

HANDBOOK

ST. JOHN'S CHILD CARE CENTER

ST. JOHN'S LUTHERAN CHURCH
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PHILOSOPHY

For over half of a century, St. John's Lutheran Church has been serving the educational and child care needs of our community through St. John's Child Care Center and Preschool Programs. We provide a stable, comfortable and safe environment with positive experiences to enhance each child's self-image and confidence level.

Through activities, children will be given opportunities to promote social interaction, emotional growth, literacy, language and cognitive skills. We also encourage activities to promote the development of large and small muscle skills. Individual creative abilities are supported and preschool readiness skills are provided as needed.

In our caring and accepting atmosphere, children develop a sense of trust and security. Here, children can explore new materials, as well as, their own feelings in acceptable and socially appropriate ways.

We teach children about people of other cultures, customs and religions, as well as emphasizing their own backgrounds. While religion is not taught, the setting is a Christian Church and Christian holidays and symbols will be recognized.

The staff of St. John's Child Care Center and Preschool Program is committed to the continuing development of a creative curriculum and does not permit discrimination because of race, color, sex, age, disability or national origin. Input from parents is always encouraged and welcomed.

LICENSING

Standards comply with, and the program is licensed by, the Minnesota Department of Human Services (DHS). The conditions of our license are as follows: capacity of 102 children at one time; toddler, (not to exceed 14 toddler-age) preschool and school-age (not to exceed 43 school- age); 6:30 a.m. to 6:00 p.m., Monday through Friday, year round. A current license is issued annually. The general telephone number for licensing is: (651) 431-6500.

ACCREDITATION

We have voluntarily undergone a comprehensive process of internal self-study and invited external professional review to verify compliance with set criteria for high quality early childhood programs by the National Academy of Early Childhood Programs. Our program was found to be in substantial compliance with their set criteria. We have been accredited since 1992.

A copy of the criteria can be obtained from the Academy (1-800-424-2460). The Academy is a division of the National Association for the Education of Young Children, the nation's largest organization of early childhood educators.

HEALTH DEPARTMENT

The MN Child Care Health Consultants, Inc. is our health consultant. They annually review our health and safety policies and procedures. Their telephone number is (612)500-1880.

STAFF

St. John's Child Care Center's staff consists of: a Director, an Assistant Director, Teachers, Assistant Teachers, and Aides. All staff members meet the DHS licensing standards.

HOURS AND FEES

CHILD CARE HOURS	<p>Year-round</p> <p>Monday through Friday</p> <p>6:30 a.m. to 6:00 p.m.</p>
PRE-SCHOOL HOURS	<p>September through May:</p> <p>9:00-11:30 a.m.</p> <p>Monday through Friday</p> <p>(2 or 3 day programs)</p> <p>June through August:</p> <p>9:00-11:30 a.m.</p> <p>Tuesday, Wednesday, Thursday</p> <p>(3 day program)</p>
SCHOOL-AGE CARE:	<p>Year-round</p> <p>Monday through Friday</p> <p>6:30 a.m. to 6:00 p.m.</p> <p>~ Care provided before and after school.</p> <p>~ Full day care provided on school release days, break weeks and during summer.</p>

Children enrolled in our preschool-age child care program will participate in the morning preschool classes (9:00-11:30 a.m.). A school calendar informing families of vacations, release days, special events and holiday closings is given out at the Annual Parent Meeting in August and included in the September Newsletter. Extra copies are available in the child care office.

CURRICULUM

One of our most important goals here at St. John's is that each child individually develops a good self-image. The staff designs the curriculum to meet the social, emotional, intellectual, cultural and physical needs of the child, as an individual and as a group member. Curriculum changes are determined by results of both formal and informal assessment of children in our care.

Unit themes are discussed in each of our monthly newsletters. Discussions, activities, songs, finger plays, and art projects will center on the themes. All of the groups will study the same themes; however, many activities will differ between the groups. Naturally, the older groups will have more in-depth discussions and readiness activities, while the younger groups will participate in more hands-on activities. Language and literacy development is an important part of every planned activity and is also fostered by our stimulating environment. Parents are encouraged to participate in curriculum development by contributing theme related books, pictures, CD's/tapes and activity ideas for use in the classrooms. Input regarding the selection of weekly themes will also be welcome. Parent views on our program plan are encouraged. A copy of the program plan is always included in the September Newsletter and upon request.

Parent questionnaires are distributed, at a minimum, once per year. These surveys gather information regarding program areas, policies, quality, children's progress, family satisfaction, etc. A report of the findings will be shared with advisory personnel, as well as enrolled families. Improvements are made and concerns are answered based on collected survey information. We continually strive to improve our operations, policies and developmentally appropriate practices for our families. Many of these program decisions are based from annual program evaluations.

DAILY SCHEDULE

Toddler

The following is an example of a "typical" day at St. John's for our toddlers:

6:30-8:00 a.m.	Arrival and Choice Time Activities (puzzles, books, manipulatives, etc.)
7:30-8:25 a.m.	Breakfast and Clean-up
8:30-9:00 a.m.	Diapering/Toileting
9:00-9:15 a.m.	Transition to Large Muscle Time (gym or playground)
9:15-9:45 a.m.	Large Muscle Time
9:45-9:50 a.m.	Transition to Classroom
9:50-10:00 a.m.	Group Time (welcome, attendance, story, finger plays, etc.)
10:00-10:15 a.m.	Hand washing/Snack Time
10:15-10:30 a.m.	Project/Activity
10:30-11:15 a.m.	Diapering/Toileting and Choice Time
11:15-11:30 a.m.	Clean-up for Lunch/Hand washing
11:30 a.m.-noon	Lunch
Noon -12:30 p.m.	Nap Preparation and Tooth brushing
12:30-2:45 p.m.	Nap Time

? -3:00 p.m.	Awake Kids-Quiet Activities
2:45-3:00 p.m.	Diapering/Toileting/Hand washing
3:00-3:15 p.m.	Snack Time
3:15-3:45 p.m.	Project/Activity/Choice Time
3:45-4:15 p.m.	Large Muscle Time
4:15-6:00 p.m.	Stories, Finger plays, Music, Choice Time, Quiet Play, diapering as needed
6:00 p.m.	Goodbye, see you tomorrow!

Listed below are some of the activities your toddler will be involved in during their day with us:

Arts & Crafts	Outdoor Walks
Finger plays	Field Trips
Creative Dramatics	Choice Time (social time)
Sharing Time	Book Time
Storytelling	Gym Games/Activities
Science Exploration	Drawing/Coloring/Cutting
Small Group Discussions	Music (sound, rhythm, songs)
Large Group Discussions	Reading/Listening to Stories

Toddler aged children are monitored by sight and sound of a staff member, during all activities throughout their day at St. John's Child Care Center. Transitions are minimized and appropriate staff-child ratios are maintained at all times.

Please check the parent sign-in area for information regarding special events. For example: field trip sign-up sheets, family dinners and events, parent education, fundraisers, conference sign-up sheets, etc. Your signature and/or a small fee may be necessary in order for you and/or your child to participate.

Preschool

The following is an example of a "typical" day at St. John's, for our preschoolers:

6:30-9:00 a.m.	Arrival (wash hands, manipulatives, blocks, puzzles, books, etc.)
7:40-8:25 a.m.	Breakfast
8:25-9:00 a.m.	Large Muscle Time or Choice Time
9:00-9:20 a.m.	Group Time (welcome song, attendance, story, calendar, talking time)
9:20-10:00 a.m.	Project Time and Choice Time
10:00-10:05 a.m.	Clean Up Time
10:05-10:15 a.m.	Wash Hands and Snack Time
10:15-10:45 a.m.	Younger Groups: Large Muscle Older Groups: Class Activity
10:45-11:15 a.m.	music, literacy activity, story time, large group activity
11:15-11:45 a.m.	Younger Groups: Class Activity Older Groups: Large Muscle
11:45-12:00 p.m.	Clean-up for lunch, hand washing

12:00-12:30 p.m.	Lunch
12:30-1:00 p.m.	Tooth brushing and Choice Time
1:00-3:00 p.m.	Quiet Time - napping or resting
2:00-3:00 p.m.	Awake Kids-Quiet play
3:00-3:20 p.m.	Hand washing and Snack Time
3:20-5:00 p.m.	Large Muscle Time or Classroom Activities
5:00-6:00 p.m.	Choice Time (art, manipulatives, books, puzzles, etc.)
6:00 p.m.	Goodbye, see you tomorrow!

