td>
</tr>
<tr>
<td>Grains/Breads</td>
<td>½ slice</td>
<td>½ slice</td>
</tr>
</tbody>
</table>

Leftovers will be discarded that same day if not picked up by the parent. This is the only situation in which UMCDC permits food from home to be brought into the building, due to our need to control food allergies as much as possible.

**FIELD TRIPS AND TRANSPORTATION**

Field trips and supervised walks away from UMCDC are regular features of the educational plans for each age group. Children greatly enjoy their field trip experiences and the opportunity to explore and learn from the resources throughout our community. Parents are often invited to accompany the children on special field trips.
Examples of trips in strollers or supervised walks for Infants or Toddlers are to Van Cleve Park, Bierman Athletic Field, or other neighborhood practical life places. Favorite trips for older children include the Bell Museum of Natural History, parks, and several campus sites.

The methods of transportation are walking or using rented school buses. UMCDC’s procedures in the case of field trips are as follows: A sign-up sheet is posted in the area notifying parents of the date, time, destination, purpose, and means of transportation to each field trip at least one day in advance. **Written parental permission is required before the child may participate in the field trip.** A first aid kit is taken on all field trips along with your child’s emergency card, the daily attendance sheet, and a cell phone.

9503.0100 MN DHS Licensing Rule 3.

Rental vehicles are driven by paid and licensed drivers provided by the company from which the vehicles are rented. UMCDC maintains appropriate insurance levels.

If an emergency occurs, teaching staff is responsible for contacting UMCDC to make necessary arrangements or by making a call directly to campus or city emergency lines (911). Parents are informed of any emergency involving their child.

**If your child’s group is on a field trip when you arrive, it is your responsibility to await their return or to take your child to the field trip site.**

**OUTDOOR ACTIVITIES**

Daily outdoor activities are planned for all children when weather permits (between zero degrees Fahrenheit wind chill and 100 degrees Fahrenheit heat index). Children will not be taken outdoors in severe or threatening weather.

It is the policy of UMCDC that all children who are well enough to be in attendance are well enough to participate in outdoor activities. The Minnesota Department of Human Services Licensing requires a daily dose of fresh outdoor air for young growing children. If children are dressed appropriately, and are well enough to attend, weather conditions should not pose an illness risk to them. The tasks of dressing and undressing are important learning activities for children. When children are in attendance at UMCDC it is expected that they are able to participate in all aspects of the child development program activities including outdoor play. Children cannot be excused from the outdoor portion of the UMCDC program.

**AIR QUALITY**

Air quality is checked twice daily at www.airnow.gov. When the Air quality is in the unhealthy for sensitive groups (101-150), upon teacher discretion children will be allowed to play outside no longer than 15 minutes. When the air quality reaches the unhealthy group (151-200), children will not be permitted to play outside.

**NAP POLICY**

Each child is provided with his or her own labeled cot or crib and a sheet that is weekly laundered at UMCDC and when soiled or wet. Infants sleep routines are individualized and based on the child’s needs. Toddler and Preschool children are helped to remain quietly on their cots for a minimum 30 minute rest period during the required daily group nap times.

If a child has rested quietly for 30 minutes and is almost asleep, the staff may allow the child to continue to lie on the cot and complete her/his nap. If the child does not fall asleep, he or she may be allowed to get up and move to the foyer for quiet play options, or may even be accompanied to the multi-purpose room for large motor play.

If the child does fall asleep, she or he will be allowed to sleep without adult interruption until the end of the group’s nap period. When a child falls asleep during our quiet rest period it is because her or his body is tired and needs a nap.
If the child’s parent(s) are concerned the child is sleeping too much at UMCDC, we will help the child wake up gently, but only after 30 minutes of sleep and only if the child awakens to a gentle approach of awakening by the Teacher. If the child does not awaken with the first try, another gentle approach will be tried after another 15 minutes of sleep. Staff will not forcibly awaken a child.

