

TINY TYKES PARENT & STAFF POLICIES & PROCEDURES

2024

BATTLE LAKE, MINNESOTA



Parent & Employee Policy & Procedures

Welcome

Welcome to Tiny Tykes! We would like to take this opportunity to share some friendly reminders of our Tiny Tykes policies, our tuition rates and annual childcare agreement.

Thank you in advance for taking the time to carefully read this guidebook. Tiny Tykes may be our name, but the level of care and dedication we have to you and your children is anything but tiny!

Mission

Our mission is to provide a safe and affordable educational experience that is designed to:

- Give your child a sense of belonging
- Nourish their self-confidence
- Foster their creativity
- Nurture their spirit of adventure
- Make learning fun

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2024 Tiny Tykes Child Care Agreement

The parties to this Agreement are _____ (Parent or Guardian) and Tiny Tykes, Inc.

Tiny Tykes, Inc. herein known as 'the center' operates a childcare facility and parent desires to enroll a child or children in the center. Tiny Tykes will be doing Semi-Annual tuition adjustments in January & July of each year. The July tuition will be announced at a later date. This is due to the volatility of the economy, supplies, & we are also unsure how the new MN regulation will impact our business, etc.

Parent agrees to pay fees accordingly to the following tuition and fee schedule and the parties agree to other terms and conditions as follows:

2024 Tuition Rates	6 weeks – 3 years	3 years – Kindergarten	School Age
Weekly Rates	\$250	\$227.50	\$11 After School Only
Daily Drop In	\$62/day	\$53/day	\$43 Full Day

A. FEES

- a. **\$30** A one-time registration fee is required upon enrollment of your child at the center.
- b. **\$300** A security deposit due upon enrollment of your family. This is non-refundable fee to secure your child's spot. After one year if you have not enrolled your child, your deposit will expire.
- c. **\$5** A late fee of \$5 per day will be added if a weekly payment is not received by the beginning of the business day on Tuesday (or the beginning of the business day on Wednesday if the center is not open on Monday). If payment is one week or more past due, care may be discontinued at the discretion of Tiny Tykes until payment, including late fee is paid in full.
- d. Parents agree to pay a late fee of **\$2 per minute, per child after 5:30 p.m.** if a child is not picked up by the center closing time. All parents and children must be exiting our building by 5:30 or a late fee will be charged. **After 5 minutes the late fee is \$5 per minute, per child.** The parent understands that after 6:00 p.m. Monday through Friday, if the emergency contact listed for the child cannot be reached, Battle Lake Police Department will be called, and the proper authorities contacted.
- e. Parent understands that childcare fees may be subject to change at any time during a child's enrollment and that parent will need to sign a new agreement each time the childcare tuition changes.

- f. All payments for care are due in advance, beginning on the first day of enrollment. Payments are due weekly every Monday thereafter or monthly.
- g. If either party gives a 2-week notice of termination of care, the parent must pay for this time, regardless of if care is being given. If the parent does not provide a 2-week notice of termination of care, the parent is still responsible for payment for the time period.
- h. As written above, fees are payable in advance. However, if Tiny Tykes must resort to measures to collect on your overdue account by way of collection agency or any other legal action, you will be responsible for not only the account balance, but the costs incurred by Tiny Tykes for such action, including attorney fees, plus 15% interest of any outstanding balance.
- i. Drop-In Care is treated as first come first serve, so it is important to get your monthly schedules into us in advance. You will not be guaranteed a spot for the days your child is signed up. You also understand that each day you have signed your child up you are responsible for paying unless Tiny Tykes does not have room for your child. Drop-in care will be re-evaluated every 6 months.
- j. Your child's tuition decreases from infant/toddler tuition rate to preschool tuition rate the following month past the child's birthday. Example: Johnny turns 3 on January 16th. The new rate will begin on February 1st.
- k. A preschool curriculum fee is established annually based on curriculum chosen and rates. This fee will be communicated with daycare families prior to the beginning of each school year.
- l. Any damage over \$10.00 done to the building or the objects in it will be reimbursed by the parent unless it is an accident.
- m. Fire Pull-Down Stations – These are in each classroom and by the front door. If your child pulls the fire alarm when they are in the parent's possession the parents will be responsible to cover the fees associated with this when the fire department/police are notified. Anytime the alarm is pulled both the fire and police department are automatically contacted.

B. WITHDRAWAL

- a. **Voluntary** - A 2-week written notice is required for discontinuation of care in which payment as usual is required.
- b. **Termination** - The director of the center may terminate the contract by giving a 2-week notice, payment as usual is required during this time.
- c. Reasons for possible termination are as follows:

- i. Consistent disruptive behavior by a child causing excessive management problems for the staff.
 - 1. Documentation will be given.
 - 2. Parent involvement will be suggested.
- ii. Lack of cooperation from parents/guardians to support the following guidelines:
 - 1. Habitual late pick up of your child.
 - 2. Out of date health, immunization and/or emergency forms.
 - 3. Verbal, physical, or psychological abuse of staff or children.
 - 4. Continued delinquency of payment.

