Parent Policy Handbook

JANUARY 1, 2020-DECEMBER 31, 2020

1600 Rollins Ave SE
Minneapolis, MN
55455

www.cehd.umn.edu/childdevelopmentcenter
Parent Handbook Table of Contents

1. IMPORTANT PHONE NUMBERS, pg. 5

2. INTRODUCTION, pg. 6
   a. Mission Statement, pg. 6
   b. History, pg. 6
   c. Equal Opportunity and Affirmative Action, pg. 6
   d. MN Dept Ed Civil Rights, pg. 8
   e. Licensure, pg. 8
   f. Memberships, pg. 8
   g. Special Features, pg. 8
   h. The Staff & Staff Composition, pg. 9
      i. Employment/Background Study, pg. 9
      ii. New Teaching Staff Orientation & supervision of student workers/CCW’s, Childcare workers p. 9
      iii. Professional Training, Instruction and Supervision, pg. 9
      iv. Staff Biographies, pg. 10
      v. Staff Composition, pg. 11

3. ENROLLMENT, pg. 12
   a. Roster (wait list) Policies, pg. 12
      i. Roster for admission (wait list order of priority), pg. 12
      ii. Sibling Priority Policy, pg. 12
   b. Admission Policies, pg. 12
      i. Acceptance, pg. 12
      ii. Pre-Admission, pg. 12
      iii. Enrollment Meeting and Required Forms, pg. 12
      iv. Bungalow “Intake Meeting”, pg. 13
   c. Affiliation, pg. 13
      i. Affiliation and Eligibility Requirements, pg. 13
      ii. Continued Affiliation, pg. 14
      iii. Applying for a Waiver of Affiliation, pg. 14
      iv. Conflict Resolution and/or General Grievance, procedure & levels & Disenrollment, pg. 15/23
      v. Parental Notice of Termination of Care, pg. 15
      vi. Departure Information Form, pg. 16
      vii. Program Termination of Care/Removal from Waiting List, pg. 17
      viii. Grievance of Notice of Termination, pg. 17
   d. Leaves of Absence, pg. 18
      i. Summer Leave of Absence Policy, pg. 18
      ii. Medical Emergency Leave of Absence Policy, pg. 19
         1. Medical Emergency Enrollment/Attendance Policy, pg. 19
      iii. Behavioral and/or Developmental Leave of Absence Policy, pg. 19

4. GENERAL PARENT INFORMATION, pg. 20
   a. Parking and Building Access, pg. 20
      i. Parking, pg. 20
      ii. Building Access, pg. 20
   b. Parent Communication, pg. 21
      i. Parent a) Mail Boxes, pg. 21; b) Parent e mail of “Daily Journal” p. 23
      ii. Bulletin Boards, pg. 21
      iii. Child Development/Child Care Program Plan, pg. 21
      iv. 6-Week Surveys, pg. 21
      v. Who To See, pg. 21
      vi. Parent Consultative/Advisory Committee, pg. 21
      vii. Other Parent Participation Functions, pg. 22
      viii. Two-Way Communication, pg. 23
      ix. General Grievance Procedure, pg. 23
   c. Research Activities, pg. 23
d. Mandated Reporting Responsibility, pg. 24
   i. Car Seats/Restraint, pg. 24
   ii. Maltreatment of Minors Mandated Reporting Policy for DHS Licensed Programs, pg. 24

e. Babysitting Policy, pg. 26

f. Visitors, pg. 27
   i. Adult visitors/tours, pg. 27
   ii. Non-Enrolled Children, pg. 28
   iii. Enrolled Sibling, pg. 29

5. Program Philosophy, pg. 28
   a. Research Based, pg. 28
   b. Role of the Teacher, pg. 29
   c. Role of the Environment, pg. 29
   d. Curriculum, pg. 29
   e. Readiness, pg. 29
   f. Touch and Nurturing, pg. 30
   g. Diversity, Multiculturalism, Affirmative Action, Anti-Bias, pg. 30
      i. Cultural Sensitivity and Language, pg. 31
      ii. Holidays, pg. 31

6. Program Practices, pg. 31
   a. Guidance: Guiding Children: Our Practices and developing Self-Regulation, pg. 31
      i. Behavior Guidance in MN License, DHS, Rule 3, guidelines 9503.0055 ”Behavior Guidance” pgs. 32, 33; NAEYC area of 1E.1
   b. Challenging and/or Behaviors that Cause Health or Safety Concerns, pg. 33
   c. A Day in the Life of Your Infant, Toddler or Preschooler, pg. 34
      i. Infant Program, pg. 35
      ii. Toddler Program, pg. 35
      iii. Preschool Program, pg. 37
   d. Field Trips/Transportation, pg. 38
   e. Outdoor Activities, pg. 39
   f. Nap Policy, pg. 39
   g. Diapering, pg. 39
   h. Toilet Learning, pg. 40
      i. Clothing, pg. 40
   j. Toys, pg. 40
   k. Birthdays and Photos, pg. 41
   l. Other Celebrations and Events, pg. 41
      i. Last Day Celebrations, pg. 41
   m. Movement, Transitions to Older Groups, pg. 42
      i. Children Transitioning to Kindergarten, pg. 42

7. Assessment Plan, pg. 42
   a. How are children Assessed, by whom, and familiarity with adults involved?, pg. 42
   b. Where to review the tools, Desired Results Developmental Profile (DRDP), pg. 43
   c. Assessment Training for Teaching Staff, Area Coordinators, and Administration, pg. 43
   d. Who has access and confidentiality, pg. 43
   e. Parent Input and Frequency of Assessment, pg. 43
   f. Purpose of Assessment and How it is Used, pg. 44
   g. Cultural Sensitivity and Language, pg. 44
   h. Children Develop at Varying Rates, pg. 44
   i. Resource and Referral Process for Concerns, pg. 45
   j. Resource and Referral Process Chart, pg. 47

8. Health, Safety and Emergency Policies, pg. 48
   a. Times, Limits and Closure of UMCDC, pg. 48
   b. Arrival and Departure, pg. 48
      i. Arrival, pg. 48
ii. Departure, pg. 49
iii. Alternative Pick Up Authorization Policy, pg. 49

C. Late Pick Up Policy, pg. 50
   i. Building Closure and Late Pick Up Policy, pg. 50
   ii. Late Pick Up Charges, pg. 50
   iii. Emergency Situation, pg. 51

D. Emergency Card, pg. 51
   i. Emergency Contacts, pg. 52

E. Health Record Information, pg. 52
   i. Immunization Records
   ii. Health Care Summary
   iii. Health % Safety file confidentiality & who can access

F. Medications, pg. 53

G. Exclusion Policies, pg. 54
   i. Exclusion of Ill Child, pg. 54
   ii. Common illnesses/Exclusion policy chart, pg. 54
   iii. Other Reasons for Exclusion, pg. 54

H. Care of Injured or Ill Children (“Well Care”), pg. 55
   i. Accidents and Injuries, pg. 55
   ii. First Aid, pg. 55
   iii. Risk Reduction Plan, pg. 56
   iv. Health Consultation Services, pg. 56
   v. Insurance, pg. 56
   i. Emergency Preparedness, pg. 56
      i. Evacuation and Taking Shelter, pg. 56
      ii. Emergency Closing and Evacuation, pg. 57
      iii. Missing Child Policy, pg. 57

J. Environmental Safety Policies, pg. 58
   i. Soil Quality, pg. 58
   ii. Air Quality, pg. 58
   iii. Plants, pg. 58
   iv. Sunscreen, pg. 58

9. FEES & PAYMENT, pg. 58
   a. Income Reporting/Sliding Fee Scale, pg. 58
   b. Payment Policies, pg. 59
      i. Late Charge, pg. 59
      ii. Non-Sufficient Funds Check, pg. 60
      iii. Service Charges/Penalties, pg. 60
      iv. Operating Budget, pg. 61

10. FOOD PROGRAM, pg. 61
    a. Special Diet- Forms and Definitions, pg. 62
       i. Food Brought From Home Is Restricted, pg. 62
    b. Infant Food Program, pg. 62
       i. Feeding Practices, pg. 63
       ii. Breast Milk/Nursing Stations, pg. 63
    c. Portions Served at UMCDC, pg. 63

11. CENTER EVENTS, pg. 64

12. DAYS CLOSED CALENDAR, pg. 65
IMPORTANT TELEPHONE NUMBERS

Emergency—Police, Fire, Ambulance .................................................................................. 911
Hennepin County Medical Center (Emergency)
900 South 8th Street, Minneapolis ..................................................................................... 612-873-3131
Help Me Grow ..................................................................................................................... 1-866-693-GROW (4769)
St. Joseph’s Home for Children
1121 East 46th Street, Minneapolis ................................................................................... 612-204-8250
Minneapolis 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 ................................................................................. 612-873-3161
Greater Minneapolis Crisis Nursery ...................................................................................... 763-591-0100
Child Care Referral Network (Think Small) ........................................................................ 651-641-0305
U of M Police Dispatcher ..................................................................................................... 612-624-2677
U of M Office of Emergency Management ......................................................................... 612-625-8047
Parent Warmline ............................................................................................................... 612-863-6336
INTRODUCTION

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” child development and care program for University of Minnesota affiliated staff, faculty, and students.

