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## **Mission**

St. Cloud State University's Lindgren Child Care Center provides infant, toddler, and pre-school-aged care to the children of SCSU students, staff, and faculty. As a place where theory is put into practice, Lindgren Child Care Center is a training and laboratory resource to the entire campus, and a model of excellence for the community of St. Cloud. Our hours of operation follow the academic calendar. Fall and Spring semesters we provide services Monday through Friday, 7:30 a.m. – 5:00 p.m. During summer sessions we are open Monday through Friday 7:00 a.m. – 4:20 p.m. We are closed according to the University schedule of holidays and days that classes are not in session. Professional development days may also result in the Center being closed.

## **Purpose**

Lindgren Child Care Center opened in September 1980 in response to a need expressed by the non-traditional student body for quality, on-campus child care services. It is one of the excellent student services administered by the Office of Student Life and Development at SCSU, serving as an adjunct to the child's family by providing quality care for children while parents participate within the University.

## **Philosophy**

We believe children are entitled to receive loving care in a safe environment with an educational experience. At Lindgren Child Care Center children are challenged by age-appropriate environments and activities based on knowledge of child development and developmentally appropriate practices, implemented by professional staff. We are committed to ensuring children's health and safety, helping children establish trust in their environment, strengthening their self-identity, and igniting their curiosity through productive, satisfying activity. Through an excellent blend of professional staff and arranged environment, the curriculum helps children know their individuality, understand their special worth, develop self-discipline, and broaden their understanding of individuals different from themselves.

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## Goals for Children

Our overall goal is to provide children with loving care in a safe environment with an educational experience. Specifically, our goals are to give the children the opportunity to:

- Develop a healthy self-concept;
- Develop both socially and emotionally;
- Develop enjoyment of the creative experience;
- Develop trust in adults and peers;
- Develop independence and responsibility for self;
- Develop security and a feeling of success;
- Develop skills in the physical, cognitive and language areas.

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## Goals for Parents

Our goal is to help parents:

- Develop realistic, age appropriate expectations for their children;
- Clarify values and explore methods of child guidance;
- Explore parent involvement as a method of maintaining quality environments for children;
- Strengthen family-school partnerships and communications.

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## Insurance

The State of Minnesota acts as insurer for the Lindgren Child Care Center facility. The University carries a comprehensive liability insurance policy of \$1 million for itself. Parents are encouraged to have their children covered by individual policies.

- Insurance Letter, Appendix I-A

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## Parent Advisory Group

Lindgren Child Care Center is neither led nor governed by a board of directors, advisory group, council or other similar group. We are led by the Vice President of Student Life and Development of St. Cloud State University, and by the director and associate director respectively.

A parent advisory group may be convened by the director to make recommendations about the program, including but not limited to the center's policies, will be with the University President or his/her designee. The committee will consist of 5 student parent users, one Student Life and Development representative, one Child and Family Studies faculty member, one LCCC teacher and the center director.

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## Strategic Planning

The Lindgren Child Care Center has a strategic planning process that outlines actions the program will take to:

### Implementation of Program Vision and Mission

- We are guided by our mission and philosophy, and utilize them in planning all we do. If we were to articulate a vision, it would be *Lindgren Child Care Center will be the foremost early care and education center in the St. Cloud regional area.*
- All of the evidence provided in this self-assessment supports our mission, and we actively implement our mission daily.

### Achieve Outcomes Desired For Children

- Our broad goals for children (above) are met through the curriculum delivery and assessment of each of the individual classrooms. Children's outcomes are informed by the lead teacher's acute knowledge of the developmental levels of her age group of children, and honed by the wedding of assessment results to those developmental outcomes.

### Maintain High Quality Services To Children and Families

- Pursuit of national NAEYC accreditation is the premier evidence of our achievement of high quality services to children and families. However, our stated goals for children and goals for parents also focus our efforts on maintaining these high standards.

### Provide Long-Term Resources to Sustain the Operation of the Program

- This program has been in existence since 1980, with the same, stable funding source over time. We are an integral part of the higher education institution that is St. Cloud State University, and will continue to be, in our service to non-traditional students and in our delivery of academic practicum experience to university students who are not parents.

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### First Aid/ CPR Classes

Staff are required while employed at the Lindgren Child Care Center to maintain current certifications in Pediatric First Aid and Infant Child CPR. Staff will be required to obtain their First Aid and Infant/Child CPR certifications at a mandated center wide training. At least one staff member who has a certificate is always present with each group of children.