C. HOURS | HOLIDAYS | VACATIONS | ABSENCES

a. Hours of Operation

- i. Tiny Tykes is open Monday through Friday, 7:00 a.m. to 5:30 p.m.

b. Holidays

- i. There is no charge for the following holiday closures:

- | | |
|---------------------|------------------|
| 1) New Year's Day | 2) Memorial Day |
| 3) Independence Day | 4) Labor Day |
| 5) Thanksgiving Day | 6) Christmas Eve |
| 7) Christmas Day | |

- ii. If the holiday falls on a Saturday, the center may be closed the Friday before the holiday. If a holiday falls on a Sunday, the center may be closed the Monday after the holiday. If Tiny Tykes has enough available staff to work these shifts and there is enough interest in families, we will have a signup sheet to see if it is a possibility for the center to remain open.
- iii. Parent agrees to pay for days in which their child is absent. There is **NO CREDIT** given for illness, funeral, or any other absences.

c. Vacations

- i. To sustain a consistent schedule and budget for Tiny Tykes, it is our policy that all family and/or school vacation days require regular tuition payment to reserve your child's enrollment at the center. Tuition is due prior to vacation(s).

D. AGES SERVED

- a. Tiny Tykes serves ages 6 weeks – 12 years.
- b. Maximum occupancy is 46 children.

E. CHILD CARE PROGRAM PLAN

- a. The program plan is developed and evaluated in writing annually by the director.
- b. Goals and Objectives
 - i. The children will:

1. Enjoy learning.
2. Develop socially and emotionally.
3. Be exposed to a diverse population where leaving respect for self and others is an ongoing objective.
4. Gain skill in communicating.
5. Increase auditory and visual skills.
6. Develop muscular coordination (both gross and fine motor) within the limits of his/her physical maturation.
7. Solve problems independently and collaboratively through play and exploration of their surroundings.
8. Increase their ability to think independently, make decisions, and perceive possibilities in open-ended situations.
9. Grow in basic math and pre-reading skills.
10. Creatively participate in art and music while learning the proper use of the tools and instruments related to these areas.

F. WRITTEN ASSESSMENT

- a. The intellectual, physical, social, and emotional progress of each child will be documented in the child's record and conveyed to the parents twice a year during conferences.

G. HEALTH CARE SUMMARY

- a. A copy of the health care summary is required within 30 days of enrollment.

H. IMMUNIZATION RECORDS

- a. The child's immunization record is required at the time of enrollment.
- b. The Minnesota Department of Health requires you to keep their children's immunization records up to date in compliance with state licensing requirements. Parent agrees to provide the center with a current immunization record for each child. Parent further agrees to provide an updated copy of this record each time a child receives any additional immunizations. If upon enrollment and as age appropriate your child requires routine health services, a copy of an appointment reminder with a health consultant will suffice to keep children enrolled.
 - i. Children may be exempt from immunization requirements for the following reasons:
 1. Medical Exemption: Requires a certificate signed by a licensed physician stating that the physical condition of the child is such that immunization would endanger the life or health of the child.
 2. History of Chickenpox Disease: Requires a certificate signed by the parent or guardian stating that the child has a history of chickenpox disease.
 3. Philosophical, Moral or Religious Belief Exemption: Requires a certificate signed by the parent or guardian who is sincerely held

philosophical, moral, or religious belief is opposed to such immunizations.

I. ILLNESS | EXCLUSION

- a. If your child is sick, payment in full is still required.
- b. Parents will be notified when their child has signs or symptoms that require exclusion from the center. If a parent is not to be reached the emergency contact person will be next.
- c. Reasons a child may be excluded are as follows:
 - i. An illness that is preventing your child from participating comfortably in activities.
 - ii. An illness that has resulted in a need for greater care than the center can provide without compromising the health and safety of other children.
 - iii. The child has any of the following conditions:
 1. **Fever** – A child with a fever of 100 degrees or higher will be asked to leave the center. The child may return when they are fever free for at least 24-hours without the use of fever reducing medications.
 2. **Diarrhea** – If your child has more than 3 loose stools over the normal schedule or cannot be contained within a diaper you will have to pick up your child. The child may return when their stools return to a normal consistency for 24 hours. Any underwear or clothing that has feces on it or in it will be either bagged or thrown depending on your request. Please note that we are unable to dispose or clean out any feces.
 3. **Vomiting** – If a child has vomited, they will be sent home from the center. The child may return when they have been vomit-free for 24-hours and they are able to tolerate foods.
 4. **Eye Infections** – Parents will be notified if their child has signs or symptoms of conjunctivitis. The child must be taken to the doctor and put on medication for at least 24 hours before returning.
 5. **Strep Throat** – A child with strep throat will be sent home from the center. The child may return when they have been on antibiotics for at least 24 hours.
 6. **Hand, Foot and Mouth** – Doctors recommend 5-7 days out and that your child be fever free for 24 hours. Your child may return when blisters are scabbed over with no sign of any puss.
 7. **Lice** – The incubation period is one to three weeks. Your child may return to preschool after treatment with medicated lice ridding shampoos and all nits are removed from the hair. Please check your child's head if you have been exposed and notify Tiny Tykes if you have a confirmed case. In addition, staff will be checking daily to make sure your child is nit free. We will provide you with

additional information from health care sources should you have any questions.