HISTORY
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 2015 (required every 5 years). UMCDC will be visited, assessed, and reaccredited by an assessor in May 2020.

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 new and 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 UMCDC, the University of Minnesota Child Development Center, and its mission was approved by the Board of Regents. This new name reflects the child development program, increase in research, observation opportunities, and as a practicum and potential student teaching site for University of Minnesota students and to align in name with the College of Education and Human Development (CEHD) name.

UMCDC is currently licensed by the Minnesota Department of Human Services to serve 140 full time children daily between the ages of three months and pre-kindergarten in a group child care setting (18 infants, 54 toddlers, 68 preschoolers) with a child development program.

EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION
The University of Minnesota's Office of Equal Opportunity and Affirmative Action (EOAA) was founded in 1972 to ensure that all University community members uphold federal and state civil rights laws and regulations, as well as University equal opportunity policies.
The EOAA Office envisions a University community that is equitable—one that values the diversity of its workforce and student body and is free from discrimination and harassment. We act as a neutral party to advise individuals and departments about perceived, existing and potential discrimination, harassment, sexual violence, retaliation, and potential violations of the policy against nepotism through consultation and investigation.

EOAA investigates complaints about discrimination; harassment, including sexual harassment; sexual misconduct, including sexual assault, stalking, and relationship violence; nepotism; and retaliation.

EOAA provides educational programming on issues related to discrimination, harassment, sexual violence, bullying, religious discrimination, and the hiring process.

EOAA also is responsible for recommending changes and making revisions to relevant University policies and procedures.

“The University shall...provide equal access to and opportunity in its programs, facilities, and employment without regard to race, color, creed, religion, national origin, gender, age, marital status, disability, public assistance status, veteran status, or sexual orientation, gender identity, or gender expression.”

Adopted by the Board of Regents of the University of Minnesota, September 7, 1995 (Amended July 8, 2009)

The University of Minnesota Regents Policy on Equity, Diversity, Equal Opportunity, and Affirmative Action concisely states the commitment to a nondiscriminatory work and educational environment for all faculty, students, and staff.

The University is an international employer and educational institution whose diversity strengthens its educational programs. Its mission of research and discovery, teaching and learning, and outreach and public service involves a search for solutions to world problems, not just problems of a particular culture, race, or geographic area. The concept of racial and cultural diversity, extended to all levels of participation at the University, strengthens the workforce in the same manner.

In addition, the University receives contracts and grants from local, state, and federal agencies. The agencies providing these funds stipulate that a recipient must provide equal opportunity and affirmative action to its faculty, students, and staff.

Equal opportunity and affirmative action place the University in a better position to meet its land-grant mission of eliminating problems in the state by applying research knowledge. The multicultural, multiracial, social and economic problems of the state need multicultural, multiracial input to provide solutions.

Each college, administrative unit, and campus has an Equal Opportunity and Affirmative Action Liaison responsible for coordinating the equal opportunity efforts at that level.

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.
MINNESOTA DEPARTMENT OF EDUCATION Civil Rights Statement

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

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

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

(1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
(2) fax: (202) 690-7442; or
(3) email: program.intake@usda.gov

LICENSURE

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).

MEMBERSHIPS

UMCDC is a member of the National Association for the Education of Young Children (NAEYC), the North American Reggio Emilia Alliance (NAREA), and the national organization, Zero to Three.

SPECIAL FEATURES OF UMCDC

- UMCDC has a commercial kitchen and 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. We do not serve pork or peanuts, and offer a vegetarian and omnivore menu. Plus, we do cooking activities with children starting in toddlers as a part of our child development program. For more information, see the video on UMCDC’s website.

- UMCDC is contracted annually for monthly health and safety visits with Minnesota Child Care Health Consultants.

- Linkages with University departments include landscaping and play yard inspection and/or consultations regarding the building, air quality, and environmental matters, such as an Industrial
Hygienist; research activities, CEED, ICD, Child and Education Psychology, Occupational Therapy, Physical Therapy, Kinesiology, Music Education, and dance.

- The UMCDC Environment is a creative and effective facility designed for full day child development program. It is planned to provide comfortable homey and inviting place for children to engage with the environment and have rich interactions with children and adults. UMCDC’s child development program uses sustainable materials whenever we can. Our colors, light-scapes, materials, furniture and ambient tone are intentional. These elements are intended to enhance exploration, to guide development across domains and for the children to develop relationships and gain a sense of belonging and community.

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

- UMCDC is a child development program (see philosophy, assessment, resource & referral flow chart, as well as the program section “A Day in the Life of Your…”)

THE STAFF & STAFF COMPOSITION
EMPLOYMENT/BACKGROUND STUDY

Background Study: All employees must pass a University and DHS Background Study upon hire and rechecked every three years. All employees also have their fingerprints taken upon hire.

Full Time Staff: UMCDC full time staff are bargaining unit, civil service, or P and A 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, holding undergrad or graduate degrees and/or teaching licenses.

Part Time Staff: Part time staff are referred to UMCDC by the University’s Human Resources department and are university students. UMCDC administrative staff screen, orient, and supervise.

When a Director is hired the search committee is chaired by the CE+HD Assistant Research Dean. The committee consists of the aforementioned, plus a UMCDC parent, a teacher, a UMCDC Area Coordinator, and the UMCDC Education Coordinator. The final approval is by the Dean of the College of Education & Human Development.

PROFESSIONAL TRAINING AND INSTRUCTION

It is our policy that new teaching staff do not work alone with children until they have received an initial orientation to the program, policies, and practices and a review of their job description. CCW’s, Student childcare workers do not work alone with staff. They must be with, and be supervised by, regularly scheduled teaching staff at all times.

Each year the Director and teaching staff in Minnesota 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 Units every 5 years and training to maintain and sustain NAEYC National Accreditation.

UMCDC provides on-going professional staff development opportunities including weekly Area Coordinator and teacher meetings, special workshops, Regents Scholarships for accredited courses offered at the University, UMCDC Staff Development Days, professional workshops, and conferences. Staff participate in pediatric first aid and CPR every two years; as well as Abusive Head Trauma, SUID (Sudden Unexpected Infant Death) and a “Risk Reduction Plan” (mandated by MN DHS Licensing) annually. Staff also participate in NAEYC accreditation training on standards, processes, and procedures.

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

STAFF BIOGRAPHIES

• **Director, Ann Edgerton**, is licensed in California and Minnesota with a bachelor’s in Elementary and Early Childhood Education, a Master’s degree in Early Childhood Education and Early Development, a British Infant School diploma for birth- eight years, and a Montessori diploma from London, England. She is experienced as a faculty member in her field, as well as an administrator of college/university and public programs in Early Childhood, such as Head Start, and Early Head Start. The Director works collaboratively with CEED, the Shirley G. Moore Lab School, and the Institute of Child Development; and served on several boards and committees, such as the MN Department of Education Core Competencies Committee, Early Childhood Indicators of Progress (ECIPs) and formerly on the program committee of “People Serving People.” She is a certified trainer in West Ed/PITC (Program for Infant/Toddler Caregivers).

• **Education Coordinator, Sarah McKee**, is licensed in Minnesota with a Master’s degree in Education from the University of MN. Sarah has had a long career at UMCDC, starting as a student, an assistant teacher, a teacher and as a Bungalow Area Coordinator. She became the Education Coordinator in 2009. Sarah is a certified trainer of West Ed/PITC infant and toddler modules.

• **Teacher supervisors, Area Coordinators**, are educated in Early Development, Birth to 8 years, and/or Early Childhood Education or elementary education, many hold MN teaching licenses and Master’s degrees.

• Please inquire at the Front Desk for biographies of teaching staff; they are located in a binder.
STAFF COMPOSITION

ADMINISTRATION
1 full time Director
1 full time Education Coordinator
1 full time Assistant Administrator/ Enrollment Coordinator
1 full time Principal Office and Administrative Specialist
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
3 100% 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
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
ENROLLMENT

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 Enrollment Coordinator and the Area Coordinator.
3. Previously enrolled child returning from an approved and paid leave of absence. (See SUMMER LEAVE OF ABSENCE POLICY)
4. 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.)
5. 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. 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.

ADMISSION POLICIES

ACCEPTANCE
Parents are notified when a space is available and are given 24 hours to accept the offer. 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 are in communication with the Enrollment Coordinator. An intake meeting with the child’s Area Coordinator for the assigned bungalow is scheduled.

ENROLLMENT MEETING and REQUIRED FORMS
The enrollment meeting, time and date is set by the enrollment coordinator. This meeting is with the Director and the Enrollment Coordinator to review enrollment forms and UMCDC’s policies. This meeting is for the parents, administrators and other enrollees, no children attend. During this meeting you are given this
handbook (which includes health policies), and several required admission forms. You must read, understand, and sign your agreement to abide by & implement all policies in this handbook. The Center requires you to sign and date a form stating this. You will also receive a Child Development Program Plan (known as a Child Care Program Plan) from your child’s Area Coordinator (Bungalow Teacher/Supervisor).

**BUNGALOW “INTAKE MEETING”**

For this *intake meeting* it is preferred that the child attend to get to know the environment of their bungalow and the Area Coordinator. Enrollment of siblings does not require another full review and enrollment meeting. However, an *intake meeting* with the child’s Area Coordinator is required.