Between 2:45 and 3:00 p.m. for Preschool and Toddlers, children are awakened by the sound or the voices of Teachers and other children, by lights being turned on, by music or an activity tape cassette being played, and by gently being awakened by the staff.

Infants are placed on their backs when put down for naps as required by law.

9503.0050 Subp. 3. Confinement limitation. A child who has completed a nap or rested quietly for 30 minutes must not be required to remain on a cot or mat or in a crib or bed.

CLOTHING

Children should wear clothes that are comfortable, easily cared for and age appropriate. Each child needs one to three complete changes of clothing including underwear and socks. Please do not bring clothing that is valuable or would be missed if lost, misplaced or dirtied.

Please label all clothing (including boots, mittens and shoes). Unlabeled clothing can result in losses and mix-ups.

It is absolutely necessary that every child have available at UMCDC mittens, boots, shoes, hats, and snow pants in the winter and sleeveless or short sleeved tops, shorts, and shoes in the summer.

Flip-flop shoes, Crocs, or open toed sandals are very dangerous for children to wear at UMCDC. Do not send your child in these types of footwear.

Your child’s teacher will give you a list of other items you need to provide (blankets, diapers, etc.).

TOYS

Toys brought from home present problems for the children and the staff. Personal possessions are often difficult to share or may get broken. Unless it is for a specific curriculum activity, parents are asked to not bring toys from home.

On Toy Days in Preschool: toys that resemble weapons are not acceptable at UMCDC and are not to be brought.

Security items such as a blanket or “lovey” that comforts your child are welcome and kept in cubbies until nap time.

BIRTHDAYS AND PHOTOGRAPHS

UMCDC recognizes that birthdays hold a special importance to your child. Therefore, Teachers will provide an age appropriate celebration.

Most families celebrate at home with a cake or a food treat, but UMCDC must meet USDA Child Care Food Program requirements. Teachers will plan developmentally appropriate ways to make your child’s day special.

Examples of ways in which birthdays may be celebrated are:

- Popsicles will be served at group time or snack time.
- A necklace, crown, or book may be made for the birthday child.
- The birthday child may be invited to help teachers with special tasks.
- Having part of group time focus on the birthday child.
- Posting a birthday banner.
- The traditional birthday song.
Your child may be asked by other parents to be in a photo or class picture. UMCDC is not a public area so please be respectful and make sure you have consent to use pictures of children other than your own. However, **you may not put such photos on Facebook, Myspace, blogs, websites, etc.,** that have been taken at UMCDC.

UMCDC finds that, due to differences in individual family customs, food allergies, and economic status, we prohibit the following:

- Treats brought to UMCDC by parents (i.e. cake, ice cream, etc.)
- Party favors (i.e. treat bags, balloons)
- Entertainment (i.e. puppet shows, clowns, Bounce House rentals)

The bungalow may not be used as a place for passing out invitations to private birthday parties. This policy is intended to prevent hurt feelings among children and avoid program disruption.

A birthday is a day for your child to feel special among her/his peers. We hope that by Teachers planning birthday celebrations, your child and other classmates will experience a joyful celebration that is self-enhancing, non-competitive, non-commercialized, and a pressure-free occasion.

**NOTE:** UMCDC will respect the parents’ wishes in the event that customs or religious beliefs prohibit birthday celebrations.

**HOLIDAYS**

UMCDC does not celebrate religious holidays, attempt to provide religious education to children, or use religious symbols in the classroom. However, children and/or their parents may share their own individual holiday experiences and games with Teachers and other children. Children learn to respect and appreciate different cultural practices through child-initiated sharing. **UMCDC is closed on all University scheduled holidays.**

**LAST DAY CELEBRATIONS**

A last day celebration will occur if your child is leaving UMCDC. Check with your child’s Teacher for further information on last day celebrations in your child’s classroom.