8. **Coronavirus** – With many changes, Tiny Tykes will follow what the State of Minnesota requires us to do.
 - a. **Families will be charged if there is a Coronavirus exposure in the childcare setting (staff or child) or in the community.**
9. **Respiratory Syncytial Virus (RSV) Infection** – If a child has RSV they may return once they are fever free for 24 hours without the aid of fever reducing medications, and the child is well enough to participate in routine activities.
10. **Pneumonia** – If a child is diagnosed with Pneumonia they may return once they are fever free for 24 hours without the add of fever reducing medications, and the child is well enough to participate in routine activities.
11. **Roseola** – If a child has been diagnosed with Roseola they may return once they are fever free for 24 hours without the aid of fever reducing medications. If the rash is still progressing, then they are to stay out until the rash stops progressing.
12. **Rashes** – All rashes on a child must be evaluated by a health care professional. If a rash is found on your child, they will be sent home to be evaluated.
13. **Chicken Pox** – If your child has chicken pox they must stay out until all blisters have dried into scabs; usually by day 6 after the rash began.
 - a. Chickenpox can occur even if someone has had the varicella vaccine. These are referred to as breakthrough infections. Breakthrough infections develop more than 42 days after vaccination, are usually less severe, have an atypical presentation (low or no fever, less than 50 skin lesions), and are shorter in duration (4 to 6 days). Bumps, rather than blisters, may develop; therefore, scabs may not be present. Breakthrough cases should be considered infectious. These cases should be excluded until all sores (bumps/blisters/scabs) have faded or no new sores have occurred within a 24-hour period, whichever is later. Sores do not need to be completely resolved before the case is allowed to be returned.

J. EMERGENCY & ACCIDENT/INJURY POLICIES & RECORDS

- a. Written record of accidents, injuries, and incidents will be provided to the child's family and will include name and age of person's involved, date of the accident,

- place of the accident, type of injury, action taken by the staff person's and to whom the accident/injury was reported to.
- b. Yearly accident/injury reports will be reviewed and modified, and changes will be made where necessary.
 - c. Procedures for administering First Aid:
 - i. All teachers and assistant teachers are trained in pediatric first aid and infant and child CPR within 90 days of the start of work. There will be an individual trained in pediatric first aid and infant child CPR present in the facility during all hours of operation as well as on field trips and when transporting children, but within 90 days of initial licensure, all teachers and assistant teachers will be trained.
 - d. Safety rules to follow in avoiding each of the following:
 - i. **Injuries** – Incident reports will be filled out if necessary. Parents will be notified immediately via Brightwheel.
 - ii. **Burns** – No children will be allowed in the kitchen, only the cook. The water temperature will be at the correct temperature in each classroom and bathrooms.
 - iii. **Suffocation** – Employees will follow the guidelines for Safe Sleeping.
 - iv. **Pedestrian Accidents** – No children will ever be unattended.
 - v. **Poisoning** – All toxic materials will be out of children's reach in a designated area. Poison Control will be called 1-800-222-1222
 - vi. **Choking** – All staff within 90 days of employment will be trained in CPR and First Aid. There will be someone on site at all times trained.
 - vii. **Traffic Accidents** – At this time there will be no transportation.
 - e. The program will conduct a daily inspection of potential hazards in the center and on the outdoor activity area.
 - f. **Fire Prevention Procedures**
 - i. Mandate monthly fire drills and a log of dates and times showing that the fire drills were held.
 - ii. Smoke alarms will be checked twice a year. Fire inspections will be conducted annually. There is no smoking on Tiny Tykes premises. The heat producing equipment will be properly cleaned. Fire extinguishers will be provided throughout the entire building and staff will be trained on these too.
 - iii. Evacuate because of fire: fire evacuation routes are posted on all of the doorways and have diagrams indicating which area of the center uses which exit.
 - iv. Age groups of children assemble as far away from the building as possible, then proceed as a group with their staff to the Oasis Parking lot just south of the building.
 - v. In the event of fire in the center, direct exits lead from the infant, toddler, and preschool rooms to the outside.

- vi. General guidelines include follow the exit map on your classroom door; keep children in group and away from the building; take head counts and roll attendance when outside; hold children's hands when exiting.
- vii. All classrooms are equipped with smoke detectors.
- viii. In the event of an emergency each teacher in the classroom is responsible for their group of children. All doors and windows will be closed to help close off a fire area.
- ix. All staff are properly trained to carry out our fire procedures.
- x. The following are rules to follow for using a fire extinguisher:
 1. Pull the pin on the extinguisher.
 2. Aim the hose nozzle low toward the base of the fire.
 3. Squeeze the handle to release the extinguishing agent.
 4. Sweep the nozzle from side to side at the base of the flames until extinguished.
- g. In an emergency, the center has parents' permission to seek medical help as seen fit the child's best interest. Parent understands that it is their responsibility to keep all emergency information in a child's file current and up to date. In an emergency, please call the director of the center to see where we re-located. An emergency binder will be brought with, with everyone's information.

K. EMERGENCY PREPAREDNESS

- a. **Procedures for evacuation of fire** – fire evacuation routes are posted on all of the doorways and have diagrams indicating which area of the center uses which exit. Age groups of children assemble as far away from the building as possible, then proceed as a group with their staff to either the Oasis parking lot or First Lutheran Church parking lot. In the event of fire in the center, exit to the nearest doorway that leads outside. General guidelines include to follow the exit map on your classroom door; keep children in group and away from the building; take head counts and roll attendance when outside; hold children's hands when exiting. All classrooms are equipped with smoke detectors.
- b. **Procedures for evacuation of tornado** – tornado evacuation routes are posted on all of the doorways and have diagrams indicating which area of the center uses which exit. Age groups of all children assemble in the bathrooms or storage rooms, crouching next to the walls and/or under the conference table. When weather is threatening, keep children's play away from the windows. Monthly tornado drills are conducted January through December. When evacuation is deemed necessary, children in preschool and toddler rooms will exit out the north door and the infant rooms will exit out the south door. From leaving Tiny Tykes you will then head to the First Lutheran Church. Children should crouch near the walls in the 'tuck' position and cover their heads with their arms.
- c. **Shelter in place** – danger outside of the building or danger inside the building; lockdown. All doors are locked, all shades are drawn, children and staff gather in safe places: preschool and toddler storage rooms, preschool and toddler

bathrooms and infants to the utility room. We will admit no one until we get all clear from authorities.