---

**9503.0045 CHILD CARE PROGRAM PLAN – MINNESOTA DEPARTMENT OF HUMAN SERVICES**

Subpart 1. General requirement. Must develop a written childcare program plan, and the license holder must see that it is carried out.

Minnesota Department of Human Services 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.

The child **cannot** begin attending UMCDC without a current, signed **IMMUNIZATION RECORD** and the completed **EMERGENCY CARD**. UMCDC is required to track immunizations and files an annual immunization report.

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 collected.

---

**AFFILIATION**

**AFFILIATION AND ELIGIBILITY REQUIREMENTS**

You must have proof and 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 currently 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 be currently taking three credit hours each semester 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 a part day program for you child care.

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

4. Faculty or professional administrative position currently employed 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.

CONTINUED AFFILIATION

Eligibility requirements may be waived for students 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, 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, and loss of an affiliated parent, a final request may be made to UMCDC Director for a waiver of 30-90 days.

**DISENROLLMENT**

**WHEN YOU WISH TO DISENROLL – 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.
Departure Information & form (can be picked up or found online)

It is important for us to know when children are leaving the program, why they are leaving and how their parents feel about the program. This information will help us to improve our program as well as make staffing and enrollment plans.

If you have already given a two-week written notice, please fill out the following questionnaire and return it to the front desk before your child’s last day.

If you have not given a written, final notice of your child’s last day, you may do so with this form. Indicate the last day, sign it and return it to the front desk no later than two weeks prior to the indicated last day and turn your notice in three weeks prior to the indicated last day, you will receive a $25 credit. If you turn your notice in four weeks prior to the indicated last day, you will receive a $50 credit on your last billing statement.

Please rate your level of satisfaction with your child’s care (1 being very dissatisfied, 5 being very satisfied)

1 2 3 4 5

The reason my/our child is leaving is:

___ The family is moving
___ The child is no longer eligible due to lack of parental University affiliation
___ I/We can no longer afford the cost of care at UMCDC
___ The child is leaving for kindergarten
___ Other (please specify) ____________________________________________________________

___ Dissatisfaction with the quality of care (Please explain):

____________________________________________________________________________________
____________________________________________________________________________________

Any comments you care to make and/or please tell us your favorite part of UMCDC.

____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Name of Child: ________________________________________ ’s last day will be _________________

Bungalow: ______

_________________________________________________________  ____________

Parent Signature                      Date
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. Willful misrepresentation or 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 RESOURCE AND REFERRAL PROCESS) or failure of parent to meet assessment needs (see #7).

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 observe your child in the classroom or to seek and use outside resource or referral services for testing within three months of the request, 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). (Three times per semester)

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

10. Inability 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.

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

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 and be heard at the next level.

The final step and 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.

**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 and full participation. A signed statement from the child’s health care provider ensuring
the child is well enough to fully participate is required upon returning to the program.

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 and administrative staff plan for NAEYC/accreditation ratios,
and for the kitchen to adjust the preparation of special dietary foods.

**BEHAVIORAL AND/OR DEVELOPMENTAL LEAVE OF ABSENCE POLICY**
Early intervention, as shown from research, gives your child the best opportunity for the highest outcomes.
UMCDC may not be able to meet the developmental, behavioral, health or safety needs of your child and
others. If 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 discuss and set a date for termination of child development program 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 health and safety of all children in their care,

2. After attempts at addressing any specific behavior and/or a developmental delay through reasonable modifications to classroom policies and practices we cannot serve the child without further modifications that constitute a fundamental alteration (and/or direct threat to the health and safety as in the aforementioned #1). Changes that compromise their ability to adequately meet the needs of all of the children in their care also indicates that UMCDC is no longer the most appropriate environment for that child’s needs or others.

The UMCDC director may waive the requirement for 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 diagnostian
   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 meets with your service provider, the school district.
   c. Translates that plan into the context of UMCDC’s Individual Child Care Program Plan, ICCP.
2. The child has begun to receive intervention services for the behavior(s) or developmental concern, and
   a. The provider of intervention services, your school district (known as your service provider), documents that the child is now able to participate in a full-day group childcare program without requiring a fundamental accommodation that compromises 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. The service provider’s (school district) IEP/IFSP plan and services are active and ongoing. The child’s anticipated success in a full-day group child development program is dependent upon continued intervention services.
4. The service provider’s (your public school district) education plan and services are identified and provide for every need. The plan is reviewed every year.

NOTE: If you, as a parent, feel like your child’s needs are not being met for your child on an IEP/IFSP, you need to speak with the child’s school district, your service provider, ECSE teacher/case manager in your school district or the district that is providing services for your child. **UMCDC is not your public service provider, your school district is.**
GENERAL PARENT INFORMATION

PARKING & BUILDING ACCESS

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.

Please comply with signage, including “one way” signs, and drive slowly and carefully. Do not park in the front pedestrian walkway.

BUILDING ACCESS
UMCDC is a secure building. All primary caregivers and staff are required to enter the building using the non-touch electronic card reader. University affiliated parents will submit their U Card to UMCDC front desk staff to be entered into the system, and unaffiliated parents will be issued a temporary access card with a $25.00 charge to their tuition bill. (The card fee will be refunded upon disenrollment if the card is returned.)

All visitors must ring the doorbell and stop at the front desk to sign in and get a nametag.

PARENT COMMUNICATION & PARTICIPATION

PARENT MAIL
Parents are assigned a mailbox for each child. Please check each parent box daily.

BULLETIN BOARDS
A Parent bulletin board is located near the entrance with menus, USDA information, etc. Information is also posted on the kiosk in the reception area and features special events and announcements. Each Bungalow maintains a special parent-staff communication board in the foyer.

CHILD DEVELOPMENT/CHILD CARE PROGRAM PLAN
Each age group has written a Child Development/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.
6-WEEK SURVEYS
You will receive an emailed survey when your child has spent six weeks in a new bungalow, both after enrollment and after inter-bungalow movement. The responses are reviewed by the Director, Education Coordinator, and Area Coordinator. The survey helps us to better understand your initial experience at UMCDC, to answer questions, make clarifications, or improvements.

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

Education Coordinator – regarding day to day operations, classroom practices and procedures, resource & referral, family concerns, MN DHS-licensing, standards, staffing and the Director’s calendar.

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

Area Coordinator – regarding bungalow and classroom procedures, the play yards, curriculum, practices, routines, supervision of Bungalow teaching staff, and conferences.

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

PARENT CONSULTATIVE COMMITTEE
Purpose: UMCDC’s Parent Consultative Committee (PCC) supports the Center, parents and families and works with the Director and/or the Education Coordinator and is advisory in nature. The PCC is not an approving body. Its role is to provide education, feedback and input to the Center administration on matters of policy, to help with fundraising, other Center-based events, and activities that benefit parent involvement, children, and the Center overall. PCC meetings run September through May. All center parents are welcome & encouraged to become part of the Parent Consultative Committee.

The Parent Consultative Committee confers with the Director and/or the Education Coordinator or committees and advises on topics of interest, such as:
- Parent involvement and representation by classroom or bungalow
- Fundraising
- UMCDC’s strategic plan, outcomes, objectives, tasks and activities
- Parents’ perspectives
- Annual surveys and other activities that help maintain our high quality child development program.
- Education, executive functions, challenging behaviors, transitions, and school readiness

Primary responsibilities of each Parent Consultative Committee Bungalow/Room representative include:
- Attends scheduled monthly meetings September through May
- Communication to maximize parent involvement in center activities/events
Participation in fundraising activities and recruitment of parent volunteers for activities such as Week of the Young Child, Peace and Kindness Week, Literacy Week, Planting Day and Garden Party.

Other Parent Consultative Committee activities include:
- Organizing center-wide social events such as picnics or welcome to new parents.
- Fundraising for specific items, e.g. field trip(s).

**OTHER PARENT PARTICIPATION FUNCTIONS**

UMCDC staff offer several ways for parents to be involved in the program:
- Events e.g. NAEYC’s Week of the Young Child, Kindness Week, Book Week, Festival of Learning, Planting Week/Garden Tour and Harvest Festival.
- Area family classroom events, or parent dialogues/teas are scheduled (for example, art show, kindergarten transition, etc.)
- Active parent participation is needed to assist in events, gardening, donations of materials to classrooms, etc.
- Parents are invited to participate and help with field trips (photo taking, trip notes, etc.)
- Parents are welcome to visit UMCDC and observe their child anytime. You are encouraged to consult with the Area Coordinator for purposes of space, schedule, and materials if you want to lead an activity.
- Parents’ expertise, skills, and talent are welcome ...please let us know what interests you, your special skills e.g. music, science, art that you have!
- At times, written parent input via a survey, evaluation of UMCDC is conducted. Routine questionnaires ask for your input about how well we’re doing with your child such as the 6 week parent questionnaire and the NAEYC Parent Survey.
- At least two days prior to the conference, we ask for your input, prior to each conference on a parental input form that is emailed to you. Please take the time to complete it and return it to the front desk. Your input is desired!

Please Note: UMCDC has an “Open Door Policy.”

**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’s the best to have your child here by 9:30 a.m. so they can fully participate in developmental activities. If you want your child to have breakfast at UMCDC they must arrive by 9:00 AM.