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## Americans with Disabilities Act

The Lindgren Child Care Center meets Americans with Disabilities Act (ADA) accessibility requirements. Accessibility includes access to buildings, toilets, sinks, drinking fountains, outdoor play space, and all classroom and therapy areas.

Examination of our center shows that thresholds of doors are not higher than ½ inch, our doors are 32" wide, and the building entry is accessible to a wheelchair. Two toilets that children use do not meet accessibility requirements at this time.

The Lindgren Child Care Center is located within the Engineering and Computing Center (ECC). This building was originally constructed in 1958, as a campus laboratory school. It has undergone renovation in 1986 to its present configuration and usage. It can be noted in the Program Tour that some accommodations have been made to the building, even though it was neither renovated nor constructed after 1993. University administrative officials have been most responsive in making accommodation to children on an as-needed basis. For example in the 1990's we served a child with a fatal UV allergy, so a protective film has been applied to all of our windows, and lights with special filters were purchased at that time.

The enclosed memorandum from Vice President Steve Ludwig, who provides oversight to all buildings and grounds on our campus including the Lindgren Child Care Center, vows that within reason the university would make whatever additional accommodations that might be necessary to ensure a child or college student's participation in our program.

## Closings

The Center will close only under two circumstances: when the University classes are closed, and when all lead teaching staff are absent to attend professional development, unless qualified, licensed substitutes are hired.

### **Cancellation of Classes due to Weather or Other Emergencies:**

Any decision to cancel classes is made by the president or the president's designee, after consultation, as appropriate, with the highway patrol, MTC, MnDOT, MnSCU, the Weather Service, and SCSU Meteorologist. In the event of non-weather related situations, decisions are made after consultation with Student Health Services, Public Safety or others as appropriate. All employees are expected to report for work.

### **Campus Closing due to Weather or Other Emergencies:**

The decision to close the university is made by the president or the president's designee after consultation, as appropriate.

Any decision to close the university or cancel classes or events will be announced, if at all possible, before 6 a.m. for day classes and events, and before 3 p.m. for evening classes and events.

### **Closing/cancellation decisions will be announced as follows:**

Radio: WJON/WWJO, KCLD/KNSI/KZBK/KCML, WCCO 830 AM, KVSC, WYRQ/KFLM/KLTF, KWLM/Q102/K100/KRJB

Television: WCCO Channel 4, KSTP Channel 5, KMSP Channel 9, KARE- 11, KSTC Forty5, UTVS, UPN29

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## Cubbies

Children are provided with cubbies or lockers at the center as a means of keeping their belongings together. Parents should check their child's cubby/locker each day for communications, art projects, wet or soiled clothing, etc. that need to go home.

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## Environmental Hazards

The Lindgren Child Care Center follows all St. Cloud State procedure and policy in dealing with environmental hazards. Program staff protect children and adults from exposure to high levels of air pollution from smog or heavy traffic by limiting outdoor and physical activity as a precaution during smog or other air pollution alerts. Lindgren Child Care Center, as a part of St. Cloud State University, receives Air Quality Advisory notices from Dr. Bob Weisman, Meteorology Professor, as these advisories are issued from the Minnesota Pollution Control Agency. When these advisories are received, the director or associate director passes this information forward to teachers and advises whether or not children ought to go outdoors to play, or how to restrict children's outdoor and physical activity as a precaution to these alerts. Teachers are also a part of the listserv, and have these notices sent to them as well.

Lead and asbestos management policy and procedure is dictated through the office of SCSU's Occupational Health and Safety Department. The Lindgren Child Care Center defers to their policy as we are an entity of SCSU.

Documentary evidence, available on site, indicates that the building has been assessed for lead, radon, radiation, asbestos, fiberglass, or any other hazard from friable material. Evidence exists that the program has taken remedial or containment action to prevent exposure to children and adults if warranted by the assessment.

- Documentation of Environmental Hazard Evaluation, Appendix II-B

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## Fire Alarms

### Fire Alarms

Fully working fire extinguishers and fire alarms are installed in each classroom and are tagged and serviced annually. Fully working carbon monoxide detectors are installed in each classroom and are tagged and serviced annually. Smoke detectors, fire alarms and carbon monoxide detectors are tested monthly, and a written log of testing dates and battery changes is maintained and available.