Listed below are some of the activities your child will be involved in during preschool time:

Arts & Crafts	Outdoor Walks
Finger plays	Field Trips
Creative Dramatics	Gym Games/Activities
Sharing Time	Drawing/Coloring/Cutting
Storytelling	Music (sound, rhythm, songs)
Small Group Discussions	Science Exploration
Large Group Discussions	Choice Time (social time)
Reading/Listening To Stories	Book Time

Preschool aged children are monitored by sight and sound of a staff member during all activities throughout their day at St. John's Child Care Center. Transitions are minimized and staff-child ratios are maintained at all times.

A more detailed schedule of daily preschool activities is posted weekly outside your child's classroom door. Please check the parent sign-in area for information regarding special events. For example: field trip sign-up sheets, tumbling classes, swimming lessons, family dinners and events, parent education, fundraisers, conference sign-up sheets, etc. Your signature and/or a small fee may be necessary in order for you and/or your child to participate.

School-Age

The following is an example of a "typical" day at St. John's for our School-agers:

6:30-9:30 a.m.	Arrival, Breakfast, Choice Time, Depart for School
9:15-10:30 a.m.	Teacher Preparation
10:30-11:15 a.m.	Arrival from Kindergarten/Hand washing
11:15-12:00	Project/Activity Time
12:00-1:00 p.m.	Wash Hands/Lunch
1:00-3:00 p.m.	After Kindergarten Care
1:15-1:30 p.m.	Group Time
1:30-2:00 p.m.	Large Muscle
2:00-4:30 p.m.	Homework, Journals, Reading, Choice Time
2:00-3:00 p.m.	Arrival of School-agers

3:00-4:00 p.m.	Games, Toys, Manipulatives, Blocks
4:00-4:30 p.m.	Project/Activity Time
4:30-4:45 p.m.	Wash Hands, Snack Time
4:45-5:30 p.m.	Large Muscle Time
5:30-6:00 p.m.	Choice Time, Homework, Reading
6:00 p.m.	Goodbye, See you tomorrow!

Listed below are some of the activities your child will be involved in during their day with us:

- | | |
|--------------------|-------------------------|
| Reading | Dramatic Play |
| Board Games | Listening To Stories |
| Competitive Games | Art Exploration |
| Manipulative Play | Cooperative Group Games |
| Large Muscle Games | Cooking Activities |
| Music/Singing | Science Exploration |
| Sensory Activities | Homework Time |

ADMISSIONS POLICY

No child will be denied admission based on race, color, sex, age, religion, disability or national origin. In order to be enrolled, an application form and registration fee must be on file. Children must be 16 months old. Children must be 33 months old and toilet trained to be part of our preschool program.

The most recent date of physical exam and proof of up-to-date immunizations must be signed by the child's physician and on file before the child's first day in attendance. If your child cannot receive immunizations or you have conscientious objections to immunizations, there are other procedures you must follow (see the director). These records are kept, confidential, in a locked cabinet in the Child Care Office and are accessible to teaching staff, the child's parents, and other authorities on request.

Children are expected to remain throughout the school year (September through May) except in unusual cases, (family moving, etc.) when AT LEAST TWO WEEKS NOTICE must be given. This permits notifying others that there will be an opening. Parents failing to give a two-week notice are responsible for two weeks tuition after notification. Changes for summer and fall programming require notice FOUR WEEKS prior to the start of these sessions. Parents are responsible for ONE MONTH of tuition after notification.

PAYMENT POLICIES

PRESCHOOL PAYMENTS

Preschool begins in September and continues through May (summer sessions: June, July and August). You will receive a school calendar in the September Newsletter informing you of release days or

holidays throughout the entire school year and summer sessions. Our release days and breaks usually coincide with the Minneapolis Public Schools.

Our monthly preschool tuition is an AVERAGE OF THE YEARLY COST of programming. Therefore, we charge the full tuition rate even during the months when extended release days, break weeks or holidays are observed. There is no tuition deduction if your child is absent due to illness or a family vacation, because we still hold their spot while they are gone. Preschool tuition is due on the first of each month. Any preschool tuition received after the tenth of the month will have a ten dollar late fee added. Your prompt payment at the beginning of the month will be greatly appreciated.

CHILD CARE PAYMENTS

A school year calendar will be provided in the September Newsletter to inform you of holidays, breaks, and release days for the entire year (September through August). We will provide child care during public school vacations and release days. We will not provide care on holidays.

Child Care tuition is due IN ADVANCE OF CARE. Tuition can be paid weekly (Mondays), bimonthly (Mondays), or monthly (the 1st), as arranged with the director. No refunds or credits are given for absences or holidays. Payment for absences of extended duration must be arranged with the director. Child care tuition that is outstanding will be subject to a five dollar per week late fee. Please note that after noon on Tuesdays, tuition is considered late. Your prompt payment is appreciated.

VACATION POLICY (CHILD CARE ONLY)

If your child is absent from our center while your family is on vacation, you still need to pay for the time your child is gone. After 12 consecutive months of care, you acquire one week of free vacation time. The director must be notified in writing at least one week in advance of your child's absence in order to confirm eligibility for free vacation time. The vacation time is equivalent to one week of your child's regular scheduled care and must be used at one time. You cannot use a day here and there. Beginning the week following your child's return from free vacation time, another full twelve consecutive months of care must be provided before more free vacation time can be requested. Vacation time is limited to one week every twelve months and cannot be accrued. Please see the director if you have any questions.

SCHOLARSHIPS

St. John's is occasionally able to offer some assistance to families showing financial need. Interested families should contact the director. We have a Hennepin County contract to enable our participation in the sliding fee program (Title XX). Please see the director for more information.

SECURITY/ALARM SYSTEM

A coded entry pad is on our main entrance on Nicollet Avenue. The function of this pad is to keep our program accessible to families, but keep the general public out. Parents will be given the code when your child begins care with us. Please DO NOT share the code with others or your child.

After entry into our building, please be sure that you reset the code pad by turning the silver dial to the left once you open the door. These tips will help ensure safety in our building. St. John's has an evening, holiday and weekend alarm system that is automatically set. When we are closed on

weekends, for a holiday, or any other reason, the alarm stays set all day. Please **DO NOT** try to enter the building for any reason when we are closed. The alarm will sound and police will respond.

ARRIVAL / DEPARTURE POLICY

Parents must accompany their child into the building and into the appropriate classroom. Staff is not responsible for your child until the child is brought into a classroom with staff members. Visual contact must be made with a staff member.

Please send a note if your child will be picked up by anyone other than the usual person. Our mornings can get very busy here, so please do not just mention the change to a staff member; they may be already gone for the day when your child is scheduled to be picked up. It is against our regulations to release children if we have not been notified in advance of the alternate arrangements. The alternate pick up person **MUST** bring a photo identification card with them to prove their identity to us, before we will allow the child to leave with them. If the parent or child has a disability which prohibits them from using our entrance, there are alternate areas to enter our building which are handicap accessible. Please see the director to discuss accommodations.

Your child should arrive at school on time and should be picked up promptly upon your contracted departure time (you indicated on your original application form) or upon scheduled dismissal.

Preschool only children should not be brought in any earlier than **FIVE MINUTES BEFORE** our 9:00 a.m. starting time. Your promptness in picking up your child will be greatly appreciated (preschool dismissal is at 11:30 a.m.).

Parents **MUST SIGN THEIR CHILD IN AND OUT** on the sign-in/out sheets **EVERY DAY**. The sheets are located on the sign-in table under the parent bulletin board for preschool, on the wall in toddler room for toddler age children, and on the sign-in counter in school-age room for school-age children.