Teachers of Infants and Toddlers provide parents with daily written notes about the child’s food intake, elimination, sleeping patterns, mood, and general behavior. 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 can communicate details of their day themselves and you receive a daily journal from your child’s classroom teaching staff.
Parents of both Toddlers and Preschoolers receive a “Daily Journal” each day. This includes some pictures of the children’s activities, a write-up of specific interests the children participated in, and/or what Desired Results measures the children worked on. This will be e-mailed to parents during mid-day so that you may receive and look at it before you come to pick up your child. The Daily Journal does not seek to take a photo of each child each day, but rather to represent what the children and teachers are working on. This is so you might discuss with your child what they did that day and/or to use the idea or activity at home and build on it.

**GENERAL GRIEVANCE PROCEDURE**

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

- If applicable, the parent shall first discuss the issue with the Bungalow Teacher or Area Coordinator/Teacher Supervisor involved because they know your child best from daily contact.

- If no resolution is reached with the Bungalow Classroom Teacher and/or Area Coordinator, then the parent shall discuss the issue with the Education Coordinator where the perspective and points of view both will be shared.

- 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.

NOTE: If you feel your child’s needs are not being met via an IEP/IFSP, you need to speak with the child’s school district who is your service provider, ECSE teacher, case manager in your school district, or the district that is providing services for your child. **UMCDC is not a public service provider, your school district is.**

**RESEARCH ACTIVITIES**

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 screens, then approves or denies proposals for research at UMCDC.

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 to give consent 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 give a written summary, preferably the summary given to the IRB of the proposed research. (2) The proposal number and the approval by the University Committee on the Use of Human Subjects, (3) then by the Director and/or Education Coordinator of UMCDC to proceed. (4) We ask the PI or her/his representative to present the proposal to the Area Coordinators meeting. (5) Once approved, a consent form is placed in parent mailboxes. (6) We ask that the researcher spends several hours in the classroom getting to know the children in the group. (7) After the children are familiar with the researcher, the children may be invited to the UMCDC flex/research suite or...
conference room, stay in the classroom setting or foyer, to participate in the research activity. 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 posted in the Bungalows. Parents with questions or concerns may contact their Area Coordinator, child’s teacher, the Education Coordinator, Director, or the researcher conducting the project.

*Researchers who have contact with children ALL have had criminal background checks and complete a Confidentiality Statement.

**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.

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

**CAR SEATS/RESTRAINT**

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. For more information visit [https://dps.mn.gov/divisions/ots/child-passenger-safety/Pages/default.aspx](https://dps.mn.gov/divisions/ots/child-passenger-safety/Pages/default.aspx)

**MALTREATMENT OF MINORS MANDATED REPORTING POLICY-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 certified center, you are legally required or mandated to report and cannot shift the responsibility of reporting to your supervisor or to anyone else at your center. 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.
- Reports concerning suspected abuse or neglect of children occurring in a licensed child foster care or family child care facility should be made to county child protection services.
- Reports concerning suspected abuse or neglect of children occurring in centers certified by the Minnesota Department of Human Services should be made to the Department of Human Services, Licensing Division’s Maltreatment Intake line at (651)431-6600.
- Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency or local law enforcement.
- If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota Statutes that govern the facility, you should call the Department of Human Services Licensing Division at (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 person(s) responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include any actions taken by the facility in response to the incident.
- An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays.

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 from programs licensed or certified by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations. MN Department of Human Services Division of Licensing December 2017

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 within 30 calendar days 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 reviews completed
- The internal review will be completed by the Education Coordinator. If this individual is involved in the alleged or suspected maltreatment, the Director will be responsible for completing the internal review.

Documentation of Internal Review
- The facility must document completion of the internal review and make internal reviews accessible to the commissioner immediately 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 certification 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 certification holder must document the provision of this training in individual personnel records, monitor implementation by staff.

**Provide Policy to Parents**
- 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 available upon request.

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
  - Hennepin County Resource: http://www.hennepin.us/residents/health-medical/early-childhood-intervention-services
  - 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

### PARENTS HIRING UMCDC STAFF TO DO PRIVATE CHILD CARE/BABYSITTING

**UMCDC does not approve, give references, or maintain a list** 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 or emails 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.

**VISITORS**

**ADULT VISITORS/TOURS**

It is a policy and accreditation 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. 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. 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. **Parent 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 tour 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 at 9:30 a.m.** Questions related to the waiting list should be directed to UMCDC’s Enrollment Coordinator.

**University and community members:** 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 must be arranged in advance.** Examples of these special visitors include: University recruitment, researchers, potential employees, faculty, practicum students, community or State 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**

**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.

**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.

**PROGRAM PHILOSOPHY**

Philosophically, UMCDC is based on socio-cultural, social constructivist, and ecological theories. Inspired by research and by the schools of Reggio Emilia and Pistoia, Italy. Examples of the theoretical work which the center draws on: Lev Vygotsky, Jean Piaget, Urie Bronfenbrenner, Erik Erickson, Alice Honig, Janet Gonzalez-Mena, Lillian Katz, Pruett, Maria Montessori, Rinaldi, Carolyn-Pope Edwards, L. Gandini, Reuwen Feuerstein, Ron Lally West Ed/PITC. The Center is accredited by the National Association for the Education of Young Children, NAEYC with which UMCDC standards and practices are aligned.
ROLE OF THE TEACHER
Teachers see themselves with children as facilitators, co-researchers and co-constructors of knowledge in areas of psycho, social, emotional, motor and cognitive development. Teachers develop and create “emergent curriculum” around children’s interest(s), their development, our observations, assessment, and the teachers’ knowledge of child 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 through their interactions.

ROLE OF THE ENVIRONMENT
The physical environment incorporates natural elements and is sensory rich, and engaging to children. Simultaneously, the Bungalows are comfortable and “homey.” Walls, shelves and closet areas are 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,” classroom(s) areas for the lightscape, color, and natural elements such as: plants, wood furniture, equipment. Other intentional materials are brought in for art, problem solving, projects and activities. The over-all ambient tone of the room(s) is significant to our staff and the children.

CURRICULUM
Curriculum(s) provides a framework for developmentally appropriate encounters, experiences, investigations, and projects to engage children, to give them opportunities to explore, problem solve, investigate and develop “executive functions”. In infancy this curriculum is primarily embedded in routines, caregiving relationships, interactions, and practice of basic physical/motor development. In toddlers 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 development, interests and needs.

READINESS
Readiness is looked at developmentally. The indicators in the assessment tool that UMCDC uses are a progressive range 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 and “co-regulating” so that children can anticipate, thus helping them to wait, to learn 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, perspective taking and small group projects we exercise these skills and develop “executive functions”. 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 know 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, anticipating or predicting “what’s next,” generalizing, and creating using a variety of processes and modalities.
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 and space 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, (e.g. biting) or to provide the least restrictive guidance necessary in a given situation.

Children are taught through assisted interactions using “co-regulation” by modeling, and verbal guidance to use words and problem solving rather than hurtful physical reactions to settle their differences with others.

DIVERSITY, MULTICULTURALISM, AFFIRMATIVE ACTION 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, kindness and a sense of belonging and community. 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.

We make reasonable efforts to modify and accommodate individuals with developmental delays and/or disabilities that do not require a fundamental alteration to the program or compromise health and safety.

**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 diversity and 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. We encourage you to retain and use the language of your culture.

**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.**

**PROGRAM PRACTICES**

**GUIDING CHILDREN TOWARDS SELF-REGULATION**

Self-regulation is an important indicator and predictor of success throughout life. It begins in infancy with 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 to their caregivers 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 can rely upon their caregivers for a response. This is the beginning of self-regulation. Simultaneously, infants begin to learn “self-calming” strategies that may include learning to suck their thumb, rub a cheek on a satin blanket trim, and/or use a pacifier. Self-regulation consists of impulse control, seeking other’s help to regulate self (co-regulation), responsiveness to support, self-comforting/calming focusing attention, and perseverance. These components are taken directly from the assessment tool used at UMCDC, the California Department of Education/Child Development Division developed by West Ed/PITC (Program for Infant and Toddler Caregivers.) 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), and encapsulates such things as “turn taking” and the “shared use of space.” These will be in your child’s preschool assessment 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 when one is taken from them, they probably use a conflict resolution technique or seek the help of an adult. Self-regulation is important for myriad reasons: self-regulation is key to the child; it is the ability to establish relationships, to have friends, to have a sense of belonging (community) with others. Unregulated children often feel left out, unsure, and unhappy. We strive to assist your child in building skills using “co-regulating” and “mediators” that lead to self-regulation. At home you may have many ways to build on these around games, play dates, meals, baths, sleep, etc. Boundaries, consistency, predictable routines, interactions, your engaged responsiveness, and constancy assist your child to develop self-regulation and are consonant with our program.

BEHAVIOR GUIDANCE IN MINNESOTA LICENSING
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. The applicant must develop written behavior guidance policies and procedures, and the license holder 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.

Subp. 2. Persistent unacceptable behavior. The license holder must have written procedures for dealing with persistent unacceptable 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.

Subp. 3. Prohibited actions. The license holder 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. NAEYC Accreditation Standard 1B.8; 1B.10
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. NAEYC Accreditation Standard 1B.8; 1B.10
C. Separation of a child from the group except as provided in subpart 4. NAEYC Accreditation Standard 1B.10
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. NAEYC Accreditation Standard 1B.10
G. The use of mechanical restraints, such as tying. NAEYC Accreditation Standard 1B.10

For children with developmental disabilities 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.§

Subp. 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.