Our center has hard-wired smoke detectors connected to an internal fire alarm. The alarm system was last tested May 16, 2019 during a campus-wide testing of fire alarms. A fully working fire extinguisher is located in each of the classrooms, and the most recent tag indicates they were serviced 5/19.

Lindgren Child Care Center uses no fuel-burning sources of power, therefore carbon monoxide detectors are not necessary. The water heater in the laundry area is electric, and all heat and cooling comes from the central heating and cooling plant located on campus.

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## Facility Size (Sq. Footage)

There is a minimum of 35 square feet of usable space per child in each of the primary indoor activity areas. (The primary activity area does not include diaper stations, cribs, large structures that cannot be removed or moved aside easily, toilets, any sick-child area, staff rooms, corridors, hallways, stairways, closets, lockers or cubbies, laundry rooms, janitor rooms, furnace rooms, storage areas, and built-in shelving. Specialty areas such as computer rooms, reading rooms, and lunchrooms, where children are expected to remain seated for short periods of time may be excluded from the minimum space requirement.)

The Lindgren Child Care Center is made up of three individual classrooms: infant, toddler, and preschool. The infant room is 300.5 square feet, toddler room is 645.3 square feet, and the preschool room is 1447.5 square feet. Based on these areas, we have enough room for a total of about 8 infants, 17 toddlers, and 41 preschoolers with 35 square feet of space for each child.

The Lindgren Child Care Center outdoor play area is an environment that contains grass, bike paths, sand, a climber, shade under trees and shade under a man-made canopy, benches, flowers, and even some artificial turf. The total area outside in the playground area is 9902 square feet. This is more than twice as many square feet we would have to have for a minimum if all 45 of our enrolled children were outdoors at the same time.

Floor Plans, Appendix II-C

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## Fiscal Policy

Financial policies and the procedures to implement them provide evidence of sound fiscal accountability using standard accounting practices. Financial policies and procedures are consistent with the program's vision, philosophy, mission, goals, and expected child outcomes. Operating budgets are prepared annually, and there is at least quarterly reconciliation of expenses to budget. A system exists to review or adjust the budget if circumstances change, and it includes a yearly audit. Budgets are reviewed and amended as needed. Fiscal records (such as revenue and expenditure statements, balance sheets, banking reconciliation, etc.) are kept as evidence of sound financial management.

The professional team prepares the operating budget annually, and the director and associate director present this budget to the funding source, here the Fee Allocation Committee (FAC) of the St. Cloud State University student government. At least once the administrative team then presents this written budget verbally to the FAC, and stands ready to answer any questions regarding the budget.

The Office of Business Services provides monthly budget reconciliation, and the director likewise conducts paper-pencil reconciliation monthly. This provides close monitoring of line item adequacy, and indicates where spending must be scaled back if necessary. In the rare case where budgets need to be amended, the director makes such a request directly to the FAC.

Fiscal Policy, Appendix II-D

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## Parking

The center is provided with four 10 minute parking and loading spaces. These spaces are to be used only for dropping off and picking up children. Cars parked in these spaces for longer than the limit will be reported to Public Safety and auto-clamped.

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## Pest Control

The Lindgren Child Care Center has a specific Model Pest Control Policy that is part of St. Cloud State University Safety Policies and Procedures. This policy describes the goal of non-toxic pest management techniques inside and outside the facility whenever possible, including an Integrated Pest Management (IPM) system to eliminate or reduce harmful chemical exposures. In the policy implementation, Lindgren designates the director to be the contact person to answer questions from parents and employees about the policy and to coordinate its implementation.

In addition to the implementation of this policy the Lindgren Child Care Center will:

- Inform parents and employee members in writing of the facility's pest control policy
- Pest management decisions will be made on the findings of regular inspections. The center will avoid routine use of pesticides
- Pesticides used at the center will be applied by certified pesticide applicators or registered technicians
- Pesticides will not be applied when children are present in the center. Toys and other items mouthed or handled by the children will be removed from the area before pesticides are applied. Children will not return to the treated area within two hour of a pesticide application or as specified o the pesticide label, whichever item is greater
- In the event of an emergency where pests pose an immediate heath threat to children and employees (e.g. wasps) and pesticides are applied, ensure that children will not return to the treated area within two hours of a pesticide application or as specified on the pesticide label, whichever time is greater
- The Lindgren Child Care Center will provide at least two operational days but not more than 30 days advance notice of pesticide application to parents and employees except in emergencies where pest pose an immediate health threat to children or employees (e.g. wasps)
- Notify parents and employees as soon as possible when advance notice is not provided and include an explanation of the emergency, the reason for the late notice and the name of the pesticide applied
- Make accessible, upon request, all records of pesticide applications and advance notices for at least 90 days