- d. **Evacuation routes** – Each room has their routes posted in their rooms.
 - i. Procedures for notifying a child’s parent or legal guardian due to evacuation, relocation, shelter-in-place, or lockdown & reunification with families will be to contact the first person listed in roll binder and if not available the first emergency contact will be reached.
- e. **Accommodations for a child with a disability or a chronic medical condition** – The center does enroll children with special needs (a generally recognized and persistent physical, mental, or emotional disability) whenever feasible for the child and the center. In these cases, an appropriate statement from the child’s physician or professional referring agency must be submitted. If a child currently enrolled develops signs of special needs, center staff will recommend available resources to parents for the diagnosis of the condition. The Center will work with the parent to implement therapies to the best of the Center’s abilities. In the unlikely event Tiny Tykes Child Care Center can no longer adequately meet the individual needs of the child, the director will set a date for termination of center services and will offer the parent information about alternative resources.
- f. Procedures for storing a child’s medically necessary medicine that facilitates easy removal during an evacuation or relocation is in the preschool room in the cupboard above the counter.
- g. Continuing operations in the period during and after a crisis is posted in our childcare emergency plan.
- h. Procedures for communicating with local emergency management officials, law enforcement officials, or other appropriate state or local authorities is listed in our childcare emergency plan.

L. TORNADO

- a. Evacuation maps are posted in each room showing the evacuation routes for each classroom. Drills are performed once a month and are documented.

M. WINTER WEATHER POLICY

- a. If we were to have to close due to winter weather, you will be notified through the Brightwheel app.
- b. There is **NO CREDIT** given on inclement weather days when the center is open for any portion of the day.

N. MEDICATION

- a. All prescribed and over-the-counter medications must be brought in original dispensing bottles. A medication permission slip must be completed for each medication type and request to dispense. These forms can be provided to you upon request.
- b.

O. ACCIDENT | INJURY

- a. If a child is injured during care and medical attention is required, parents will be notified immediately. It is vital that emergency contact information is kept up to date.

P. ALLERGY PREVENTION & RESPONSE

- a. Tiny Tykes will obtain documentation of any known allergy from a child's parent or legal guardian or the child's source of medical care before admitting the child for care. If a child has a known allergy, we will maintain current information about the child allergy in the child's record.
- b. **IEP** – The individual childcare program plan will include but not limited to a description of the allergy, specific triggers, avoidance techniques, symptoms of an allergic reaction, and procedures for responding to an allergic reaction, including medication, dosages, and a doctor's contact information.
- c. Each staff person is responsible for carrying out the individual childcare program plan review and follow the plan. Documentation of a staff person's review will be kept on site.
- d. **Any Changes** – Annually or following any changes made to allergy-related information in the child's record, the center will update the child's individual childcare program plan and inform each staff person who is responsible for carrying out the individual childcare program plan of the change. The center will keep on site documentation that a staff person was informed of a change.
- e. **Allergy Information** – A child's allergy information will always be available including on site, when on field trips, or during transportation. A child's food allergy information will be readily available to a staff person in the area where food is prepared and served to the child.
- f. **Exposure** – The director will contact the child's parent or legal guardian as soon as possible in any instance of exposure or allergic reaction that requires medication or medical intervention. The director will call emergency medical services when epinephrine is administered to a child in the center's care.

Q. PARENTAL PERMISSION/FIELD TRIP FORM

- a. Please see attached form to fill out and hand in.

R. PUBLIC RELATIONS

- a. Please see attached form to fill out and hand in.

S. HANDLING & DISPOSAL OF BODILY FLUIDS

- a. Surfaces that encounter potentially infectious bodily fluids, including blood and vomit, must be cleaned and disinfected.
- b. Blood contaminated material must be disposed of in a plastic bag with a secure tie.

- c. Sharp items used for a child with special care needs must be disposed of in a "sharps container." The sharps container must be stored out of reach of children.

T. DIAPERING PROCEDURES & PRACTICES

- a. Are followed by the Minnesota Childcare Health Consultants and are posted at each diaper changing area.

U. PROCEDURES FOR FOOD PREPARED ON SITE

- a. Preparation of food will only be conducted on site in the kitchen.
- b. All utensils and equipment will be sanitized and disinfected properly.
- c. Gloves will be used while serving.
- d. Hand washing procedures will be posted by each sink.