During last day celebrations, your child may be asked by other parents to be in a photo or class picture. UMCDC is not a public area so please be respectful and make sure you have consent to use pictures of children other than your own. However, **you may not put such photos on Facebook, Myspace, blogs, websites, etc.,** that you have taken at UMCDC.

**OTHER CELEBRATIONS/EVENTS**

Events with special meaning to the Child Development Center community may be celebrated in a culturally sensitive and developmentally appropriate manner. Examples of celebrations are Peace Week, Kindness Week, NAEYC Week of the Young Child, Spring Playground Clean-Up Day, Planting Day, Book Week, Festival of Learning, and season changes.
HEALTH AND SAFETY POLICIES FOR PARENTS

EMERGENCY CARD

Minnesota State Law (Rule 3, MN DHS 9503.0125) states a child cannot be admitted to a group Child Development Center until a completed EMERGENCY CARD is received. You cannot leave your child at UMCDC until the front desk has received your child’s completed EMERGENCY CARD.

Required information: You must update information on your child’s EMERGENCY CARD, whenever anything changes. Required information includes your work, home, and cell phone numbers; names, addresses and phone numbers of at least two people authorized to act in your behalf should we not be able to reach you; and your child’s current health care provider’s phone number.

Inability to contact you: If we try to contact you in the case of an emergency or an exclusion and are unable to reach you within a half an hour because no one answers at any of the numbers you have provided on your child’s EMERGENCY CARD or the information on your child’s EMERGENCY CARD is outdated, incomplete, or incorrect, then your emergency contact will be called and must pick up with in a hour. If you and/or the emergency contacts cannot be reached within an hour, a penalty of $50 will be assessed and added to your billing statement. You will be given a warning of possible termination of child care services. Your child will not be permitted to return to UMCDC until the EMERGENCY CARD has been updated. If this situation arises again within one year of the first occurrence, a penalty of $50 will be assessed and added to your billing statement, and you will be given a notice of termination of child care services.

The EMERGENCY CARD must be signed by you because it authorizes UMCDC to seek emergency treatment for your child if necessary. If the information regarding your child’s health care provider is incorrect, a penalty of $100 will be assessed.

EMERGENCY CONTACTS

Staff will only release a child to an adult specifically authorized on the child’s EMERGENCY CARD. As an emergency contact they are authorized to pick up and transport if the parent or legal guardian has submitted prior written notification that this individual will be picking the child up on a specific day or days, or it is an emergency situation and the parent(s) or legal guardian (s) cannot be reached. Telephone instructions from the parent or guardian may be accepted if the staff person has determined that the individual to whom they are speaking is indeed the parent or guardian by using information in the child’s file which only the parent or legal guardian would know. A CHILD PICK-UP BY ALTERNATE AUTHORIZATION FORM must be completed for each occasion a child is picked up by someone other than the legal guardians on the EMERGENCY CARD. In the case of prior written notification, the CHILD PICK-UP BY ALTERNATE AUTHORIZATION FORM must be dated and signed by the parent or guardian. In the case of telephoned instructions, in the case of prior written notification or by in the case of telephoned instructions, the CHILD PICK-UP BY ALTERNATE AUTHORIZATION FORM must be dated and signed by the staff member. After the child has been picked up, the CHILD PICK-UP BY ALTERNATE AUTHORIZED FORM is filed in the child’s shadow file.

HEALTH RECORD INFORMATION

Two health record forms must be completed:

Note: By State Law (Rule 3) a child cannot be admitted to a group Child Development Center until a current IMMUNIZATION RECORD is received. You cannot leave your child at UMCDC until the front desk receives a current IMMUNIZATION RECORD.

IMMUNIZATION RECORD: This record must give dates (month, day, and year) of immunizations your child has received. It must be current and is due on admission. Immunization records must be updated whenever your child receives additional immunizations. Failure to respond to the second request to provide an updated IMMUNIZATION RECORD will result in a charge of $40.00 and may result in termination of child care services.
**HEALTH CARE SUMMARY:** This information must include the date of the child’s most recent physical exam (within 6 months), and be signed by the child’s source of health care. This form is due within 30 days of enrollment.