If you find that on any given day you need to bring your child in earlier or pick him/her up later than contracted times, please call the center to "okay" the change with us. Staffing schedules may need to be adjusted, to accommodate the extra child, so we can keep our ratios intact.

If for any reason you will be coming later than usual to pick up your child, it is important that we let your child know of the delay. Most children are more comfortable when they are aware of changes in their daily routine. The phone in the office is equipped with an answering machine to make it easier to reach staff. We check the answering machine many times during the day for any messages regarding the children in our care.

Please notify St. John's if your child is going to be absent and the reason for the absence.

St. John's officially closes at 6:00 p.m. each evening. If it is necessary for a staff member to stay beyond 6:00 p.m. to care for your child, there will be a minimum charge of \$5.00 **PER CHILD** for **EVERY 10 MINUTES** or portion thereof. This fee must be paid **AT THAT TIME** to the staff member and is their compensation for staying late.

SICK CHILD

CARE OF A CHILD WHO BECOMES ILL AT THE CENTER

A child who becomes ill at the center will lie on a cot in the office or be kept separate from the group under supervision, and the parent will be notified. If a parent is not available, an alternate will be contacted. If neither a parent nor an alternate can be reached, the child will be kept on a cot or be kept separate, but supervised, until contact is made. If the situation warrants, 911 will be called. After observation of a sick child, the child's temperature will be taken and will be taken every hour thereafter. Parents will be contacted if necessary. Parents should arrive as quickly as possible while we try to make the child as comfortable as possible.

Telephone numbers and emergency contacts are recorded on emergency cards that parents fill out when registering their child at St. John's. These cards are alphabetically filed and kept in a card box by our telephone. You must fill out TWO CARDS for each student. It is the responsibility of parents to keep us informed AT ALL TIMES of any changes in this information (names, telephone numbers, etc.). It is also important to keep us current on daily or temporary number changes in the event of an illness or emergency regarding your child.

POLICY REQUIRING EXCLUSION OF SICK CHILDREN

For the mildly ill child (common cold, etc.), exclusion should be based on whether there are adequate facilities and staff available to meet the needs of both the child and other children in the group, and whether the child is able to participate in normal daily activities (outdoor play, etc.).

Children with symptoms of communicable diseases and children who are running a fever should remain at home until they have completely recovered.

Children should remain at home or will be sent home if they have any of the following symptoms:

FEVER: 100 degrees axillary (armpit) or higher.

101 degrees oral or higher or accompanied by other signs or symptoms of illness or behavior changes. Child should remain at home for a minimum of 24 hours.

RESPIRATORY SYMPTOMS: Severe congestion, wheezing, difficulty breathing, persistent crying, irritability or uncontrolled coughing that occur suddenly or are unexplained.

VOMITING: Has two or more episodes or is accompanied by other symptoms (fever, abdominal pain, diarrhea or behavior change). Child should remain at home for a minimum of 24 hours.

DIARRHEA: Two or more abnormally loose stools or increased number of stools as compared to a person's normal pattern.

SORE THROAT: If it is accompanied by other symptoms such as fever, rash or has a diagnosed bacterial infection (must have 24 hours of antibiotic treatment before returning).

UNEXPLAINED LETHARGY: Child is not able to participate in activities with comfort or requires more care than staff can provide without compromising health and safety of other children in care.

CHILD MUST BE EXCLUDED FROM THE PROGRAM UNTIL

RASH: Until a medical exam indicates rash is not of a communicable disease.

CHICKEN POX: All blisters have dried into scabs and there is no more drainage (approximately 6 days).

PINK EYE: After 24 hours of treatment and no longer has pus draining from eye.

FIFTHS DISEASE: No exclusion necessary.

HAND, FOOT, MOUTH: Fever gone and child is well enough to participate in normal activities.

IMPETIGO: After 24 hours of antibiotic treatment.

HEAD LICE: After first of two treatments and no lice or nits are seen.

MEASLES: Six days after rash appears.

MONONUCLEOSIS: Child participates in normal activities.

MUMPS: Nine days after swelling begins.

PERTUSSIS (WHOOPIING COUGH): Five days after antibiotics begin.

PINWORMS: After 24 hours of treatment has been given.

RESPIRATORY INFECTION (VIRAL): Without fever for 24 hours and has normal participation. No exclusion for mild infection without fever as long as child participation is normal.

RINGWORM: After 24 hours of treatment completed.

ROSEOLA: Child without fever for 24 hours.

RUBELLA (GERMAN MEASLES): Six days after rash appears.

SALMONELLOSIS: Diarrhea has stopped. No exclusion for children who show salmonella in their stools, but do not have symptoms.

SCABIES: After 24 hours treatment completed.

SHINGLES: If sores can be covered by clothing or bandage, no exclusion necessary. If sores CAN NOT be covered, excluded until sores have crusted.

STREP THROAT: After 24 hours of treatment completed and child is without fever for 24 hours.

YEAST INFECTION: No exclusion necessary.

We are not equipped to care for sick children, but if your child is sick and you must go to work, here is a resource with child care options that may help: Resources for Child Caring - Child Care Referral Agency at (651) 641-0332. Contact the director for other possible options for help.

PROCEDURE FOR NOTIFYING PARENTS OF INFECTIOUS OR COMMUNICABLE AND REPORTABLE DISEASES

In the event there is a confirmed case of a diagnosed communicable disease among the children at the center, all parents will be notified by a note posted on the Parent Bulletin Board. It is the responsibility of the parent to report to the center, if their child has been diagnosed by a source of

medical or dental care as having a contagious and/or reportable disease (see list of reportable diseases).

It is essential that you keep us informed about your child's health history, illnesses, injuries and allergies, so that our staff can be aware of your child's needs. An ICCP plan is required for children with medical conditions, special needs, asthma or allergies. Please inform us if your child develops a new health problem, communicable or reportable disease, or is injured. Parents are required by our state laws to report a communicable or a reportable disease that your child has been medically diagnosed as having within 24 hours, exclusive of weekends and holidays.

List of Reportable Communicable Diseases

Acquired Immunodeficiency Syndrome (AIDS) (via HIV reporting)	Measles (rubeola)
Amebiasis (Entamoeba histolytica/dispar)	Meningitis (caused by viral agents)
Anaplasmosis (Anaplasma phagocytophilum)	Meningococcal disease (Neisseria meningitidis)
Anthrax (Bacillus anthracis)	Mumps
Arboviral disease	Neonatal sepsis, less than 7 days after birth
Babesiosis (Babesia spp.)	Orthopox virus
Blastomycosis (Blastomyces dermatitidis)	Pertussis (Bordetella pertussis)
Botulism (Clostridium botulinum)	Plague (Yersinia pestis)
Brucellosis (Brucella spp.)	Poliomyelitis
Campylobacteriosis (Campylobacter spp.)	Psittacosis (Chlamydophila psittaci)
Cat scratch disease (infection caused by Bartonella spp.)	Q fever (Coxiella burnetii)
Chancroid (Haemophilus ducreyi)	Rabies
Chickenpox (via Varicella-zoster disease)	Retrovirus infection
Chlamydia trachomatis infection	Reye syndrome Rheumatic fever
Cholera (Vibrio cholerae)	Rocky Mountain spotted fever (Rickettsia rickettsii, R. canada)
Coccidioidomycosis	Rubella and congenital rubella syndrome
Congenital rubella syndrome (via Rubella)	Salmonellosis, including typhoid (Salmonella spp.)
Cronobacter (Enterobacter) sakazakii	Severe Acute Respiratory Syndrome (SARS)
Cryptosporidiosis (Cryptosporidium spp.)	Shigellosis (Shigella spp.)
Cyclosporiasis (Cyclospora spp.)	Shingles (via Varicella-zoster disease) Smallpox (variola)
Dengue virus infection	St. Louis encephalitis (via Arboviral disease)
Diphtheria (Corynebacterium diphtheriae)	Staphylococcus aureus (death or critical illness due to community associated S. aureus in a previously healthy individual; also VISA and VRSA)
Diphyllobothrium latum infection	Streptococcal disease
Eastern equine encephalitis (via Arboviral disease)	Syphilis (Treponema pallidum)
Ehrlichiosis (Ehrlichia spp.)	Tetanus (Clostridium tetani)
Encephalitis	Toxic shock syndrome
Enteric E. coli infections	Toxoplasmosis (Toxoplasma gondii)
Giardiasis (Giardia lamblia)	Transmissible spongiform encephalopathy
Gonorrhea (Neisseria gonorrhoeae)	Trichinosis (Trichinella spiralis)
Guillain-Barré Syndrome	Tuberculosis (Mycobacterium tuberculosis complex)
Haemophilus influenzae disease	Tularemia (Francisella tularensis)