V. INFANT/TODDLER MEALS

- a. Tiny Tykes does not offer solid foods and fruit juices to infants younger than six months of age unless that practice is recommended by the child's health care provider and approved by families. Sweetened beverages are avoided. If juice (only 100% fruit juice is recommended) is served, the amount is limited to no more than four ounces per child daily.
- b. Infants unable to sit are held for bottle-feeding. All others sit or are held to be fed.
- c. Infants and toddlers/twos do not have bottles while in a crib or bed and do not eat from propped bottles at any time. Toddlers/twos do not carry bottles, sippy cups, or regular cups with them while crawling or walking.
- d. Teaching staff offer children fluids from a cup as soon as the families and teachers decide together that a child is developmentally ready to use a cup.
- e. The center staff work with families (who are informed by their child's health care provider) to ensure that the food is based on the infants' individual nutritional needs and developmental stage.
- f. Except for human milk, staff serve only formula and infant food that comes to the facility in factory sealed containers (e.g., ready-to-feed powder or concentrate formulas and baby food jars) prepared according to the manufacturer's instructions. Bottle feedings do not contain solid foods unless the child's health care provider supplies written instructions and a medical reason for this practice. Staff discard after one hour any formula or human milk that is served but not completely consumed or is not refrigerated. If staff warm formula or human milk, the milk is warmed in water at no more than 120 degrees Fahrenheit for no more than five minutes. No milk, including human milk, and no other infant foods are warmed in a microwave oven.
- g. We feed whole or reduced fat cow's milk to children ages 12-24 months. We do not feed cow's milk to children younger than 12 months. A request to differ from the latter policy would require a Special Dietary Statement from the child's health care provider.

W. BREASTFEEDING

- a. Our program 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 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; ensuring that staff gently mix, not shake, the milk before feeding to preserve special infection-fighting and nutritional components in human milk; and providing a comfortable place for breastfeeding and coordinating feedings with the infant's mother.

X. PET POLICY

- a. There will be no pets on Tiny Tykes property.

Y. VISITING HOURS

- a. Parents of enrolled children may visit the center anytime during the hours of operation. Any enrolled child's parents or legal guardians are allowed access to the parents or legal guardians child at any time while the child is in care.

Z. PERSONAL BELONGINGS

- a. A small amount of storage is available for each child. It is extremely difficult for us to keep track of your child's toys. Therefore, we ask that you DON'T send things from home unless it is show 'n tell day. Please do not let your child bring war toys or toys that have weapons on them for any reason. We will not be responsible for lost or broken toys.

AA. OUTDOOR POLICY

- a. It is extremely important for children to have outdoor playtime daily. If you request your child not to go outside, it is required for you to obtain a written order from your child's health care provider. If you feel your child is too sick to go outside, then they are probably too sick to be at the center. Parents are always responsible to provide sunscreen for their child(ren) to keep at the center. Sunscreen will be applied before each time of going outside and reapplied as needed according to the sunscreens instructions.
- b. Parents are required to make sure their children are dressed appropriately for the weather. Hats, mittens, jackets, snow pants, and boots are required by the parents to bring each day. You will be notified if your child does not have the proper clothes.
- c. Tiny Tykes is committed to protecting all children from the harmful effects of the UV rays from the sun. Our sun safety policy is as follows:
 - a. Sun protection practices will be followed year-round.
 - b. Water will be provided and offered frequently for children during outdoor activities.

- c. We ask that parents provide sunscreen for their child. If you don't provide sunscreen for your child; your child will not have sunscreen applied to them.
 - d. Sunscreen will be applied to all children 6 months and older 20-30 minutes before outdoor activities and will be re-applied every 2 hours. Children under 6 months will be kept out of direct sunlight as sunscreen is not recommended.
 - e. If sunscreen and insect repellent both need to be applied, the sunscreen will be applied first.
 - f. Sunscreen should not be used past the expiration date. Expired sunscreen will be sent home and you will be asked to bring in new sunscreen.
 - g. All sunscreen and bug sprays will be kept out of the reach of children.
- d. **Aquatic Activity** – There are no swimming pools or wading pools at our center.

BB. NAP & REST POLICY

- a. **Parent consultation** – The parent of each child must be informed at the time the child is enrolled of the center's policy on naps and rest.
- b. **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.
- c. **Placement of equipment** – Naps and rest must be provided in a quiet area that is physically separated from children who are engaged in activity that will disrupt a napping or resting child. Cribs, cots, beds, and mats must be placed so there are clear aisles and unimpeded access for both adults and children on at least one side of each piece of napping and resting equipment. Cribs, cots, beds, and mats must be placed directly on the floor and must not be stacked when in use.
- d. **Crib standard** – A crib or portable crib must be provided for each infant for which the center is licensed to provide care. The equipment will be safe & of sturdy construction that conforms to federal crib standards.
- e. **Bedding** – Separate bedding must be provided for each child in care. Bedding must be washed weekly and when soiled or wet. Blankets must be washed or dry cleaned weekly and when soiled or wet.
- f. Staff sit or lie next to children, rub their backs and comfort them to help them fall asleep. When children are up, staff attend to cots as directed by their lead teacher. All staff will be within sight and hearing of all children.
- g. **Naptime Drop Off** – Please try to avoid dropping your child off between the hours of 12:30 p.m. and 2:30 p.m. This can be a disruption to the children that are napping or resting during that time.

Reduction of Risk of Sudden Unexpected Infant Death:

- Each infant will be put to sleep on their back within sight or hearing of a staff, unless we have documentation from the infant's physician directing an alternative sleeping position for the infant. The physician directive must be

on a form approved by the commissioner- Physician's Directive for Infant Sleep Position form and will remain on file at the licensed location. An infant who independently rolls onto its stomach after being placed to sleep on its back may be allowed to remain sleeping on its stomach if the infant is at least 6 months of age or we have a signed statement from the parent indicating that the infant regularly rolls over at home.