Subp. 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.

Subp. 6. Children with developmental disabilities. For children with developmental disabilities 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.

Statutory Authority: MS s 245A.02; 245A.09; 252.28; 256B.092

History: 13 SR 173; 18 SR 2244; L 2005 c 56 s 2

Published Electronically: October 8, 2007

CHALLENGING BEHAVIORS THAT CAUSE HEALTH OR SAFETY CONCERNS

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 note the time, the location and circumstances when they occur, and to anticipate problematic behavior to take steps to prevent it and to 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 as we work to meet and satisfy childrens’ needs and desires while modeling appropriate behavior and giving them opportunities to exercise and strengthen their competency in conflict resolution, self-regulation, and self-calming to bring down their arousal state.
The Center will initiate the steps outlined in the *Referral Process* in the event of behaviors that persist, cause harm to the child or to others, or present safety or health issues.

At about age 3, children are fascinated with the concepts of good, bad and power- and the acting out of roles that depict these concepts. In our experience, these play activities may not be intended to harm another person, but may 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 be 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. TV “violence” is not appropriate viewing for young children.

A primary focus of curriculum is to develop executive functions (e.g. self-regulation) and skills such as conflict resolution. We interpret some activities, as mentioned above, as children’s attempts to experience being masterful, strong and powerful. If this is the case, we look for alternate ways for children to experience being strong, powerful, and competent. Examples include being the teacher’s helper, having special jobs (carrying the clipboard to the next activity, showing younger children how to do things, etc.), or providing an interesting and challenging environment. We work to engage the children in community helper roles such as firepersons, nurses, and doctors, and redirecting potentially fear-producing or unsafe activities.

Our guidance and discipline policy goal and our practices are to limit or eliminate the use of suspension, expulsion, and other exclusionary measures. (NAEYC Accreditation 1E.1)

**A DAY IN THE LIFE OF YOUR INFANT, TODDLER OR PRESCHOOLER**

Each child is unique and special in their own way. Finding a child development center that is a good fit for each child’s unique needs can sometimes be challenging. As we describe “A Day in the Life” for each age group, we ask that you envision your child within that day and consider what UMCDC will offer and if there are unique things about your child that you feel are important to consider as we partner with you in supporting your child’s development. Please also consider the following as you envision your child participating in a typical day at UMCDC.

**UMCDC programming fosters early brain development.** In all age groups we are interested in building “executive functions,” an early taxonomy of cognition, a strong sense of self, relationships, and belonging. These are foundational and lead to school readiness, success in school, and throughout life.

**UMCDC is a well-child center.** This means that your child is well, is healthy, can fully participate in group routines and our developmental program. And, this keeps our staff healthy and stops the spread of communicable illnesses to others.

**UMCDC values the unique characteristics of all children, but given our mission and program design, we are not always the best match to nurture all children’s unique needs.** MN Parents Know ([http://parentsknow.state.mn.us/parentsknow/index.html](http://parentsknow.state.mn.us/parentsknow/index.html)) is an excellent resource if you are wondering about what healthy and normative development looks like. If you have concerns about your child’s development, we suggest you contact Help Me Grow ([http://helpmegrowmn.org/HMG/Refer/index.htm](http://helpmegrowmn.org/HMG/Refer/index.htm)), a free program offered by the state of Minnesota. We can also notify HelpMeGrow when we have concerns. We suggest that you call your pediatrician or another specialist if you have concerns. UMCDC is not a “service provider”: your school district is, for infants, toddlers and preschoolers. The environment at UMCDC is designed to assist a range of
normal development through nurturing and providing an intentional environment which is well thought out in regard to materials, lighting, routines, and interactions such as face-to-face and lap games with infants. For some children receiving Early Intervention or Early Childhood Special Education services through their local school district, UMCDC may still be an appropriate environment for them to learn and grow. For some children, a different type of setting will be a better fit to meet their needs. Either way, that is a decision that we will talk about together.

INFANT PROGRAM

UMCDC is a child development center providing care for healthy infants, ages 3 months to 16 months. In this period we encourage and staff the bungalow so that infants are with the same teaching staff for sixteen months. Children in the infant area follow a schedule that is individualized with routines. Routines are the curriculum in infancy (feeding, diapering, napping/waking). Babies are attaching and developing relationships through responsive, respectful, reciprocal (“serve and return”) interactions and caregiving routines. In routines and interactions infants learn they are cared for and the world is a good place to be. From routines and interactions they learn to anticipate, predict, communicate (using words, self- and parallel talk, and 20+ ASL signs. Ask for our list.) and become attached to caregivers. Routines, developmental needs, indicators of progress, and the schedule are discussed between parent(s), the Area Coordinator and teaching staff. Routines, materials and the infant environment are modified over time as your baby and the babies in the group develop. We ask parents for their child’s preferences e.g. what and how they calm, feed, say “goodbye,” and go to sleep. Teaching staff use and communicate their knowledge of infant development and their experience with infants in group care. We ask for your parental input and observations. We believe this “partnership of caring” communication of what we see and your observations make for the best quality of care. For example: sharing “I think he/she is cutting teeth” or “he/she didn’t sleep well last night and awakened several times.”

The UMCDC infant ratio is one to three, a high standard exceeding MN Department of Human Services-Licensing ratios. However, UMCDC is group care, not nanny care, nor with the capacity to operate beyond a “well-baby center.” Days can be overly long for infants and cause over-stimulation and fatigue. It is recommended that babies be in care no longer than 6 to 8 hours. Nine and ten hour days are over-tiring and leave babies exhausted, overstimulated, and stressed. Your baby needs you. Please accommodate their need to be with you and spending time interacting with you in your home with games, language, and outings.

TODDLER/TWOS PROGRAM

The UMCDC toddler program is from 16 to 33 months (as per MN DHS, Department of Human Services-Licensing). UMCDC is a well-child development center; we do not have a nurse on staff. We do a health and safety check when you arrive to be sure that your toddler can fully participate in the planned program day, is free of illness, symptoms of illness, or a fever. We want to keep our teaching staff and your children healthy. We ask that you keep your child(ren) at home when they are not well. Each day, in toddlers, you will be e-mailed a, “daily journal” from your classroom teaching staff so you know about the program day. We encourage that toddlers are kept together with the same teaching staff for nine months or longer.

Arrival: We ask that you please have your child routinely arrive by 9:30 to participate in our developmental program. If desired by parents, toddlers may eat breakfast at UMCDC if they arrive in their classroom by 9:00am. At mealtimes and snack toddlers sit at small sized tables and chairs and eat Family Style. As children finish their meals or snacks, they exercise independent self-help skills, such as removing their bibs, bussing their own dishes, and remembering the routine.

Toddlers are in a stage of “identity formation.” We want them to feel a growing sense of competence and mastery to develop their self-esteem and self-confidence. A big development in this age is an interest in toilet
learning and a developing capacity to hold their bladder. Like walking and talking, this occurs in a range of
time. We do not use the term or the practice of “toilet training,” rather we look for signs of readiness.
Parents and teachers work together as a team, so there is consonance from us to you and vice-versa. After
breakfast they go into the bathroom where they may be diapered or participate in toilet learning, such as
getting their pants down, have toilet tries, etc. After toileting, the children move to a classroom space to
engage with their peers in small group activities with a teacher.

In the classroom, small group multi-sensory, motor or other activities are offered. Materials such as: paint,
clay, sand, paper, water and cooking are examples. We provide opportunities to explore the senses, music
and movement, tools and motor activities. Typically, we involve the children in processes such as cooking.
Toddlers next may move to the multi-purpose or flex room, or they may transition to the outdoor Toddler Play
Yard, weather permitting.

Activities on the Toddler Play Yard are planned by the teaching staff for the children to engage in teacher
directed or child lead exploration and motor activities. Examples might be for development of gross motor,
vestibular (balance, rockers, balance beam, see-saw, the rock bed), bi-lateral (trikes) or proprioception i.e.
how I and things fit in space (tunnels). Other offerings may be in the area of nature and science exploration
which provides a multitude of sensory experiences.

As outside time ends, children transition into the classroom environment in small groups. In preparation for
lunch time children independently wash their hands and transition to the table. Toddlers’ lunch is, like
breakfast, served Family Style. Children learn skills, such as to pour (which they first learn by using sand or
water in classroom activities); older toddlers pour at the table. Children learn to eat independently, starting in
younger toddlers. They try new foods, stay at the table, drink from an open cup, take off their bibs, and bus
their dishes when finished. Positive interactions and conversations are an important part of the mealtime
social experience, as is the nourishment provided by the food cooked here at UMCDC. See our website video
to see more about our food program.

After lunch, toddlers play quietly and prepare for nap. Children are invited for a calming story and/or finger
plays before nap time. Toddlers sleep on low, toddler sized cots. Soft music is played and teachers assist
toddlers in calming and being comfortable. When toddlers wake up from their nap they’re invited to a quiet
space with teaching staff. Once all toddlers are awake, they transition to snack time. After snack, children
are encouraged to participate in small group activities directed by the teacher or children explore their
environment according to their interests. Diapering/Toileting takes place as needed, every 2 hours, and upon
waking up. A teacher-directed activity is planned indoors or outdoors (sensory play, music, movement, art or
motor). Children are encouraged to explore the natural environment of the play yard on their own and/or
with scaffolding activities by teaching staff. Children are picked up from either the play yard, weather
permitting, or from the classroom.