Hansen's disease (Leprosy) (Mycobacterium leprae)	Typhoid (via salmonellosis)
Hantavirus infection	Typhus (Rickettsia spp.)
Hemolytic uremic syndrome	Unexplained deaths and unexplained critical illness (possibly due to infectious cause)
Hepatitis (all primary viral types including A, B, C, D, and E)	Unusual or increased case incidence of any illness
Histoplasmosis (Histoplasma capsulatum)	Vancomycin-intermediate S. aureus (VISA) (via Staphylococcus aureus)
Human immunodeficiency virus (HIV) infection, including Acquired Immunodeficiency Syndrome (AIDS)	Vancomycin-resistant S. aureus (VRSA) (via Staphylococcus aureus)
Influenza	Varicella-zoster disease Vibrio spp.
Kawasaki disease Kingella spp.	West Nile virus (via Arboviral disease)
LaCrosse encephalitis (via Arboviral disease)	Western equine encephalitis (via Arboviral disease)
Legionellosis (Legionella spp.)	Yellow fever
Leprosy (Hansen's disease) (Mycobacterium leprae)	Yersiniosis, enteric (Yersinia spp.)
Leptospirosis (Leptospira interrogans)	
Listeriosis (Listeria monocytogenes) Lyme disease (Borrelia burgdorferi)	
Malaria (Plasmodium spp.)	

*From time to time we may have an unvaccinated child enrolled at St. John's Child Care Center.

POLICY REGARDING ACCIDENT, FIRST AID, EMERGENCY CARE, EMERGENCY TRANSPORTATION AND REPORTS

Procedures for administering first aid:

- “ Certified first aid staff will care for injured child
- “ Assess the situation
- “ Apply necessary treatment
- “ Inform parent immediately, depending on the severity of injury
- “ Inform medical source (911) if necessary
- “ Write up accident report
- “ Assess the hazards
- “ Report to Department of Health (651-201-5503) or licensing if mandated

Accidents involving children, staff or visitors are evaluated by staff members. Accident reports will be filed in the child's folder, a copy will be given to the child's parent and it will be recorded in the accident log. The written record must contain the child's name, date and place of the accident, type of injury, action taken by staff and to whom the accident or injury was reported.

If a child is injured at or away from the center, staff will administer first aid, if necessary. If the injury may lead to future complications or in any way be serious, the staff will contact the parent to take the child for medical care, if necessary. Alternates will be notified if a parent/guardian cannot be reached. If no one can be reached the staff will call 911. If staffing permits, a staff member will accompany the injured child.

The director or assistant director will review the accident log annually and modify the program's policies, if necessary, based on the log analysis. All staff are always informed of any policy changes.

TRANSPORTATION

Transportation to and from school is the responsibility of parents. We must be notified at all times as to who will be bringing and/or picking up your child on any given day. Each child **MUST** be brought to the appropriate classroom by the driver or parent bringing the child to school. The child must also be picked up from a classroom or on the playground. This is a strict regulation for the safety of your child. We also recommend that your child is transported to and from school wearing a safety belt or in a car seat.

If the center transports children for field trips, we will rent buses from a quality rental facility or transportation will be provided by the activity's sponsor. In accordance with Minnesota Law and DHS regulations, federally approved, age appropriate restraint devices will be used when required, to transport your child. You must sign the field trip permission sheets on the Parent Bulletin Board in order for your child to participate in any extra activities (field trips, swimming lessons or tumbling classes). You may be asked to provide a car seat when children under age four are transported.

FIRST AID KIT

Our first aid kit contains the following: Bandages, gauze, sterile compresses, scissors, cold pack, oral or surface thermometer, adhesive tape, face shield/CPR barrier, paper and pen, gloves, liquid soap and plastic bags. A current first aid manual is included. Our first aid and CPR manuals are from the American Red Cross or MVNA. A first aid kit and manual are accessible to all staff on each floor of our building. In addition, a kit is taken on all field trips, and to the playground each time groups of children use that play area.

MEDICATION ADMINISTRATION

We **CAN NOT** give any over-the-counter medications such as; diaper rash ointments, creams, hand lotion, hand sanitizer, insect repellent, sunscreen, Tylenol, Advil, or cough medicines unless we have a physician's signature on our Medication Permission Sheet. This is mandatory in order for our staff to administer any over-the-counter product. A copy of the Medication Permission Sheet is included in this handbook and we recommend that you always have one available at home. Extra copies of this form are located on the sign-in table at the top of the staircase or in the toddler or school-age classrooms. Sunscreen may be applied at St. John's, by staff, if a special sunscreen form is filled out, and parent, along with doctor signatures is included. Completed parent or physician medication permission forms may be brought in to us or faxed to us at (612) 827-0574.

Prescription medications may not be given to any child in the center without:

1. Written authorization from the parent to administer the medication (Medication Permission Sheet).

2. Specific written instructions from the doctor or dentist IN THE ORIGINAL PRESCRIPTION LABELED BOTTLE OR CONTAINER.

Medications shall be kept in their original containers bearing the original label with legible information stating:

- " Prescription number and child's name
- " Name of drug and expiration date (if a time dated drug)
- " Strength and quantity of drug
- " Directions for use
- " Date of original issue, or with a refill, the most recent date of issue and name/address of •
Name of licensed pharmacy issuing the medication

Nebulizer medications that are in single dose containers must be brought to the center in the original container with a current, clearly written prescription label on the container. The prescription label must indicate the child's name, prescribing licensed health care provider's name, name of the medication, medication strength, amount to be given, how often to give and what it is to be mixed with, if applicable. Children must have an ICCP (Individualized Child Care Plan) on file in order for us to provide proper care for children with a medical condition, special needs, asthma or allergies. Parents are required to provide that information prior to a child being in our care and updated on an annual basis.

Parent/guardian must fill out and sign a Medication Permission Sheet stating the time and amount of medication to be given. After the medication is completed, the form will be kept as part of your child's file. Medications will be stored out of the reach of children.

Any drug container having a detached, excessively soiled, or damaged label, shall be returned to the parent for re-labeling at the issuing pharmacy. Any unused portions of the prescription drugs remaining in the facility shall be returned to the parent or disposed of by destroying the label from the drug container and throwing medication away in the trash. Medications having a specific expiration date, will not be used after the date of expiration and will be destroyed.

Medication Administration Record

Parent Permission to Administer Medication and Log Form

DIAPERING

Only disposable diapers will be used, on toddler age children, while in attendance at St. John's Child Care Center. The diapers will be supplied by the parent. Diaper wipes will also be supplied by the parent. Diapers will only be changed in the diapering area, located in the toddler room.

Diapering procedures from Hennepin County Infectious Disease Manual will be posted in changing areas and followed. To prevent disease transmission, soiled clothing will be sent home with the parent in disposable plastic bags. Clothing soiled with blood, urine, stool or body fluids will not be rinsed out.

A daily written report of food intake, nap length, mood, and diapering will be available to parents of toddler age children at St. John's.

POLICY REGARDING EXCLUSION OF ILL STAFF

Staff members who are ill should not be at the center. Policies relating to exclusion of staff are the same as those excluding sick children.

CLEANING AND DISENFECTING

Child care settings bring children together for long periods of time, where they may be exposed to many different germs. Although the environment cannot be made germ-free, keeping their numbers at low levels can lessen the harmful effects of germs. Germs can most effectively be controlled by frequent, thorough, timely hand washing, cleaning and disinfecting of objects that come into contact with children. Toys that have been in a child's mouth, will be washed using soap and water, rinsed and sanitized.