**Re-examination:** A new **HEALTH CARE SUMMARY** is required for children already admitted to the program. At a minimum, an updated report of physical examination signed by your child’s source of medical care is required at least annually for children under 24 months of age, and whenever a child 24 months or older advances to an older age category.

Failure to respond to the second request to provide an updated **HEALTH CARE SUMMARY** will result in a charge of $50.00 to be added to your billing statement and may result in termination of child care services.

You have the responsibility to inform UMCDC when your child has any special medical condition, needs, or allergies so that we can provide for appropriate care and support.

Dietary modification because of special dietary needs will only be made under the direction of a trained medical provider. Written permission from the child’s parent/legal guardian and the child’s health care provider is required.

**MEDICATIONS**

If it is necessary for medication to be given at UMCDC, we will follow the procedure for medication administration recommended by the Minnesota Child Care Health Consultants. Prescription medications will be given with approval from the child’s physician and written parent consent. You must complete the **MEDICATION FORM** if your child needs a medication while in our care. **Medications must be in their original container** and may be given only to the child for whom they are prescribed. Outdated/expired medications will not be given. **Over-the-counter medications** require written parent consent and written approval of the child’s health care provider with the exception of diaper rash products, Orajel, moisturizing hand lotion, insect repellents and sunscreens which only require written parent consent.

Permission by the health care provider for both over-the-counter and **prescription medication must be for a specific condition and can only be in effect for 3 months.**

The procedure for administration of medication is:
1. Wash hands
2. Check to see that the **MEDICATION FORM** has been completed and signed.
3. Before administering medication follow these 6 RIGHTS:
   - RIGHT CHILD
   - RIGHT MEDICATION
   - RIGHT TIME
   - RIGHT DOSE (Using a correct medication dispenser)
   - RIGHT ROUTE (Method of administering, ex: by mouth)
   - RIGHT CHILD’S MEDICATION RECORD
4. Administer medication
5. Return medication to proper storage out of children’s reach
6. Wash hands
7. Record on right child’s medication record and sign the form.
8. Information should be recorded for every dose even if medication is not given (ex: child absent or meds left at home)
EXCLUSION OF ILL CHILD

UMCDC is not a licensed “sick care program.” A child with any of the following conditions or behaviors that the Commissioner of Health determines to be contagious and a physician determines has not had sufficient treatment to reduce the health risk to others, must be excluded from our program according to MN Department of Human Services licensing requirements.