- Each infant will be placed in a crib on a firm mattress with a fitted sheet that is appropriate to the mattress size that fits tightly on the mattress and overlaps the underside of the mattress so it cannot be dislodged by pulling on the corner of the sheet with reasonable effort. Nothing will be placed in the crib with the infant except for the infant's pacifier.
- If an infant fall asleep before being placed in a crib, we must move the infant to a crib as soon as practicable and must keep the infant within sight of the license holder until the infant is placed in a crib. -When infant falls asleep while being held, the employee must consider the supervision needs of other children in care when determining how long to hold the infant before placing the infant in a crib to sleep. The sleeping infant must not be in a position where the airway may be blocked or with anything covering the infant's face.
- Placing a swaddled infant down to sleep is not recommended for an infant of any age and is prohibited for any infant who has begun to roll over independently. However, with the written consent of a parent or guardian, the staff may place the infant who has not yet begun to roll over on its own down to sleep in a one-piece sleeper equipped with an attached system that fastens securely only across the upper torso, with no constriction of the hips or legs, to create a swaddle. Prior to any use of swaddling for sleep by a caregiver, the caregiver must obtain informed written consent for the use of swaddling from the parent or guardian of the infant on a form approved by the commissioner Parent Consent for Swaddling and prepared in partnership with the Minnesota Sudden Infant Death Center.

CC. GRIEVANCE

- a. Parent may contact the childcare center's director regarding a grievance at any time.

DD. AUTHORIZATION FOR ARRIVALS AND DEPARTURES

- a. Parent is required to disclose all individuals authorized to pick up each child in advance. Tiny Tykes will release a child only to a parent, guardian or other adult as authorized by parent.
- b. Any person picking up a child not known personally to Tiny Tykes staff will be required to present a picture ID.
- c. If not an authorized person on file, the parent will notify the Center when an individual they have designated as an authorized pick-up person before picking up

their child(ren). The person's name will then be added to the "authorized people to pick up" in their file. Children are only released to authorized persons.

- d. When an authorized person comes to pick up a child, staff should:
 - i. Ask the name of the person attempting to pick up the child.
 - ii. Ask to see a photo I.D. to verify their identity. Staff members must I.D. any person he or she does not know. This includes parents.
 - iii. Check child's file in the office to see if that person is listed as authorized.
 - iv. Verbal permission will be accepted over the phone ONLY if that person is already authorized.
 - v. Release the child only after verifying the person's identity and with parent/guardian authorization.
- e. If the parent or authorized adults are unavailable or cannot be reached by 30 minutes after closing time, the center will contact the Battle Lake Police Department to take custody of the child.
- f. If you request that we deny access of any person to a child or deny release of a child to a particular person, you must provide us with the court documents validating that request and stipulating what law enforcement shall do in such an event.
- g. In families where parents are separated or divorced, the custodial parent must have on file at the Center a copy of the legal documents stipulating custody and/or visitation, such as a Minnesota Voluntary Recognition of Parentage. Both front and back need to be copied. Consistent with Minnesota state law [MN Statute 257.541], sole custody of children born to parents who were not married to each other at the time of the child's birth resides with the mother. Only a parent with custody may pick up a child, and only a parent with custody may designate and authorize someone else to pick up a child.

EE. Unauthorized Person

- a. If the person attempting to pick up the child is not listed or is listed as unauthorized or is a person who is suspected of abuse, staff should call law enforcement immediately by dialing 911. Tell the unauthorized person that the Center cannot release children to anyone other than those listed as authorized, and that they are not listed.

FF. Incapacitated person

- a. If a parent or authorized person who is obviously incapacitated attempts to pick up a child, the following common-sense procedures should be followed. Staff should:
 - i. Tell them he or she would prefer they not drive; his or her concern is for the family.
 - ii. Offer to call them a cab or a friend to drive them.
 - iii. Call the Battle Lake Police if they leave with the child.

GG. ACCOUNTABILITY PROCEDURE

- a. In the event a child is not picked up or a child is absent without notification from a parent or guardian the centers protocol is to:
 - i. First – attempt to call the parents, and/or other contacts listed for the child.
 - ii. Second – call authorities

HH. CONDUCT PROCEDURE

- a. The center reserves the right to dismiss any child whose behavior and/or parental behavior becomes disruptive or detrimental to the peace and safety of other children or staff. The childcare center will work closely with the parents to try to resolve any behavioral problems after redirection has taken place. Parent understands that childcare services may be terminated if an agreement cannot be reached; or the peace and safety of the other children and/or staff are at risk.

II. RELEASE OF CHILDREN IN AN EMERGENCY

- a. Parents must designate at least two (2) individuals who are authorized to pick up their child in emergency situations.
- b. These two must be other than the parents.
- c. Only those persons authorized by the parent on the Authorization to Pick- Up form may sign-out, pick up, or visit a child.
- d. Parents must notify the center when persons other than themselves will be picking up and visiting children, so we are prepared.
- e. Photo I.D. will be requested.

JJ. CHILD CUSTODY

- a. Child custody in most cases, both Mom and Dad continue to have equal rights where their children are concerned. If you have a court order that limits the rights of one parent in matters such as custody or visitation, please bring a copy to the office. Unless your court order is on file with us, we must provide equal rights to both parents.