In addition, proper handling and disposal of contaminated items are necessary to prevent the spread of infections.

DENTAL HEALTH

Because we care about the total health care of your child and because we wish to encourage good health practices at an early age, a tooth brushing program is followed. Toddler and preschool aged children enrolled in our child care program will participate in brushing their teeth after lunch. Each child must have his/her own toothbrush, clearly marked with his/her name, to be kept at school. This toothbrush should be replaced with a new one every six months or after any contagious illness (such as Strep Throat, etc.). We will provide the toothpaste.

UNAUTHORIZED / INCAPACITATED PICK-UP

PROCEDURES TO FOLLOW IF AN UNAUTHORIZED PERSON OR A PERSON WHO IS INCAPACITATED OR SUSPECTED OF ABUSE ATTEMPTS TO PICK UP A CHILD, OR NO ONE COMES TO PICK UP A CHILD:

If any questionable person comes to pick up a child, we will contact the parent/guardian immediately. If the parent/guardian is not available, an alternate listed on the child's emergency card will be called and asked to come and pick up the child. If a person is incapacitated or suspected of abuse, and no one else listed on the emergency card can come for the child, staff will call 911.

If no one comes to pick up the child by 6 p.m. (closing time), staff will try calling parents at home and at places of employment. If they cannot be reached, alternates will be called and asked to come and pick up the child. If alternates cannot be reached, our staff will call 911 and report an abandoned child. The child will be taken to St. Joseph's Home for Children (612-827- 6241) by the police.

PROCEDURE FOR MISSING CHILDREN

In the event a child is missing, all staff will be notified immediately. If a complete unsuccessful search has been made by the staff, in approximately 30 minutes time, police will be called and a parent contacted.

PARENT INVOLVEMENT

At St. John's, we recognize the important role parents have in helping their child learn and grow. There are a number of ways you can help facilitate your child's experiences at St. John's. Please feel free to visit or spend the day in your child's classroom at any time. You may wish to sign up to accompany us on a field trip, swimming lessons, or to help with one of our many special events for children and their families. Maybe you have a special job, talent or skill you would like to share with us. We will be using the information you shared with us on the Parent Information Questionnaire, included in the registration packet, to help us find parents interested in sharing with us.

Parents have the opportunity to become a member of our "Parent Helper Group". This group will work on various projects throughout each school year. Meeting times will vary to include as many interested parents as possible. Meeting information will be posted in general areas and included in our monthly newsletter.

PARENT-TEACHER CONFERENCES

Parent-Teacher conferences are offered prior to the beginning of the school year and at least two other times during the school year. Conferences are usually scheduled to coincide with the public school release days. If at any time you wish to have a conference with your child's teacher, feel free to contact him/her and arrange one. When a language barrier exists between staff and parents, we have access to interpreters through Think Small. Requests may be made to (651) 641-0332.

Every effort will be made to minimize transitions throughout the school year for your child. Continuity of relationships is especially important for your children. When transitions from classroom or age group are inevitable, advance discussion will take place with the parent. Relationships built between families and St. John's Staff are continuously worked on. Dialog and conferencing are just a couple of the ways we build trust and relationships.

ASSESSMENT OF CHILDREN

A formal written assessment will be completed on each child two times each calendar year. We use the "Desired Results Developmental Profile" for toddler and preschool aged children. Assessments are conducted in the child's classroom, by their teacher to make the child more comfortable. Areas of development we check for are cognitive skills, language, social-emotional development, self-help skills, health and physical development. Results from these assessments will be shared with parents during conferences or at a parent's request. All assessment results will be kept confidential and be part of your child's permanent record. Informal assessments are also completed on your child. Some of the assessment tools we use are checklists, observations and work sampling. Results of assessments help us with curriculum planning, identifying children's interests and needs, adapting teaching practices, program improvement and communication with families. If we suspect a developmental delay with your child, we have resources to refer your family to. Observations can be done during the school day by some referral agencies. Written parent permission will always be obtained before a referral agency is contacted.

The Minneapolis Public Schools require a developmental screening before kindergarten entrance. You may contact Early Childhood Screening Services at (612)668-3715 to schedule an appointment or for developmental questions. If your family speaks a language other than English, an interpreter is available through Think Small at (651) 641-0305 or see the director.

PARENT EDUCATION

At St. John's, you are also able to participate in a number of parent education offerings. In the past, parent education offerings have included: time to share with other parents, time to share with your child, time to learn with other parents and time to learn with your child. Programs have ranged from coffee hours, to guest speakers, from informal get-togethers, to formal classes. ECFE (Early Childhood Family Education) is a resource we commonly partner with.

Because we want to involve as many parents as possible, we will try to offer programs at various times throughout the day or evenings.

PRIVACY RIGHTS STATEMENT

Data will occasionally be collected from families taking part in the subsidized fee program. The data will be collected for informational or statistical purposes by St. John's Child Care Center, St. John's Lutheran Church, Hennepin County Community Services, Child and Adult Care Food Program, or any other funding agencies used by that family or St. John's Child Care Center. The family may refuse to supply the requested data, but the consequence of not supplying the data may result in the withdrawal of subsidized funds. The director of St. John's Child Care Center is named as the Responsible Authority for the collection, use and dissemination of the data.

PUBLICITY/RESEARCH PARTICIPATION

St. John's Child Care Center will, on occasion, participate in publicity or research projects. Information will be presented to families in advance of each project indication organization

completing the research and their reason for it. A written parent consent will be obtained prior to each and every occurrence. Participation will be completely voluntary.

SUSPECTED CHILD ABUSE OR NEGLECT

St. John's staff is mandated to report cases of suspected abuse or neglect. Documentation is required. 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. An employer of any mandated reporter shall not retaliate against the mandated reporter for reports made in good faith or against a child with respect to whom the report was made. Definitions of abuse and neglect, as taken from the Hennepin County Guide for people who work with children, are as follows:

Neglect and dependency are extremely difficult elements of behavior to judge. It is crucial that people who work with children consider the array of factors which deny children the feeling of being loved or deny children the basic physical necessities. All reports concerning suspected abuse or neglect of children should be made to the Department of Human Services, Licensing Division's Maltreatment Intake Line at (651) 431-6600. If you have questions or doubts, a general report can be made to Hennepin County Child Protection at (612) 348-3552. Some other 24 hour community services which may help you: Greater Mpls. Crisis Nursery (763) 591-0100, Crisis Connection (612) 379-6363, or Crisis Center (612) 347-3161. If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota statutes or rules that govern the facility, you should call the Department of Human Services, Licensing Division at (651) 431-6500. An oral report of suspected abuse or neglect made to one of these agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays.

An internal review will be completed (within 30 calendar days) and correction action taken, if necessary, to protect the health and safety of children in our care, when we have reason to believe that an internal or external report of alleged or suspected maltreatment has been made. The review will include whether or not policies and procedures were adequate and followed, if there is a need for additional staff training, the reported event is similar to past events with the child or services involved, and if there is a need for corrective action by us to protect the health and safety of children in our care. Based on the results of the review of an internal report, a corrective action plan will be put in place to prevent further lapses in performance by our staff member. The director and assistant director will document the completed internal review and provide documentation to the commissioner upon request.

PHYSICAL ABUSE

Under Minnesota statute, physical abuse means: "Any physical injury inflicted by a parent, guardian or other person responsible for the child's care, of a child other than by accidental means"; or..."Any physical injury that cannot reasonably be explained by the history of injuries provided by a parent, guardian, or other person responsible for the child's care." Children who are physically abused sometimes bear signs of injury such as bruises, welts, burns, fractures, swellings or lost teeth. The list of possibilities is long and unpleasant. While internal injuries are seldom detectable without a hospital exam, anyone in close contact with children should be alert to multiple injuries, a history of repeated injury, new injuries added to old and untreated injuries.

The older child may attribute the injury to an improbable cause, lying for fear of parental retaliation. The younger child, on the other hand, may be unaware that severe beating is unacceptable and may admit to having been abused.

The following are examples of physical abuse that should be referred:

É Child has suffered an injury which appears to be non-accidental in nature.