Toddlers & Length of Day: It is a long day for your toddler if you leave them in care for all the hours UMCDC is
open. Kindergarten is a far shorter day! Toddlers need your interactions and relationship- that is to be with
you in your home environment. Group care can be over-stimulating and tiring when it exceeds 6 hours per day
at this young of an age. Please ensure your child’s in care does not exceed 6-8 hours.

Closing: We suggest you arrive at 5:10 as All children and families must be out of the building and off the
play yards by 5:30 p.m.
PRESCHOOL PROGRAM

*Pre-school is designated by MN DHS from 33 months to 5 yrs. old.* Like the younger age groups at UMCDC, a developmental assessment is completed within a child’s first 60 days after which we meet with you for a conference to share our observations and hear yours. To attend, your child must be in good health and able to fully participate in activities of the day. We do a daily health check to keep our staff healthy and to stop the spread of communicable concerns to other children. As previously described, *UMCDC is not a special education early development program.* Your local school district, or your service provider, can provide assessment and suggest options based on your child’s needs. If your child has or is having formal assessments and/or receiving services through and IFSP, Individualized Family Service Plan (to 3 years) or an IEP, Individualized Education Plan we work with you and the school district to decide if UMCDC is a good placement for your child with the needed supports made by the school district. Early intervention before age 3 is preferable, and the right program is key to school readiness and success.

Now your child is in pre-school! We’re here to care for your child by facilitating and assisting your child’s development. Parents and teachers work together to make the daily transition from home to the Center comfortable for the child. Older and Younger preschool groups eat breakfast in their classrooms; food is prepared on site. We offer an omnivorous or a vegetarian menu. Children sit at preschool sized tables and are served Family Style. This enhances a sense of belonging and conversation. Breakfast is offered to children who arrive by 9:00 am. Older preschool children pick out a cloth napkin, pour their beverage, pass serving bowls, and serve themselves a portion on ceramic dishes. As children finish their meal, they bus their dishes and go into the bathroom for a toilet try. From there preschoolers will read, journal, play, and talk with other children until all have finished eating. They usually then all join together for a group time.

In the morning, Preschoolers have a large group gathering, where we welcome each other, discuss curricular topics, revisit documentation, and plan for the day (known as “Plan, Do and Review”). This represents an important step towards getting your child ready for kindergarten. During large and small group gatherings, children are learning to regulate, focus energy and attention, to experience meaningful “give and take” (reciprocal conversation), to participate in structured learning while surrounded by their preschool friends. Preschoolers then transition into free play in the classroom, foyer, or play castle; or engage in small group activities with their teacher. Children are given the opportunity to engage in self-directed free play or small group activities. Children are offered focused explorations, materials, science, mathematics, writing, nature, and other subjects. There are opportunities for a teacher-led activity such as introducing and using artist tools, science experiments, cooking or other project work over time.

Preschoolers use the play yard when weather permits. There is a mix of free play and activities on the Play Yard are planned by Preschool Staff for the children to engage in teacher-directed or child-lead activities, such as gross motor, vestibular, proprioception, science and nature exploration; including such possibilities as cross country skis in winter, water play in summer, etc. UMCDC also offers outside time in the form of neighborhood walks and trips to the nearby park. After this we return to the building for toileting, to wash hands, and eat.

Preschool classrooms eat in two groups to help organize the transition. Preschool’s lunch is served Family Style with positive social interactions and conversations occurring between children and teaching staff. This is an important part of the mealtime process as is the nourishment provided by the food. The older preschool children select a cloth napkin, use ceramic plates, pour their milk, pass bowls and serve themselves. Following their meal, they bus their dishes, have bathroom tries, wash hands, and brush their teeth. Dental hygiene is a
part of our preschool program. They then go to listen to stories in the foyer, and transition to relaxing and going to nap.

While napping, Preschoolers sleep on low, preschool-sized cots placed throughout the room. Soft music is played. Staff aid children in getting comfortable and relaxing. If children are unable to fall asleep after 30 minutes, they will go to the foyer for quiet activities.

As preschoolers wake up from their nap they’re invited to a quiet space with teaching staff, each child will have a bathroom try, and wash their hands before heading to snack. As children finish snack, they will bus their dishes, wash their hands and join the group. After everyone is finished with snack, teachers conduct a brief afternoon check in, including the review “Plan, Do and Review.” Preschoolers then choose from areas of the room including dramatic play and the block area. Children might also split into smaller groups for activities directed by the teacher or they may explore the classroom environment according to their interests. If the weather allows the preschoolers usually go out to the play yard again.

At the end of the day children are picked up from either the play yard, Multi-Purpose Room, classroom or Foyer.

FIELD TRIPS AND TRANSPORTATION

Field trips and supervised walks 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 and other neighborhood locations. Favorite trips for older children include the Dodge Nature Center, 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.

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.

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.

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 with nothing in the crib as required by law.

DIAPERING

Parents provide diapers, wipes, diaper cream, and multiple changes of clothes. Diapers: Disposable diapers will be used regularly and are 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 you wish to use cloth diapers in the infant area this we
ask that you discuss this first with the Infant Area Coordinator. You will need to bring in your cloth diapers. Wipes and your kit.

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

TOILET LEARNING

UMCDC staff and parents should plan to 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. We do not use the term “toilet training.”

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 be provided and 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.

SHOES: 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, wipes, 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 and are not to be brought.

Security items such as a blanket or “lovey” that comforts your child are welcome and to be kept in cubbies until nap time. Blankets, toys and “loveys” are not allowed in infant cribs as per MN DHS law.
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:

- 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 social media, 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)
- Foods brought to snack on or place in cubbies

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 joining birthday celebrations.

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, Planting Day, Book Week, Festival of Learning, & the Harvest Festival.

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. **You may not put such photos on social media, blogs, websites, etc.,** that you have taken at UMCDC.

**MOVEMENT/TRANSITION TO OLDER GROUPS**

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.

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.

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.

**Assessment Plan at UMCDC**

To comply with MN DHs-Licensing – Rule 3 and NAEYC Accreditation Standard 4 as follows: 4A.1; 4A.2, 4C.3, 4E.2, 4E.3, 4E.4 + 4E.5

**How Are Children Assessed, by whom, and familiarity with adults involved?** The teaching staff use a variety of means to assess development. Among those used are “work samples” of the children in groups or individually. To document we use photos, checklists, anecdotal notes, observations, videos, children’s direct quotes, documentation panels, and a developmental profile. The assessment developmental profile tool is, “Desired Results.” “Desired Results” was developed by West ED/PITC (program for infant & toddler Caregivers) and the California Department of Education/Child Development Division. **We do assessment naturally, that is children are never put in a “testing” situation, nor is done by outsiders, rather by your own child’s teaching staff.** We ask you to give input prior to and in conferences, formally and informally, via conversations, the parent input form, or by your sending written e mails or other communication. By “naturalistic” we mean that the aforementioned ways to assess and the DRDP tool are done while the children are in their natural setting. Note: Assessment binders are confidential and never leave the Center; you can ask to review your child’s DRDP at anytime, or stay after your conference(s) to review your child’s DRDP. When you are finished reading the DRDP please return to the front desk. NAEYC: 4A.1, 4C.3
Where to Review the tool, DRDP, Desired Results Developmental Profile?

An unmarked copy of the assessment tool, “Desired Results” is in each classroom. A copy of your child’s developmental profile, Desired Results, is in their individual binder in the Bungalow area coordinator and teaching staff office which you can ask to by requesting from the Area Coordinator or the teaching staff in that area.

ASSESSMENT TRAINING FOR TEACHING STAFF, AREA COORDINATORS & ADMINISTRATION is done in the initial orientation period and/or reviewed on staff development days. The classroom teacher is responsible to mark a child’s assessment, known as the Desired Results Developmental Profile. The teacher rates the child on the range after deliberation, taking and reviewing the photos, gathering work samples, taking quote(s), anecdotal note(s). Teaching staff are trained in best practices such as: gathering at least two pieces of evidence for a measure to rate and to do so in a naturalistic setting. We encourage you and ask you, “please give input to the assessment process i.e. to share in writing, on the parent input form, or in a verbal conversation”. The assistant teachers and the area coordinators support the classroom teacher by assisting in observing, taking photos, documenting, taking anecdotal notes, and gathering information.

WHO HAS ACCESS & CONFIDENTIALITY

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. Your child’s records regarding assessment on the DRDP assessment is confidential and is accessible only to the teaching staff, area coordinator, and administration. 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. Any other circumstances would require your consent in writing e.g. for example in the case of a school district.

We know, as do you, that children develop unevenly, usually within a range. Some children walk at 10 months, others at 14 months, some children’s toilet learning is early, others is later, the same with talking and other skills. It is better not to 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. Every child is an individual.

PARENT INPUT & FREQUENCY OF ASSESSMENT (NAEYC 4E.2, 4E.3); (MN DHS Licensing 9503.0090). Parent conferences and daily reports. The license holder must ensure that the parent of a child be informed of the child's progress. The license holder must ensure that: A: individual parent conferences are offered and scheduled by the teaching staff or Area Coordinator at least twice a year.