## Exemptions

This policy does not apply to the following exempted uses of pesticides:

- Germicides, disinfectants, bactericides, sanitizing agents, water purifies and swimming pool chemicals used in normal cleaning activities;
  - Personal insect repellents applied to the person with parental consent; and
  - Gel bait or manufactured enclosed insecticides where children do not have access to the bait.
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- SCSU Pest Management Policy, Appendix II-F
  - SCSU Pest Management policy for LCCC, Appendix II-G

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## Group Size, Staff/Child Ratios, and Teaching Assignments

Our policy and procedure/practice will be that each children's age group will have staff assigned to achieve particular ratios as stated. Each Lead Teacher is responsible for scheduling appropriate staff which addresses developmentally appropriate staff-to-child ratios based on scheduled group size. Teaching staff assigned to a particular age group will be primarily assigned to work with that age group throughout the duration of their employment at the Lindgren Child Care Center. Because we operate on an academic calendar we encourage keeping infants and toddlers with their group and teaching staff for the duration of a school year, generally September through May.

The Infant group size is 8 infants. The published ratio in this group is 2:5; operationally one might observe a 1:2 ratio in this room.

The Toddler group size is 12 toddlers. The published ratio in this group is 1:7; operationally one might observe a 1:4 ratio in the toddler room.

The Preschool group size is 20. The published ratio in this group is 1:7; operationally one might observe a 1:5 ratio in the preschool room.

During all hours of operation the published ratio is maintained in each room, other settings (gym), and other outdoor learning environments. It is likely to note the observable ratios during times of high interaction and construction during the day.

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## Maintenance

The Associate Director is responsible for the day to day running of the child care center. Any maintenance of the facility is to be brought to his attention. He in turn makes the appropriate referral for the maintenance to be completed. All maintenance completed at the Lindgren Child Care Center is done by the SCSU Maintenance Staff. Classroom teachers have the responsibility to monitor room specific equipment (toys). Equipment that is broken is brought to the attention of the Associate Director. If the equipment cannot be repaired it must be thrown away and replaced.

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## Nap and Rest Policy

Our sleeping practices are regulated by state licensing, which follow the recommendations for SIDS prevention. Infants are placed in a crib on their back to sleep. The only item that is allowed in the crib for infants under one is a pacifier. Babies one year and older may sleep with a blanket as well as other security items, and may transitioned to a cot for sleeping.

### Infant Sleep

- The baby's bib should be removed before placing the baby in the crib.
- A crib or portable crib is provided for each infant for whom the center is licensed to provide care. The equipment is of safe and sturdy construction that conforms to the Code of Federal Regulations.
- Infants younger than 12 months are placed on their backs on a firm surface, without the use of infant sleep positioners, unless ordered by a physician.
- After being placed down for sleep on their backs, infants over 6 mos. of age may then be allowed to assume any comfortable sleep position. An infant who independently rolls onto its stomach after being placed to sleep on its back may be allowed to remain sleeping on its stomach if the infant is at least six months of age or the license holder has a signed statement from the parent indicating that the infant regularly rolls over at home. Minnesota Statutes, section 245A.1435
- If infants arrive to the program asleep, or fall asleep, in equipment not specifically designed for infant sleep (*Car safety seat, swing, bouncer, stroller, infant seat, highchair*), the infant is removed and placed in appropriate infant sleep equipment.
- Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed in cribs. The ONLY item that is allowed in the crib with an infant is their pacifier. This applies to babies under one year of age.
- The side rail is fastened in the "up" position after placing the baby in the crib.
- Babies may not wear hooded clothing items (extra fabric increases possibility of suffocation) or teething necklaces (strangulation risk) to sleep.

*\*\*All infants under one year of age sleep and are fed according to their individual needs.*

Naptime is a scheduled part of the daily schedule for toddlers and preschoolers and is required by DHS licensing guidelines for child care centers. All preschoolers and toddlers are required to lie on a cot to rest or sleep for at least thirty minutes.