KK. PERSISTENT UNACCEPTABLE BEHAVIOR

- a. Extraordinary Behavior
 - i. The Center will not tolerate swearing or biased language. If a child uses such language, parents will be informed and asked to discourage the behavior. When a child engages in persistent unacceptable behavior, parents are required to meet with teachers to find a solution to the problem behavior and resolve the difficulty.
 - ii. Outside professional consultation or evaluation may be necessary. Occasionally a child does not adjust to the center environment or a child's repeated behavior interferes with the daily activities of the center. In such cases the center reserves the right to request the child leave the

program when there is no improvement in the child's behavior after the implementation of the plan agreed upon by the parent and teacher.

LL. BEHAVIOR GUIDANCE POLICY & PROCEDURE

- a. Ensure that each child is provided with a positive model of acceptable behavior.
- b. Be tailored to the developmental level of the children that the center is licensed to serve.
- c. Will redirect children and groups away from problems toward constructive activity to reduce conflict.
- d. Teach children how to use acceptable alternatives to problem behavior to reduce conflict.
- e. Protect the safety of children and staff persons.
- f. Provide immediate and directly related consequences for a child's unacceptable behavior.
- g. **Biting Policy** – one behavior that is unfortunate but not unexpected is biting. Biting is never the right thing to do. Most reasons children bite is not related to behavior problems but to the child's development, environment, or if they are unable to express their feelings with words.
 - i. Staff response to biting:
 1. Separate the children and comfort the child who was bitten.
 2. Wash the wound with soap and water and apply ice, if necessary.
 3. Talk to the biter using words such as: "biting with your teacher hurts."
 4. Try to find out what causes the child to bite.
 5. Offer teethingers to the child for something to chew on, redirect both children to separate activities.
 6. Staff will implement a behavior plan to shadow the biter and proactively address and redirect the behavior.
 - ii. If biting persists, we will shadow the child and try to stop the behavior or redirect the child as needed until the biting phase resolves.

MM. PROHIBITED ACTIONS

- a. Subjection of a child to corporal punishment, which includes but is not limited to:
 - i. Rough Handling Kicking
 - ii. Shoving Biting
 - iii. Hair Pulling Pinching
 - iv. Ear Pulling Hitting
 - v. Shaking Spanking
 - vi. Slapping
- b. Subjection of a child to emotional stress, which includes but is not limited to:
 - i. Name calling
 - ii. Ostracism
 - iii. Shaming
 - iv. Making derogatory remarks about a child or the child's family

- v. Using language that threatens, humiliates, or frightens the child
- c. Separation of a child from the group except within rule requirements
- d. Punishments for lapses in toileting
- 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 where containment is necessary to protect a child or others from harm.
- g. The use of mechanical restraints, such as tying.

NN. SEPARATION FROM THE GROUP

- a. No child may be separated from the group unless the following has occurred:
 - i. Less intrusive methods of guiding the child's behavior have been tried and were ineffective.
 - ii. The child's behavior threatens the well-being of the child or other children in the program.
- b. A child who requires separation from the group must:
 - i. Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person.
 - ii. 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
 - iii. The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.
- c. Children between the ages of six weeks and 16 months must not be separated from the group as a means of behavior guidance.

OO. SEPARATION REPORT

- a. All separations from the group must be noted on a daily log that must include items i-vii: See Attached: Separation Report Worksheet
 - i. The child's name.
 - ii. The staff person's name
 - iii. Time
 - iv. Date
 - v. Information indicating what less intrusive methods were used to guide the child's behavior.
 - vi. How the child's behavior continued to threaten the well-being of the child or other children in care.
 - vii. If a child separated from the group three or more times in one day, the child's parent shall be notified, and the parent notification shall be indicated on the daily log.
 - viii. If a child is separated five or more times in one week, eight times or more in two weeks, the procedures in for Persistent Unacceptable Behavior must be followed.

PP. MALTREATMENT OF MINORS MANDATED REPORTING POLICY

a. Who Should Report Child Abuse and Neglect

- i. Procedure to follow if parent/guardian is suspected of child abuse. The staff will not release any child if any parent or guardian is suspected of child abuse.
- ii. Any person may voluntarily report abuse or neglect.
- iii. If you work with children in a licensed facility, you are legally required or mandated to report and cannot shift the responsibility of reporting to your supervisor or to anyone else at your licensed facility. If you know or have reason to believe a child is being or has been neglected or physically or sexually abused within the preceding three years you must immediately (within 24 hours) make a report to an outside agency.

b. Where to Report

- i. If you know or suspect that a child is in immediate danger, call 911.
- ii. Reports concerning suspected abuse or neglect of children occurring in a licensed child foster care or family childcare facility should be made to county child protection services.
- iii. Reports concerning suspected abuse or neglect of children occurring in all other facilities licensed 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.
- iv. Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency at 651-431-6500 or local law enforcement at 218-998-8555.
- v. 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, for reporting possible licensing violations.

c. What to Report

- i. 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.
- ii. A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include any actions taken by the facility in response to the incident.