É Child has suffered a physical injury as a result of hazardous conditions uncorrected by the parent/guardian.

É Child suffers physical injury due to inadequate supervision by parent/guardian.

É There is substantial likelihood that the child will immediately suffer a physical injury.

SEXUAL ABUSE

Approximately 85% of the sexual abusers are known to the child or the child's family. Since the sexually abused child lacks the symptoms of battering, sexual abuse is difficult to identify. Short of the child telling someone, the best indicators may be a sudden change in behavior and signs of emotional disturbance. The child, for example, may unexplainably begin to cry easily and seem excessively nervous.

The following are examples of sexual abuse which should be referred:

É Child is the victim of questionable sexual conduct by a parent/guardian, caregiver, siblings or adult.

É Child is engaged in prostitution or is the subject of pornographic materials.

REPORTING PROCEDURES

If a staff member notices any behavior changes and/or physical injuries, and if abuse or neglect is suspected, they are required by law to note the date, type of change, location of injury and any discussion with the child concerning the incident and put documentation in the child's file. The staff person suspecting abuse or neglect **MUST** report it by phone within 24 hours and send written report within 72 hours, exclusive of weekends and holidays.

POLICY FOR REPORTING SERIOUS INJURY, FIRE, DEATH TO DHS

It is the responsibility of the staff person involved to report, within 24 hours, any injury requiring treatment by a physician or use of any medical service by a child while in care (911, etc.), within 24 hours of a death, and within 48 hours of a fire (happening during the hours of operation that requires the service of a fire department).

ANIMAL BITES

If a child is bitten by an animal, the area will be washed thoroughly with soap and water. If the animal is a caged pet at the center, we will contact the child's parents and inform them of the incident. The

child's parents must contact the child's source of health care to see if any further treatment is necessary (tetanus, rabies vaccine, booster, etc.).

If the animal is not a center pet, we will try to get a good description of the animal's physical appearance and behavior. Then we will contact the police and if it can be done safely, have an adult attempt to find or follow the animal until the police arrive. The child's parents will be contacted and instructed that further medical treatment may be necessary. Any animal bites will be reported to DHS and the commissioner of health or health consultant immediately.

PRESENCE OF PETS

Classrooms may, on occasion, have pets. Fish, guinea pig and hamster are some of the pets we have raised. There are times during the year when we may encourage the children to bring pets to school. We request that all live in or visiting pets appear to be healthy and owners are prepared to show proof of the animal's full immunization record. Parents must inform staff immediately if a child is allergic to any sort of animal. Then, we can be sure to keep that child safely away from the animal or possibly not allow the animal to visit at all.

ACCIDENT PREVENTION PROCEDURES

CHOKING: Children will be closely supervised when using small objects during an activity. All other small objects will be stored away from children's reach. Meal times are closely supervised by staff and foods that are not age appropriate or difficult to chew will not be served.

BURNS: Children are closely supervised when an activity calls for an electrical appliance (iron, popcorn popper, etc.). All electrical outlets will be covered. Burn causing chemicals, such as bleach, will be stored out of children's reach. Outside resources are used during the year to educate the children in prevention of fire and burns.

INJURIES: The center is inspected for hazards daily by staff. All staff are required to remove any unsafe toy or piece of equipment and to discontinue its use until repaired. Loose tiles, broken windows, etc. will be replaced. Children are closely supervised at all times. At no time will a child be left unattended.

PEDESTRIAN ACCIDENTS: During a walking field trip, one of the staff will be stationed at the front of the group, and another will be at the back of the group. When crossing an intersection, the proper procedures will be taken, including crossing on a green light. When using the bus, all children will board in an orderly manner. Children will be closely supervised while waiting on a curb.

SUFFOCATION: All materials that the children use in the center are screened by staff, and dangerous or toxic materials are either not used or are used under close supervision by staff. Plastics are stored out of reach of children and are disposed of immediately.

DAILY INSPECTION OF POTENTIAL HAZARDS: Upon arrival at the center, the first staff member reviews the rooms for cleaning items that may have been left accessible to children and puts them where they belong. The director or assistant director reviews the rooms when they arrive to

double check that outlets are covered, slippery materials on the floor are cleaned, and that equipment is in general good repair. Hazardous equipment is removed from the play area until it can be repaired.

POISONING: We store all poisonous materials out of the reach of children. In the event that an accidental ingestion should occur, our staff will consult with the Poison Control Center. They may be reached at 1-800-222-1222. A parent/guardian would be notified immediately of any poisoning situation. Information provided by Poison Control, including recommendations for treatment and the condition of your child, will be reported to the parent/guardian. All poison ingestion incidents will be reported to DHS.

FIRST AID TRAINING FOR STAFF

The director, assistant director, all teachers and assistant teachers must complete a certified first aid training course within ninety days of employment, if not already certified. First aid training courses must be updated every three years for re-certification and documented in the staff member's file.

CPR TRAINING FOR STAFF

The director, assistant director, all teachers and assistant teachers must complete a certified CPR training course, covering the use of CPR techniques with infants and children, within ninety days of employment, if not already certified. CPR training courses must be updated annually with a refresher course, and documented in the staff members file. The CPR training must be approved by or provided by the American Red Cross, American Heart Association, a licensed physician, a registered nurse or a licensed practical nurse trained to provide CPR instruction. The CPR training must include instruction on the treatment/procedure of an obstructed airway. CPR trained staff must accompany children on field trips.

In addition to the above named trainings, ALL staff are annually trained in Abusive Head Trauma (AHT).

BEHAVIOR GUIDANCE

Good discipline is more than just punishing or laying down the law. It is liking children and letting them see that they are liked. It is caring enough to provide good, clear rules for their protection. We believe that caring deeply about children means that we want good control and firm discipline for them. Caring and control are both necessary ingredients of good teaching.

One of our main goals relating to discipline is to teach children to feel respect for themselves and others and to show that respect. When we note behaviors we feel are not appropriate, we first talk with the child about the problem. We want the child to understand why it is not appropriate, not just because we say so. At times we find it necessary to separate a child from the group so that the child may have a chance to calm down and think rationally. Separations from the group are always logged in our separation reports. Embarrassing, shaming, and corporal punishment, emotional abuse, withholding of food, light, warmth, clothing, medical care or punishment for lapses in toilet training are IN NO WAY part of our program's discipline policies.

Our goals in guiding young children are to help children to feel good about themselves, to help them develop self-discipline and to consider the needs and desires of other people. It is important that

children understand why guidelines exist and to have a part in setting up the guidelines. At the beginning of each year, and at various times throughout the year, each class discusses the guidelines at St. John's. Through discussions we may find that some rules are no longer necessary or that some new ones are needed. We try to state rules and guidelines in a positive manner. The use of humor, verbal praise and non-verbal praise are ways we use to recognize positive behavior.

It is also important that we provide immediate and directly related consequences for any child's unacceptable behavior. We try to be clear and help them understand that what they did was unacceptable and should not happen again. We must protect the safety of all other children and staff.

We are proud that discipline is not usually a significant problem in our program. To avoid behavior problems before they occur is ideal and here are some of our techniques:

- " We prepare the environment so that there are enough choices of activities and materials for the children.
- " We give choices only when a choice really exists for the child, but we do encourage the child to make decisions whenever possible.
- " We give reasons and explanations for why we want a child to do something. If they do not comply, our first action is to redirect a child to an activity or behavior by giving them alternate choices. As a last resort, we will remove the child from the situation.
- " We feel it is important that children know it is okay to have positive and negative feelings. We will help the child label and deal constructively with their feelings.
- " Teachers have time to prepare the environment and plan for activities daily. Our preparation lets each child know that what they do and the ways they act are important to us. Because of these attitudes, behavior in school begins to be important to the child as well.

PERSISTENT UNACCEPTABLE BEHAVIOR

All child separations are recorded in our separation log, it is easy for us to keep track of the number of separations the children are getting and why. If any one child receives three or more separations in one day, the parents will be notified. If the child receives five separations in one week, we will help to work out a behavior management plan with the child's parents. If a child receives eight separations in two weeks, the behavior management plan will be either re- evaluated or a new one will be designed. This requires an increase in the amount of staff guidance and time.