As you know we daily share information with you, and you give us information formally or informally as well. You are always welcome to request a meeting to discuss any joys, strengths, or concerns that you have about your child. We invite you to share your observations from your child’s time with you, to contribute to our understanding of your child and to inform the assessment process. These can be verbal, in writing, a photo, quotes or narrative of a visit, travel, or another experience(s) with your family. We may ask you to come in to observe your child to further contribute your viewpoint or to see ours. When we work as partners, communicating and sharing, we feel we will be able to do the best for your child and to have consonance, continuity for your child from home to school and school to home.
We use the “Desired Results” assessment tool and hold conferences with you twice annually as per regulatory standard. The first assessment is within 60 days of enrollment and the first conference is within 90 days. If your child is not a new we follow the State and NAEYC Accreditation guidelines to complete assessments and conferences two times annually. We have an input form that we ask you to fill out prior to conferences and to return a few days before the conference so that the teaching staff can read and reflect on it to address any concerns or strengths and to build on in the conference. Conference input, information you share with the teacher and/or area coordinator is incorporated in planning future learning opportunities and adjusting teaching strategies.

**PURPOSE OF ASSESSMENT & HOW IT IS USED**
Teachers assess your child individually and how they work with other children in groups. Your child’s teaching staff and area coordinator gather information to use for assessment purposes. We ask ourselves, “What can an individual child do with assistance or independently?” Teachers, also, look at the group profile as a whole. Teachers use assessments to inform and plan curriculum, their teaching strategies, the environment and practices and to plan, decide on implementation of activities, modalities, and materials for the emerging curriculum. Teachers meet at least weekly to align curriculum for their classroom and review with their area coordinator. After they observe and have gathered the information they may refine/modify the curriculum and/or their teaching strategies/methods, interactions and scaffolding plan(s). Teachers develop and monitor short and long-range plans for each child and the group based on goals and children’s knowledge, needs, skills, interests, and other factors. A further purpose of assessment is to inform planning for overall program improvements e.g. in regard to professional development for assessment training, orientation, strategies. We are a wonderfully diverse community at UMCDC and the University. PP 4A.2

When indicated, the results of a child assessment may lead to a referral for diagnostic assessment. Please see the section of the Parent Handbook on Resource and Referral. It is important, as research has shown, that early intervention is a key to success. A diagnostic assessment may give further tools to your child’s teaching staff, thus adding greater opportunity(ies) for success.

**CULTURAL SENSITIVITY AND LANGUAGE**
If at any time you would like to discuss matters or to give us input related to your child, family and your culture, our practices, curriculum or input to assessment with regard to diversity and 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 a concern, translation or interpretation, or if you feel you can assist us in greater understanding.

**CHILDREN DEVELOP AT VARYING RATES.** Some children walk at 10 months, others at 14 months, some children’s toilet learning is early, others is later, the same with talking and other skills. It is best to not compare your child with another. Your child’s development may be in a range but 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.

UMCDC may call in a school district service because of a concern to observe for purposes of diagnosis. See **RESOURCE AND REFERRAL** section below for further details.
UMCDC’S RESOURCE AND REFERRAL PROCESS FOR CONCERNS

The order of steps may vary

1. UMCDC teaching staff communicates with parents regarding the concern(s) or behavior(s) when observed, documented by notes, photos, videos or charts.

2. UMCDC teaching staff observe and document children’s skills and behavior(s) at the onset of a concern about developmental progress, health and/or safety issues.

3. Teaching Staff Support
   a. UMCDC teaching staff will request that the Area Coordinator and/or Education Coordinator and/or Director conduct at least 2 or 3 observations of the skills or behavior(s) of concern that have been observed and documented in anecdotal notes, photos, or video clips.
   b. We may video or ask that you come to watch your child two or three times to observe his/her actions or interactions in routines, in motor, cognitive activities or social/emotional behaviors such as self-regulation (for a period of 1 to 2 hours).

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

5. UMCDC teaching staff, the Area Coordinator, and/or the Education Coordinator and/or Director will meet with parents to discuss the observations and, in partnership with the parents, create an Individual Child Care Plan (ICCP). Parents are expected to sign the ICCP within 30 days to support shared expectations and implementation of supports appropriate to addressing the child’s needs.

6. When children are not making developmental progress or digressing, we want to help and work together to enlist your help as well.

7. Resources: Help Me Grow is an important resource for parents and care providers. UMCDC may ask parents to contact Help Me Grow or UMCDC may contact Help Me Grow directly. See Behavioral/Developmental Leave of Absence Policy (in your enrollment packet). If it is indicated that additional, professional observation is necessary, UMCDC teaching staff will notify or 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 60 to 90 days of our meeting to ensure the best care for your child. If UMCDC staff indicate that contact with Help Me Grow to make a referral is necessary, if a parent chooses not to make contact or would like assistance in making contact, UMCDC may make a referral directly to Help Me Grow. We need these tools to assist your child; early assessment and intervention is best before 3 years of age because research shows that early intervention is most effective.
   b. Your local school districts (the school district where you live) is your “service provider”
   c. Washburn Child Guidance Clinic (observations and consultation free of charge)
   d. Participation in a day treatment program (is charged to parents)
   e. Fraser Child and Family Services (observations and consultation free of charge)
   f. Life Track Resources (initial observations free of charge- use of program resources is billed to parents’ insurance.)

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. **UMCDC is NOT a “service provider.”**

10. In the event that the UMCDC teaching staff, parents, and intervention staff cannot come to agreement about the outside professional observation, assessment, and ICCP being offered to the child and
family, enrollment may end at UMCDC. We need your assistance to get the tools needed to intervene early and to best help your child’s development.

11. When a child’s developmental needs or behavior result in either of the following situations, the Education Coordinator and Director will meet with the child’s family and teaching staff to set a date for termination of our child care services:
   a. The child’s behavior poses a threat to the physical and/or 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, and/or
   b. If after several attempts at intervening with any specific skill or behavior, such as a health or safety concern or developmental delay, UMCDC may decide the child’s needs may not match enrollment at UMCDC.
   c. Further, if teaching staff is frequently having to meet the needs of an 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. This indicates that UMCDC is no longer the most appropriate environment for that child.

Our goal is to help your child get the assessment, intervention and care that is developmentally appropriate for his/her needs, if possible before the age of three. Early intervention is always best because it has better outcomes and gives more time for your child to be school-ready.
RESOURCE & REFERRAL PROCESS

ALL external observation and assessments require parental consent. However, contacting Help Me Grow to invite additional support for a child does not.

- ECE Screening—Find locations for free screening at www.mnparentsknown.info or 651-582-8412
- Center for Inclusive Child Care—www.inclusivechildcare.org or 651-603-6265

Our guidance and discipline policy goal and our practices are to limit or eliminate the use of suspension, expulsion, and other exclusionary measures. NAEYC Accreditation 1E.1
HEALTH, SAFETY and EMERGENCY POLICIES

TIMES/HOURS, LIMITS, AND CLOSURE OF UMCDC

UMCDC is open Monday through Friday, 52 weeks per year with closures on University holidays and eight to ten days a year for staff professional development. A calendar of days closed is provided upon enrollment and is updated annually. 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. During emergency weather conditions, UMCDC will remain open unless the entire University closes. In the 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.” For more information, see the University’s policy on Campus and Building Closings at http://www.policy.umn.edu/.

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 must be out of the building by 5:30 p.m.** The time before and after UMCDC hours are meant for the teaching staff to prepare the environment and to complete safety checks of the classrooms and play yards. UMCDC is licensed and meets the Minnesota Department of Human Services (MN DHS) for 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 at 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 Bungalow. Parents are required to accompany their children into and out of the building at all times.

ARRIVAL AND DEPARTURE

*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.*

ARRIVAL

On arrival, parents and children must wash hands (per NAEYC Accreditation Standards). **Parents must sign in their child each morning on arrival.** This is mandated by the Minnesota Department of Human Services statute. Signing in the child represents the transfer of 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’s current activity (including field trips). UMCDC staff will assist parents with a smooth transition (for psycho-social development).

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.**
Young children are exhausted and overstimulated when left for long hours in care. Kindergarten and elementary school is shorter than UMCDC’s hours of operation. Please strive to assist your child’s development and their relationship with you by dropping your child off later or picking up earlier so that their day does not exceed 8.5 hours. **Parents should be in the building by 5:10 p.m. to pick-up, dress, and sign out your child** to ensure all are out of the building by 5:30 p.m., when the building is closed and locked.

**DEPARTURE**

At departure, parents and children must wash hands as per NAEYC standards. **Parents must sign out the child and let the teaching staff know he or she is leaving UMCDC (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 front doors.** Parents are expected to enforce this rule/boundary for the safety of the child.

**Late Pick-up:** The building closes at 5:30 p.m.; you should no longer be in the building. If you will be late, 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. (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.

**ALTERNATIVE PICK UP AUTHORIZATION POLICY**

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, their identity will be verified with an official government photo ID, e.g. Driver’s License, Passport, etc. if UMCDC staff has never met the authorized alternate for pick-up.**
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 5:10 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. You must be out of the building.