- iii. 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.

d. Failure to Report

- i. 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 MN Department of Human Services Division of Licensing programs licensed by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations.

e. Retaliation Prohibited

- i. 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.

f. Internal Review

- i. 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:
 - 1. related policies and procedures were followed;
 - 2. the policies and procedures were adequate;
 - 3. there is a need for additional staff training;
 - 4. the reported event is similar to past events with the children or the services involved; and
 - 5. there is a need for corrective action by the license holder to protect the health and safety of children in care.

g. Primary and Secondary Person or Position to Ensure Internal Reviews are Completed

- i. The internal review will be completed by the Owner/Director.
- ii. If this individual is involved in the alleged or suspected maltreatment, the Owner/Director will be responsible for completing the internal review.

h. Documentation of the Internal Review

- a. The facility must document completion of the internal review and make internal reviews accessible to the commissioner immediately upon the commissioner's request.
- i. **Corrective Action Plan**
 - i. 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.
- j. **Staff Training**
 - i. The license holder must provide training to all staff related to the mandated reporting responsibilities as specified in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556).
 - ii. The license holder must document the provision of this training in individual personnel records, monitor implementation by staff, and ensure that the policy is readily accessible to staff, as specified under Minnesota Statutes, section 245A.04, subdivision 14.

QQ. SUSPECTED CHILD ABUSE | NEGLECT

- a. Early childhood services program providers and staff are mandated by Minnesota to report suspected child abuse and/or neglect to our licenser. The director of the center will report all documented concerns.

RR. PROGRAM DRUG & ALCOHOL POLICY

- a. Drug & Alcohol is prohibited by employees, subcontractors, and volunteers when directly responsible for persons in our program, from abusing prescription medication or being in any manner under the influence of a chemical that impairs the individual's ability to provide services or care. The director will train employees, subcontractors, and volunteers about the program's drug and alcohol policy.

SS. MISSING CHILD

- a. The staff person in charge will constantly maintain a head count. If a child is missing, the staff person in charge will immediately notify the director, delegate another person to be in charge, and go in search of the child. If the child is not found in 10 minutes, the Battle Lake Police Department will be notified.

TT. WATER BOTTLES

- a. If reusable water bottles are requested by Tiny Tykes, they will be sent home the same day. If the water bottle is needed to be kept at the center longer, Tiny Tykes will ensure the water bottles are washed and sanitized. All water bottles brought to the center, regardless of how long, will be labeled with the child's first and last name.

UU. COMPLAINTS

- a. Should you have a complaint or feel the need to report a licensing violation: Call DHS 651-431-6500.
- b. Tiny Tykes will post any correction order within 3 business days until the violation has been remedied.

VV. ADDITIONAL TERMS AND CONDITIONS

- a. Communicate
 - i. Make a concerted effort to consistently communicate your family schedule with the center.
 - ii. Notify the center if your child is ill by **9:00** a.m.
 - iii. Notify the center if your child will be absent or late by **9:00** a.m.
 - iv. Notify the Director of any contact information updates, i.e. address, cell or work phone numbers, e-mail.
 - v. Provide no less than a 2-week notice to the center when terminating care.
 - vi. Failure to keep your child's paperwork up to date may result in termination.
- b. Check-In Procedure
 - i. Parent agrees to accompany children into the building and escort them to their classroom. Parents will also sign children in and out every day through the Brightwheel app.
- c. Questions/Concerns
 - i. Share questions or concerns directly with your child's teacher. If your question or concern is not resolved, contact the Director.
- d. Monthly Calendars
 - i. You will find a monthly calendar in your child's cubby each month. This calendar will identify any days that Tiny Tykes will be closed for major holidays listed in this guidebook. We need your help to complete this calendar by identifying any days that your children will not be coming to daycare. This will assist the center in creating a staffing schedule each month. Parents are responsible for returning their monthly calendars by the date listed on the calendar. If a change needs to be made after submitting your family calendar, please notify the Director immediately.
 - ii. If your child is marked on your calendar as absent you must get approval by the director prior to bringing your child for the day. We understand you are being charged for the day however we need to have adequate staff present for the day.
 - iii. It will be **REQUIRED** for your family to turn in a monthly calendar **EACH** month. If your child's schedule has no changes, please write that on the calendar and turn it in. If any changes occur after your schedule is submitted, please see the director **ASAP** to see if changes can be made.

- iv. Please make sure on dates around the holidays you read each calendar carefully as we do sign-up sheets to determine how many staff will need to work. Thanks for your help and cooperation!
- e. Non-Sufficient Funds
 - i. Parent agrees to pay a **\$40 fee** for any payment by check resulting in non-sufficient funds. Parent agrees that following an NSF check, parent may be required to make all future payments in cash. Childcare will be terminated for non-payment of services.
- f. Alternate Pick-Up
 - i. Parent agrees to notify the director of the center, or designee, if someone other than the child's parent will be picking up the child and provide contact information for any person picking up a child and an alternate contact number where parent may be reached.
- g. Withdrawal
 - i. If a child is withdrawn, the child's spot may be filled immediately. For a child to re-enroll, an opening will have to be available. If no openings are available, a child will be placed on the center's waiting list.
- h. Menu
 - i. A monthly menu is posted on the front counter. If your child requires a special diet, please provide their food when necessary. If you would like to bring treats for your child to share on their birthday, please make sure they are store bought treats.

**TINY TYKES
2024**

Signature Page

I HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS OF THIS AGREEMENT.

**Parent/Guardian's Name
(Please print)**

Primary Contact Number

Parent/Guardian's Address

Child's Name

Date of Birth

Child's Name

Date of Birth

Child's Name

Date of Birth

Guardian's E-mail Address

Guardian's E-mail Address

Parent/Guardian Signature

Date:

Director's Signature

Date:

- PLEASE RETAIN ALL PAGES OF THIS AGREEMENT ASIDE FROM THE SIGNATURE PAGE -

Revised 12/01/2023

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