Physical restraint, other than to physically hold a child when containment is necessary to protect the child or others from harm, will not be used as a disciplinary procedure. We will not use mechanical restraints, such as tying, to discipline.

Before a child returns to the group after a separation period, the stopping or controlling of the behavior that warranted the separation must be over. The child can and must be returned to the group as soon as the behavior stops.

We feel it is vital to spend the time and effort working on a child's behavior. Noticing a child's successes in positive ways can help to build good self-esteem that can last a lifetime.

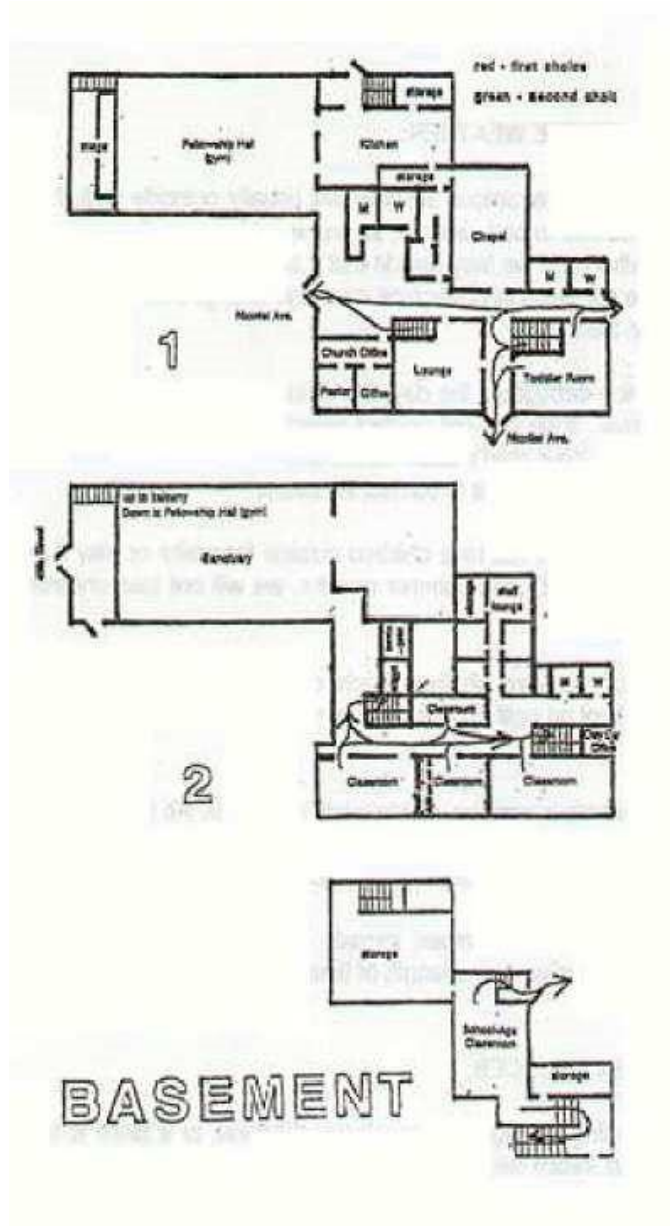
SEPARATION REPORTS: There is a separation report ("time-out" log) located in each classroom and they are kept up to date daily. The log includes: child's name, date, staff member, information about previous methods used to guide the child's behavior, and final reason for the separation.

FIRE SAFETY PROCEDURES

Fire drills and Fire Evacuation Plan: Call the fire department once everyone is out of the building. Children will be instructed to line up at the door. Teachers will check activity areas and bathrooms to make sure all children are gathered. All children and staff will walk from the building using the nearest exit. The group will meet on the northwest corner of Nicollet Avenue and Rustic Lodge. Monthly fire drills are planned and recorded year round.

FIRE SAFETY ROUTES

One of these plans is posted in each classroom: (Head classroom teachers are the responsible authority, if not present, assistant teacher is responsible.)



Civil Defense Shelter/Tornado - Basement
 Emergency Number 911 or (612) 348-2345
 Health Authority (612) 617-4600
 General Licensing Number (651) 431-6500

FIRE EXTINGUISHERS

Fire extinguishers are located by the kitchen/gym area and in the hallway by the preschool classrooms and bathrooms. A fire extinguisher is located in each preschool classroom, toddler classroom and

school-age room. All staff know how to operate the fire extinguishers. The fire extinguishers can be used on trash, wood, paper, liquids, grease and electrical fires.

To use the fire extinguisher:

1. Pull the pin and hold unit upright.
2. Free hose and aim at base of fire.
3. Squeeze the handle and sweep side to side.

DISASTER PLANS, SEVERE WEATHER, PANDEMIC PLANNING, and LOCKDOWN PROCEDURE

Blizzards: School closings for hazardous weather will usually coincide with the Minneapolis Public Schools. If they are closed due to bad weather, so are we. However, there may be a time when they do not close for bad weather, and we may decide that it is best for our smaller children, to close. We would do our best to have our answering machine message changed for the day to indicate our closing and have signs posted on the doors.

If a blizzard should develop throughout the day, the children would be kept at the center with a staff member until parents arrive. If we cannot contact parents, the emergency alternate will be called to come and pick up the child. Your child's basic needs will be provided for. Effort will be made to keep telephone lines open in order for parents to contact the center.

During the winter months, we will not take children outside for walks or play if the temperature, with wind chill, is below 0 degrees. Children should dress in layers to provide maximum protection from cold and/or wet weather.

During summer months, we will not take children outside if the heat index is above 95 degrees. To protect children's skin during sunny weather, sunscreen may be applied by staff at St. John's Child Care Center. A sunscreen permission form must be completed and on file for each child.

The form must be signed by the parent and child's physician. Insect repellent should be applied at home prior to arrival at St. John's.

In the event of a pollution control warning due to high smog levels, children in our care will not play outdoors.

Tornados: In the event of a severe weather watch, children will be kept inside the center. Radios and/or televisions will be kept on until an "All clear" is sounded or until weather bulletins indicate there is no longer any danger. In the event of a severe weather warning, children will be kept in the basement of St. John's Church. "All clear" will need to be sounded before we will return upstairs. Children will be kept calm with conversation and activities (coloring, books/stories, puzzles, etc.).

During tornado season (April to September) tornado drills will be held monthly. The times, dates, number of children and staff present, and length of time for the drill will be recorded in our log, located in the director's office.

Upon request, St. John's Child Care Center will cooperate with state and local government disaster planning agencies working to prepare for, or react to, emergencies presented by a pandemic outbreak.

If there is gun fire, intruder, sniper, or an unsafe person in the neighborhood. St. John's Child Care Center may be required to go into lockdown. All windows will be closed and secured, all shades closed (where present). All exterior and interior doors will be locked by staff. All children WILL remain in building until given the okay by an enforcement officer to open doors. No one, including parents, will be allowed in or out until an enforcement officer informs us to open the doors.

KNOWLEDGE OF POWER SOURCES

If a child should get their fingers caught in an electrical socket, or if there is a short in the electrical system, the main electrical switch will be pulled immediately. The main electrical switch is located on the first floor in the hallway, west of the lounge. All staff is responsible for knowing where the circuit is located and how to disengage the power by turning the switch.

SNACKS AND MEALS

We serve a mid-morning snack during preschool hours. Breakfast, lunch and a mid-afternoon snack are provided for day care children in addition to the mid-morning snack. We prepare the snacks in our kitchen. Dairy and other perishable foods are stored in an approved refrigerator, set at 40 degrees or less. Our cook plans nutritious, low salt, low-sugar snacks. On occasion, families may donate a snack for a child's birthday or VIP day.

IN COMPLIANCE WITH STATE REGULATIONS, WE CANNOT ACCEPT HOMEBAKED GOODS OR BROKEN/OPEN PACKAGES.

Breakfast is provided from 7:45 a.m. to 8:25 a.m. for preschool and toddler age children. Your child must be seated by 8:20 a.m. to be served breakfast. Breakfast will be provided for school- age children between 7:30 a.m. and 8:25 a.m. depending on their school departure time.