We will follow the exclusion guidelines listed below which are taken from INFECTIOUS DISEASES IN CHILD CARE SETTINGS: INFORMATION FOR DIRECTORS, CAREGIVERS, AND PARENTS OR GUARDIANS prepared by Hennepin County Community Health Department, Epidemiology Program. We must exclude a child with any of the following conditions:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Exclusion Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chickenpox</td>
<td>Until all the blisters have dried into scabs; usually about 6 days after rash onset</td>
</tr>
<tr>
<td>Conjunctivitis (Pinkeye)</td>
<td>Bacterial (with pus) until 24 hours after treatment begins. (Pink or red conjunctiva with white or yellow discharge that causes matting of the eyelids; pain or redness of the eyelids.</td>
</tr>
<tr>
<td>Diarrhea (Infectious)</td>
<td>Please see Diarrhea Exclusion, page 47</td>
</tr>
<tr>
<td>Diarrhea (Uncontrolled)</td>
<td>Until uncontrolled diarrhea stops, or until a medical exam indicates that it is not a communicable disease. (Uncontrolled diarrhea is an increased number of stools, compared with a person's normal pattern, along with watery stools, and/or increased stool that cannot be contained by the diaper or use of the toilet</td>
</tr>
<tr>
<td>Fever</td>
<td>Axillary (armpit) temperature: 100 F or higher; when accompanied by behavior changes, or other signs or symptoms of illness. Measure temperature before giving medications to reduce fever. <em>Child may return when symptoms are gone for 24 hours and no fever reducing medication has been given.</em></td>
</tr>
<tr>
<td>Impetigo</td>
<td>Until child has been treated with antibiotics for a full 24 hours.</td>
</tr>
<tr>
<td>Lice (head)</td>
<td>Until after the first treatment and no live lice are seen.</td>
</tr>
<tr>
<td>Rash With or Without Fever or Behavior Change</td>
<td>Until a medical exam indicates these symptoms are not that of a communicable disease.</td>
</tr>
<tr>
<td>Respiratory Infections (Viral)</td>
<td>Until child is without fever for 24 hours and is well enough to participate in normal activities. No exclusion for other mild respiratory infections without fever as long as the child can participate comfortably. Symptoms include a runny nose, chills, muscle aches, sore throat, sneezing and coughing, and being more tired.</td>
</tr>
<tr>
<td>Ringworm</td>
<td>Until 24 hours after treatment has been started.</td>
</tr>
<tr>
<td>Scabies</td>
<td>Until 24 hours after treatment has been started.</td>
</tr>
<tr>
<td>Signs/Symptoms of Possible Severe Illness</td>
<td>Until a medical exam indicates the child may return (unusually tired, uncontrollable coughing, irritability, persistent crying, difficult breathing, wheezing).</td>
</tr>
<tr>
<td>Streptococcal Sore Throat</td>
<td>Until at least a full 24 hours after treatment begins and the child is without fever for 24 hours.</td>
</tr>
<tr>
<td>Vomiting</td>
<td>Until vomiting stops (vomiting is defined as two or more episodes in the previous 24 hours).</td>
</tr>
</tbody>
</table>

Other reasons for exclusion:

If a child is not able to participate in child care program activities with reasonable comfort, including outdoor play, or a child requires more care than staff can provide, they will be excluded.

When a child in our care has been medically diagnosed with a communicable disease, we will notify the appropriate health authorities and follow their recommendations to provide information to parents of all exposed children. The child care program will notify the parents of exposed children on the same day or within 24 hours by:

- Posting information on the bungalow doors

Parents are required by State laws and UMCDC policies to inform us within 24 hours (exclusive of weekends/holidays) when their child has been diagnosed as having any contagious disease.
**DIARRHEA EXCLUSION**

Is it diarrhea or is it loose stool?

**DEFINITION:** *Diarrhea*: When the bowel pattern suddenly changes to a loose, watery stool that occurs more frequently than usual, it is probably diarrhea. Characteristically, diarrhea soaks through diapers and clothing, and preschool children may not get to the toilet in time. It has a distinctive smell that is noticeably different from the child’s normal BM’s.

**GENERAL RULE:** If BM is abnormal (texture, color, odor) for that child and/or uncontainable in a diaper, the child would be excluded. Preschoolers may complain of stomach ache, or not make it to the toilet in time.

**EXCEPTIONS:** Infant staff may use different criteria for exclusion because nursing babies have frequent loose stools which may be uncontainable.

**THE CHILD CAN RETURN WHEN:**
1. THERE IS NO DIARRHEA (see definitions above)
2. THERE ARE NO OTHER EXCLUDABLE SYMPTOMS
3. CHILD IS BACK INTO NORMAL EATING, DRINKING, TOILETING PATTERNS and able to fully participate in normal program normal for that child

**FIRST AID**

In the event of any *injury or illness*, appropriate first aid will be administered by staff trained in first aid. If staff decides this is an emergency situation, 911 will be contacted to provide emergency first aid. If necessary, the emergency medical service will transport your child to a medical facility as designated by emergency services. A parent or alternate listed on the EMERGENCY CARD will be contacted as soon as possible. An attempt to contact your child’s source of health care may also be made.