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. 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 uninterrupted 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 circled name indicates to the parent that they are late and will receive a late pick-up fee. The parent or authorized adult is required to initial the sign-in sheet when he or she arrives. The teacher will enter the time of pick-up. 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.

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.

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 (per child).
2. Second infraction per semester – $45.00 (per child) plus warning of termination due to chronic lateness.

3. Third infraction per semester – $50.00 (per child) plus a notice of termination due to lateness will be given (see GRIEVANCE PROCEDURES).

The situation of three late pick-up infractions 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.

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, and a health and Welfare Hold is signed on your child.

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

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 within 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 & SAFETY FILES/RECORD INFORMATION**
The content of each child’s health and safety files/records is confidential but is immediately available upon request to:

⇒ The program administrators and teaching staff who have a consent form filled out and signed (at the enrollment) by the parent(s) or legal guardian(s).
⇒ The child’s parents or legal guardians
⇒ Regulatory authorities

Two health record forms must be completed: 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 $50.00 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 $55.00 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 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 POLICIES

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 Requirements</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 (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. Child may return when symptoms are gone for 24 hours and no fever reducing medication has been given.</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 or nits 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 fully participate in child development program activities, in the classroom or outdoors, 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.
CARE OF ILL OR INJURED CHILDREN

– UMCDC is licensed for “well care”

If your child is no longer able to fully participate in the daily program activities due to illness or injury, you or your designated alternate must pick up your child within an hour of being notified. 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. Play Yard 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. Parents are required to initial the report. 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 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.

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.

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 DHS- licensing requires all teaching staff in the facility to have this training and certification current and renewed every two years.
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 the procedures, and annually review the procedures.

HEALTH CONSULTATION SERVICES
Our program is contracted with MN Child Care Health Consultants and receives monthly health consultation service as required by law.

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’s emergency preparedness plan is provided to all families upon enrollment.

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.**

**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 and road conditions. 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.
ENVIRONMENTAL SAFETY POLICIES

SOIL QUALITY
The U of M office of Environmental Health and Safety has conducted comprehensive testing of the air and 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.

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.

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.

SUNSCREEN
UMCDC applies sunscreen April 1st through October 1st. Parents must sign a sunscreen permission form for UMCDC staff to apply sunscreen. UMCDC will provide and use Rocky Mountain Sunscreen for Kids SPF 30; parents can bring in their own sunscreen, if preferred. Infant staff will apply sunscreen before each time going outside. It is asked that parents of toddlers and preschoolers apply sunscreen upon arrival. Toddler and Preschool staff will re-apply sunscreen before going outside in the afternoon. When applying sunscreen, UMCDC staff will either wear gloves and change gloves between children, or wash their hands between each application of sunscreen.

FEES AND PAYMENT

INCOME REPORTING/SLIDING FEE SCALE
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 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.

Billing is done by CEHD FSO/Financial Services Office.

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 emailed to the University email address. Please alert the Billing Specialist, or UMCDC Staff, of any changes in address.

LATE CHARGE
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

Uncollected payments are referred to the University’s business office for 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 or plan, you must discuss this matter with the Billing Specialist or the Enrollment Coordinator immediately. 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 UMCDC 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. **Failure to submit the state-required medical and emergency information will result in termination of UMCDC child care services.**

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 (including the end of the day and in an emergency situation): 1) First infraction – $35, 2) Second infraction – $45, or 3) Third infraction – $55. 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. Corrections must be made before drop off the following day.
   b. 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).
   c. 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 one 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).
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.

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 social habits around eating, 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 in community.

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 and refinement of motor skills.

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. Refrigeration for dairy products and perishable foods is provided at a temperature of 40 degrees Fahrenheit or less. Equipment complies with the requirements for food and beverage establishments and is inspected at least annually by the University of Minnesota Environmental Health department.

Four-week cycle menus are posted monthly on the Nutrition Board on the Infant Lane Bulletin Board. Both vegetarian and non-vegetarian menus are posted 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 within the 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 UMCDC program needs to transition.

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

**INFANT FOOD PROGRAM**

Currently, formula and bottles are provided by UMCDC unless special formula is required.

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 provide a 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.

**PORTIONS SERVED AT UMCDC as per MINNESOTA DEPARTMENT OF EDUCATION**

<table>
<thead>
<tr>
<th></th>
<th>Ages 1-2</th>
<th>3-5</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BREAKFAST</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fluid Milk</td>
<td>½ cup</td>
<td>¾ cup</td>
</tr>
<tr>
<td>Juice or fruit or vegetable</td>
<td>¼ cup</td>
<td>½ cup</td>
</tr>
<tr>
<td><strong>Grains/Breads</strong></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>¾ 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>
<tr>
<td><strong>LUNCH</strong></td>
<td></td>
<td></td>
</tr>
<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>¾ ounce</td>
<td>¾ ounce</td>
</tr>
<tr>
<td>or yogurt, plain or flavored, unsweetened or sweetened</td>
<td>½ cup</td>
<td>¾ 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><strong>Vegetables and/or fruits</strong> (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><strong>Grains/Breads</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SNACK (Select two of the following components)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fluid Milk</td>
<td>½ cup</td>
<td>½ cup</td>
</tr>
<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>½ ounce</td>
</tr>
<tr>
<td>Grains/Breads</td>
<td>½ slice</td>
<td>½ slice</td>
</tr>
</tbody>
</table>
UMCDC CENTER EVENTS

Peace Week: (December/January)
During Peace Week we celebrate peace, kindness and unity through our cultural diversities! Throughout the week the children will be directly focusing on peace, kindness and cultural diversity in their classrooms. UMCDC community comes together to see the children’s luminaries, catch up with other center families and share aspects of your culture in the classroom and with others. A light snack and warm apple cider is provided.

Kindness Week: (February)
During Kindness Week our goal is to reach out to the community to show humanity and compassion in ways we are capable of. One of these ways is to support local facilities which also show kindness towards others. At the center we also display acts of kindness they may witness, cause and or receive during this special week. In addition, we are rich in diversity and ask that our UMCDC community share special acts of kindness we use with the children via photos, short statements or showing demonstrations in our classrooms with a story from their culture.

NAEYC’s - Week of the Young Child: (April)
Week of the Young Child (WOYC) is an annual celebration sponsored by the National Association for the Education of Young Children (NAEYC). The purpose of the WOYC is to focus on young children and their families, and to recognize the early childhood programs and staff that provide quality care and education.

Planting Week/Garden Tour: (May/June)
We offer a Planting Day in the Spring with a Garden Tour. As a part of the STEM education program we offer science/nature activities and curriculum beginning in March about plants, seeds and soil, such as comparing and contrasting them, talking about simple plant parts; then the children plant, hypothesize, observe, draw and visit and revisit the sequence, changes over time, take photos and make drawings.

Book Week: (October)
Is a time when we invite parents to come to read, share a favorite book or story from home or one from their cultural heritage. UMCDC is richly diverse and this event gives an opportunity to share our richness and diversity. In addition, we offer panoply of books exhibited that week by a small independent bookseller for your perusal or purchase. Usually, this week coincides with the CEHD book week in October.
UNIVERSITY OF MINNESOTA CHILD DEVELOPMENT CENTER

Fiscal 2019-2020

DAYS CLOSED

Thursday, June 27, 2019 Staff Development Day
Friday, June 28, 2019 Staff Development Day
Thursday, July 4, 2019 Independence Day

Last Day for Children Transitioning to Kindergarten Friday, August 9, 2019

Monday, September 2, 2019 Labor Day

Thursday, October 17, 2019 Staff Development Day
Friday, October 18, 2019 Staff Development Day
Thursday, November 28, 2019 Thanksgiving
Friday, November 29, 2019 Floating Holiday
Monday, December 23, 2019 Floating Holiday
Tuesday, December 24, 2019 Floating Holiday
Wednesday, December 25, 2019 Christmas Day
Wednesday, January 1, 2020 New Year's Day

Thursday, January 9, 2020 Staff Development Day
Friday, January 10, 2020 Staff Development Day
Monday, January 20, 2020 Martin Luther King Day

Thursday, April 16, 2020 Staff Development Day
Friday, April 17, 2020 Staff Development Day
Monday, May 25, 2020 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.
UNIVERSITY OF MINNESOTA CHILD DEVELOPMENT CENTER

Fiscal 2020-2021

DAYS CLOSED

Thursday, June 25, 2020 Staff Development Day

Friday, June 26, 2020 Staff Development Day

Friday, July 3, 2020 Independence Day Observed

Last Day for Children Transitioning to Kindergarten Friday, August 21, 2020

Monday, September 7, 2020 Labor Day

Thursday, October 15, 2020 Staff Development Day

Friday, October 16, 2020 Staff Development Day

Thursday, November 26, 2020 Thanksgiving

Friday, November 27, 2020 Floating Holiday

Thursday, December 24, 2020 Floating Holiday

Friday, December 25, 2020 Christmas Day

Thursday, December 31, 2020 Floating Holiday

Friday, January 1, 2021 New Year’s Day

Thursday, January 7, 2021 Staff Development Day

Friday, January 8, 2021 Staff Development Day

Monday, January 18, 2021 Martin Luther King Day

Thursday, April 15, 2021 Staff Development Day

Friday, April 16, 2021 Staff Development Day

Monday, May 31, 2021 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.