Hot lunches are provided daily and prepared on site by our cook. Your child's safety is of utmost importance. Foods and liquids hotter than 110 degrees will be transported and stored out of children's reach. Our cook specializes in meals for children. Copies of the monthly menus are always included in your monthly newsletter and posted on the parent bulletin board along with the breakfast menu. Children should not bring lunches from home unless it is a field trip requirement.

Tables used for snacks or meals are washed with soap and water before and after snacks or meals are served.

Special diet requests will require written permission from the parent and sometimes the child's physician. Mealtimes and snack times are intended to be a relaxed and pleasant part of our day. Children are encouraged to taste new foods, but are not forced to eat. Meals are served family- style and meet USDA established standards.

Please do not allow your child to bring gum/candy to school.

INSURANCE

All children, staff and volunteers are covered with liability insurance while at school (on the grounds or on a field trip). In addition, all children are covered with medical insurance while in school.

FIELD TRIPS

We feel that field trips are a very valuable resource, and plan to go on one field trip each month (September through May), with the preschool-age group. We will try to take one field trip each week during the summer program (June, July, August), with preschool and school-age children. Toddlers may go on an occasional field trip. Preschool age children must be potty trained to go on field trips, unless accompanied by a parent. We also attempt to relate the trips to the current unit of study (weekly theme).

The charge for field trips will vary ranging from \$3.00 to \$15.00 per child and adult, and will be used to cover transportation costs and admission fees. A general permission form, signed by parents, must

be on file for each child for neighborhood walks. When we take a bus, a parent/guardian signature is necessary to give the child permission to participate. Please read the field trip summary form posted on the parent bulletin board. This sheet gives: the trip destination, purpose, date, time and cost of the field trip. Your signature on the sheet is mandatory if you wish for your child to attend the field trip. Parents will be notified and reminded of any upcoming field trips in the monthly newsletters, on the parent bulletin board or by special notice.

Parents are encouraged and always welcome to come along on field trips as "helpers". On field trips, our staff/helper ratio is 1:6 or less for preschoolers, 1:3 or less for toddlers, and 1:15 or less for school-agers. Staff will always have emergency telephone numbers for each child and a first aid kit.

Fuller Park (48th and Grand Avenue) is our alternate playground area. Therefore, it is not necessary for parents to sign a permission form for us to go there. However, we will always let you know when we will be taking the children there to play (monthly newsletter, parent bulletin board or sign in table).

CLOTHING

Clothing should be simple. Washable play clothes are preferred. The children will be working with many types of paint, clay, playdough and will participate in cooking activities from time to time. Even though we usually wear paint shirts, the children sometimes get paint, etc. on their clothes and it will stain certain fabrics and colors, even though we use "washable" paints.

Dress should be suitable for the weather. Layers are best during cold weather for maximum protection. Your child should have boots and snow pants here every day during the winter months. Please clearly label all of your child's items with their name. This includes boots, hats, snow pants, scarves, mittens, jackets, sweaters, books, blankets, etc. Be sure that your child's outdoor clothing fits correctly, so that the children can dress themselves with ease.

Please send an extra set or two of clothing (including socks and underwear) with your child in case of spills or accidents, or if clothing gets wet during outside play. If the clothing has been used in such a case, please send another set of clothing the very next day to replenish your child's box. Also, be sure to update the clothing so it is size and weather appropriate.

OUTSIDE PLAY AND SICK CHILDREN

Children will play outside on any given day. If the weather is not permitting, we will not go outside. However, please do not ask us if your child can stay in "because they are not feeling well". If a child is too ill to go outside, then they are probably too ill to be in school.

BIRTHDAYS AND V.I.P. DAYS

Each day at St. John's Child Care Center is a special day. However, each child has two very special days at St. John's. The first is their birthday and the second is their V.I.P. Day (Very Important Person Day). On your child's birthday and V.I.P. Day they will get a special crown or badge to wear all day. We are very flexible about whatever treats your child may want to bring on these special days. Edible or non-edible treats are acceptable. However, STATE REGULATIONS RESTRICT US FROM ACCEPTING HOME-BAKED GOODS.

How the V.I.P. Day is determined and celebrated differs from classroom to classroom. You will be notified of your child's V.I.P. Day by a note sent home with your child (check their cubby). The notice will also help out with hints on how you can help make your child's V.I.P. Day even more special.

TOYS FROM HOME AND PERSONAL BELONGINGS

Except for an item that may be needed to help ease your child's transition in the very opening days of the school year, we ask that you leave these items (toys, etc.) at home. If an item is brought to school we cannot be responsible for it. Show-and-Tell days will be scheduled at various times throughout the year in each classroom. Please be sure any item brought for Show- and-Tell (sharing time) has your child's name on it.

GUNS/WEAPONS AND HURTFUL PLAY

The outcome of using guns or weapons is that someone or something gets hurt. Young children have a difficult time separating fantasy from reality. This can have negative effects on children when combined with weapon play. We choose to work and communicate with children in ways that provide them with non-violent choices. Our staff will redirect all violent and hurtful play.

In order to help us with this policy, please do not allow your child to bring guns, weapons, or other toys of violence and/or destruction to school. We also ask that clothing depicting aggression, violence, weaponry or containing violent text not be worn to school.

LOST AND FOUND

The "Lost and Found" box is located in the hallway near the office. Please check the box first when your child has lost something. You will probably find it. All personal items, including clothing, should be labeled.

REST TIME

All toddler-age children, while at St. John's, will have a quiet, restful nap time following lunch from approximately 12:30 to 3:00 p.m. All preschool-age children, attending St. John's, will have a quiet, restful time following lunch from approximately 1:00 to 2:45 p.m. All preschoolers will be encouraged to rest or nap during this time. A child, who has completed a nap or rested quietly for 30 minutes, will not be required to remain on their cot. Children, who have rested or awoken early, will be allowed to get up and participate in quiet activities until everyone is awake. Children will not sleep past 3:00 p.m.

Most children will rest more comfortably, if they have a small blanket or small stuffed animal from home. Blankets must be taken home at the end of EVERY WEEK to be laundered. Please do not send large blankets to school with your child. They are difficult for us to store. Please label the blanket or animal with your child's name.

STAFF BABYSITTING

If staff members of St. John's Child Care Center choose to, on occasion, babysit during their unscheduled work shifts, St. John's Child Care Center will not be held responsible. Any arrangements, including transportation of children, made between parent and teachers outside of the scope of employment and enrollment at school, are independent.

DRUG AND ALCOHOL USE

Employees, subcontractors, volunteers and others affiliated with the program are prohibited from abusing prescription medications or being under the influence of a controlled substance (chemical or alcohol) while directly responsible for individuals served by the program.

GRIEVANCE PROCEDURE

Classroom grievances should be directed to the head teacher in your child's assigned classroom. Parents/Guardians with grievances that have not been satisfactorily resolved by the head teacher about the operation of the program are encouraged to present them to the highest level of authority, the director, in either an oral or written form. The director will review the grievance and deal with it in an appropriate manner. Parent's/guardian's grievances will be addressed in either written or oral form within ten working days.

CIVIL RIGHTS STATEMENT

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 6329992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov.

WIC INFORMATION

More people are eligible for WIC than you may think.

WIC serves

É Pregnant, postpartum, and breastfeeding women

É Infants and children to age 5

É Many working families

WIC participants receive...

É Healthy foods like milk, cheese, cereal & eggs

É Breastfeeding information and support

É Referrals to health & social services

É Nutrition & health information

É Infants who are partially or not breastfed may receive iron-fortified formula For more information and for a clinic near you call 1-800-WIC-4030 or visit www.health.state.mn.us/divs/fh/wic.

THANK YOU FOR YOUR INTEREST IN ST. JOHN'S CHILD CARE CENTER. WE HOPE THIS IS ONLY THE BEGINNING OF A WONDERFUL EXPERIENCE FOR BOTH YOUR CHILD AND YOUR WHOLE FAMILY. PLEASE FEEL FREE TO CONTACT US WITH ANY QUESTIONS YOU MAY HAVE (612) 827-1237.