Our staff keeps current on Pediatric First Aid and CPR training. MN licensing requires all teaching in the facility to have this training. We train staff two times per year on staff development days.

**CARE OF ILL OR INJURED CHILDREN – UMCDC is licensed for “well care”**

If your child is no longer able to fully participate in the program due to illness or injury, you or your designated alternate must pick up your child within an hour. State licensing rules prohibit the care of sick children in the UMCDC facility. Until you arrive your child will be monitored and comfort measures provided according to program procedures. If staff thinks it necessary, the child’s health care provider will be contacted. (See EMERGENCY CARD).

If you do not pick up your child within an hour of being notified to do so, a penalty of $50 will be assessed and added to your billing statement and you will be given a warning of possible termination of child care services. If the situation arises again within one year of the first occurrence, a penalty of $50 will be assessed and added to your billing statement and you will be given a notice of possible termination of child care services. If the situation arises a third time within one year of the first occurrence, child care services will be terminated.

**ACCIDENTS AND INJURIES**

Responsible supervision of the children is of utmost importance and children are appropriately supervised at all times. Each staff member is responsible for implementing accident prevention measures and for maintaining active interaction and/or observation of children at all times. Playground areas are inspected daily before the children go out.
Parents can expect to receive an accident injury report any time their child is hurt at UMCDC. The form is filled out in triplicate, with the Education Coordinator receiving a copy and the third copy filed in the bungalow. The accident injury report describes the nature of the injury, when it occurred, how it happened, and what type of first aid was administered. Parents will be contacted by telephone if an injury requires more immediate, emergency attention.

A HEAD INJURY REPORT is also given to parents when a child sustains a blow or bump, whether big or small, to the head so signs of concussion may be monitored at home.

Injuries that require a child to have medical treatment by a physician are reported by UMCDC within 24 hours to the MN State Department of Human Services, day care licensing division (651-297-1490).

Annually and/or as needed the Education Coordinator and Area Coordinators conduct an analysis of accident injuries that have occurred during that period. Accident prevention procedures are developed, updated, and modified as needed with oversight of the Director.

**RISK REDUCTION PLAN – MN DHS Licensing Requirement**

As per Minnesota DHS Licensing statute Sect 245A.66 subdivisions 2; Child care centers must develop a risk reduction plan that identifies the general risks to children served by the child care center. The license holder must establish specific policies and procedures or refer to existing policies and procedures that minimize identified risks, train staff on procedures the procedures, and annually review the procedures.

**HEALTH CONSULTATION SERVICES**

Our program is contracted with and receives monthly health consultation services from a Public Health Nursing Consultant from the Minnesota Visiting Nurse Child Care Consultation Team. A member of the Minnesota Visiting Nurse Child Care Consultation Team is also available by telephone at: 612-617-4600.

**INSURANCE**

The level of liability insurance carried by UMCDC is as follows: The University of Minnesota provides general and professional liability insurance in the following limits of liability: $1,000,000 each claim; $3,000,000 annual aggregate.

**EMERGENCY PREPAREDNESS**

UMCDC practices monthly fire drills year round and monthly tornado drills April through October. We follow routine evacuation procedures as instructed by the University Office of Emergency Preparedness.

**EMERGENCY CLOSING AND EVACUATION**

UMCDC closes on the same schedule as the University of Minnesota. Closing information is broadcast on radio station WCCO-AM (830 on the dial) early in the morning.

If the University closes during the day, staff will be notified through their departments by the Office of Emergency Preparedness. If UMCDC closes during the day, UMCDC staff will contact parents by phone.
All parents must pick up their children from UMCDC within one hour of an official University closing. A late fee will apply after the one hour limit.

UMCDC closes only as dictated by the University. We encourage parents to use their best judgment in determining whether or not their child will attend in severe weather. Some teachers are unable to make it to work without undue risk to themselves or their families and/or may have their own children at home due to school district closures. Please be thoughtful of our staff and teachers.

If a severe situation (i.e. bomb threat, hazardous material release) should require the movement of persons from this area, UMCDC is listed as a high priority facility within the University.

Mass transit vehicles would transport staff and children to an alternative site deemed appropriate for the situation.

The Bierman Athletic Building (one block south of UMCDC) is the most likely temporary shelter and movement to the Bierman Complex will be by foot or mass transportation dictated by the weather.

**MISSING CHILD POLICY**

Although UMCDC has never lost a child in all its years of service operation, the following procedures will be followed in the unlikely circumstance that a child is discovered to be missing:

The Director, Education Coordinator or Enrollment Coordinator will be notified immediately upon the discovery that the child is missing.

A staff person from each area appointed by the Director, Education Coordinator or Enrollment Coordinator will be assigned to search their classroom and other rooms throughout the building as an appointed second group covers the play yards.

If the child is still missing after these immediate searches, the University Police and the child’s parents will be contacted.

While waiting for the police, the Director, Education Coordinator or Enrollment Coordinator will assign one staff person to each corner of the block. They will continue the search moving clockwise around the block.

**AIR AND SOIL QUALITY**

The U of M office of Environmental Health and Safety has conducted comprehensive testing of the air soil quality of our site. That office has documented the environment to be completely safe and free from any risks to children or staff. In addition, the UMCDC facility is designated a no smoking environment.

**PLANTS**

Teachers enjoy adding growing plants to their environments. UMCDC keeps posted and makes available the Hennepin Regional Poison Center’s brochure “Plant Guide” so plants at UMCDC are screened for toxicity. Each plant is labeled with its name.

**PETS**

Only domestic, small, easy to maintain pets which can be kept in a small covered cage such as guinea pigs, hamsters, gerbils, or fish will be permitted. Pets will be kept remote from the food area in an easily cleanable, covered cage. If there are any questions regarding any other type of pet, call the local Health Department or equivalent.
Cages are cleaned daily or as necessary in a location separate from food service. Hand washing is mandatory after handling pets or excretions.

All pet food and cleaning supplies are separate from food service supplies.

Pet Health—all pets are in healthy condition and Certified by a veterinarian, as per NAEYC Accreditation. No outside animals are allowed unless they are approved by administration and are licensed and certified, e.g. therapy dogs.

**INFANT/TODDLER PROGRAM**

**Diapering**

Parents provide diapers, wipes, diaper cream, and multiple changes of clothes.

Disposable diapers will be used regularly and will be supplied by the parent. If the parent fails to respond to the second request for disposable diapers, a charge of $30 will be assessed. If allergies are documented by a physician cloth diapers may be allowed in the infant area only after a discussion with the Infant Area Coordinator.

Procedures for diapering are approved by UMCDC’s health consultant and are posted in the diaper changing area. Diapering may only be done in designated areas.

**Toilet Learning**

UMCDC staff and parents work together to be consistent with “best practices” to assist the child to be successful in toilet learning. Children develop at different rates. Examples of these different rates are when they are “ready” to walk, to talk, and to do toilet learning. We wait to see signs that a child is “ready” and then work with parents so that the child has consistency from home to the Center, thus enhancing the possibility that this milestone is crossed with the child’s sense of mastery and competence bolstered. Group care offers the advantage of toddlers imitating their peers who may be making “toilet tries” or who are now able to use the toilet.

**Infant Food Program**

Currently, formula and bottles are provided by UMCDC.

Baby food is provided by UMCDC.

Commercially prepared infant food and formula if brought from home must be unopened with child’s first and last name. The diet of an infant is determined by the infant’s parent. The staff must ensure that sanitary procedures and practices are used to prepare, handle, and store formula, milk, solid foods, and supplements. Procedures must be reviewed and certified by a health consultant.

The infant’s feeding schedule is determined by the infant’s parent at the time of intake.

The infant’s feeding schedule is available in the food preparation area.

The child will be offered formula or milk and nutritionally adequate solid foods in prescribed quantities at specified intervals. All bottles must be labeled with the child’s first and last name.

Guidelines for Breast milk must be followed if a parent brings breast milk.

Infant baby food jars will be used or disposed of on the day they were opened.

Infant formula will not be out of the refrigerator beyond feeding time.

**Feeding Practices**

Bottles are heated in cups of warm water.

All babies are held during bottle feedings. We do not allow propping of bottles with infants or being put into a crib with a bottle.

Infants will be offered finger foods when developmentally appropriate and with parent consent.
BREAST MILK/NURSING STATIONS

UMCDC supports breastfeeding by:

- accepting, storing, and serving expressed human milk for feedings;
- accepting human milk in ready-to-feed sanitary containers labeled with the infant’s first and last name and date and storing it in a refrigerator for no longer than 48 hours (or no more than 24 hours if the breast milk was previously frozen) or in a freezer at 0 degrees Fahrenheit or below for no longer than three months;
- For nursing mothers enrolled in the infant program, we designate a space and room within the infant area.
- UMCDC provides non infant enrolled nursing/pumping mothers other spaces within the center; e.g. Flex room, Bungalow Play Castles or foyer areas. Please see your Area Coordinator if your child is no longer in infants and you need one of the aforementioned areas for your use.
IMPORTANT TELEPHONE NUMBERS

Emergency—Police, Fire, Ambulance ................................................................................................................. 911
Hennepin County Medical Center (Emergency)
900 South 8th Street, Minneapolis ................................................................................................................ 612-873-3131
St. Joseph’s Home for Children
1121 East 46th Street, Minneapolis .................................................................................................................. 612-827-6241
Minneapolis Public Health Department
Information ........................................................................................................................................ 612-673-2301
University of Minnesota Information
Off Campus .................................................................................................................................................. 612-625-5000
On Campus ....................................................................................................................................................... 0
College of Education and Human Development Information
Information .................................................................................................................................................. 612-626-9252
Hennepin County Information .................................................................................................................. 612-348-3000
State of Minnesota Information
Division of Day Care Licensing .................................................................................................................. 651-296-3971
First Call For Help ........................................................................................................................................ 211 or 651-291-0211
Hennepin County Child Protection ........................................................................................................ 612-348-3552 or 612-348-8144 (after hours)
Poison Information Center .................................................................................................................. 1-800-222-1222 or 612-873-3141
Hennepin County Crisis Intervention ...................................................................................................... 612-873-2222
Greater Minneapolis Crisis Nursery ........................................................................................................... 763-591-0100
Child Care Referral Network (Think Small) ............................................................................................... 651-290-9704
U of M Police Dispatcher .................................................................................................................. 612-624-7828
U of M Office of Emergency Management .............................................................................................. 612-625-8047
Parent Warmline ........................................................................................................................................ 612-813-6336
DAYS CLOSED

Friday, July 4, 2014 Independence Day
Thursday, July 10, 2014 Staff Development Day
Friday, July 11, 2014 Staff Development Day
Monday, September 1, 2014 Labor Day
Thursday, October 2, 2014 Staff Development Day
Friday, October 3, 2014 Staff Development Day
Thursday, November 27, 2014 Thanksgiving
Friday, November 28, 2014 Floating Holiday
Thursday, December 25, 2014 Christmas Day
Friday, December 26, 2014 Floating Holiday
Thursday, January 1, 2015 New Year’s Day
Friday, January 2, 2015 Floating Holiday
Thursday, January 15, 2015 Staff Development Day
Friday, January 16, 2015 Staff Development Day
Monday, January 19, 2015 Martin Luther King Day
Thursday, April 16, 2015 Staff Development Day
Friday, April 17, 2015 Staff Development Day
Monday, May 25, 2015 Memorial Day

**Parents are charged for all days closed which occur in the child’s enrollment schedule

Days in **bold** are University Holidays: everything else is Staff Development, needed for staff training, classroom updates and play yard care.