The environment is darkened, and restful music is played. Staff will not awake children before they are ready to wake up on their own. Staff will raise the blinds and turn on the lights mid-afternoon. Infants are each provided with a crib and sleep according to their individual schedules.

### Nap Procedures

- All children must rest for at least 30 minutes. A child who has napped or rested 30 minutes will NOT be required to remain on the cot. Quiet activities are set up at tables until other children get up.
- Placement of equipment: In the infant and toddler rooms the cots are spread out throughout the room while keeping clear aisles for safety. Unimpeded access for both adults and children is maintained on at least one side of the cot. Cribs are arranged within the sleeping room to also maintain clear aisles for safety and access to all infants.
- All cots are placed directly on the floor and must not be stacked when in use.
- Separate bedding for each child is provided for each child in care. Bedding is washed weekly and when soiled or wet. Blankets must be washed or dry cleaned weekly and when soiled or wet.
- The toddler and preschool room has individual cots which are disinfected after each use.
- 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.

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## Transition

When a child 'ages' from one room in to the next, parents and teachers will consult about how to best accommodate the move. Usually a child starts the transition by spending increasing amounts of time in the new room. Once the child's age requires placement in the next room, teachers and parents will schedule a conference before the child actually makes the move to talk about new routines, expectations, and responsibilities.

The Lindgren Child Care Center also uses established linkages with other early education programs and local elementary schools to help families prepare for and manage their children's transitions between programs, including special education programs. If a child currently enrolled develops signs of special needs, center staff will recommend available resources to parents for the diagnosis of the condition. We will work with the parent to implement therapies to the best of our abilities.

Lindgren program staff will accompany parents to special education IEP meetings, or visit other programs and services with families, as support persons and advocates. Because we have linkages with individuals at other agencies, we can actually effect introductions between families and professionals.

When children transition to kindergarten the following procedures are implemented:

1. During both Fall and Spring conferences the preschool teacher speaks with families about kindergarten skills children will need;
2. Teacher coaches parents about what is really needed and what is not so necessary. Skills really needed are self-help skills;
3. Teacher encourages families to find out about the kindergarten round-ups in their districts, and to attend;
4. Teacher writes letters of explanation to kindergarten teachers upon parental request;
5. Lindgren gives children's files to parents when children leave our program before their kindergarten fall, especially including developmental assessments.

We also hotlink from our Parent Resources webpage information about local school district kindergarten round-ups, and remind parents to access the page appropriate to their school district.

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## Staff Room

Staff will keep all of their personal belongings in the staff room. Backpacks must be put in an overhead cubby. The area is to remain organized, that is the responsibility of all staff members.

## Cell Phones

Cell phones must be turned off when in backroom. If staff are observed using their cell phone during work, they will be dismissed for the day.

## Smoking

The facility and outdoor play areas are entirely smoke free. No smoking is permitted in the presence of children.

St. Cloud State University, as part of the State of Minnesota, prohibits smoking from all campus buildings. We prohibit smoking on our playground as well. When staff is made aware of others who might be smoking in the proximity of the child care center, we ask they extinguish their smoking material. We support the effort for the entire campus to become smoke-free.

In this folder please find a copy of the first 5 pages of the Awair Program policy, on 5.5 the statement of smoking prohibited in state buildings. Also please find a photo of the sign on the door leading to our playground, prohibiting smoking.

- St. Cloud State University [Smoking Policy](#)

**Quit Smoking! The 3rd hand smoke on your clothes and breath contains cyanide and arsenic, among other things. Staff will not smoke before they come to work.**

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## Assessments and Screenings

The Lindgren Child Care Center utilizes several assessments and screenings each for different objectives. For the children, the classroom teachers utilize the following screenings: Denver Developmental Screening Test; Minneapolis Preschool Screening Instrument; and Ages & Stages Questionnaire: Social-Emotional. The infant and toddler classroom uses the Creative Curriculum for Infants, Toddlers and Twos developmental assessment or Creative Curriculum for Preschoolers developmental assessment. Parents and teachers complete these together, mutually, over the course of the school year.

Parents complete User Satisfaction Questionnaires, Student Parent Demographic Surveys, and Exit Interviews when they leave the program.

The Center uses the following Environmental Assessments: Infant-Toddler Environment Rating Scale and Early Childhood Environmental Rating Scale.

Teachers conduct assessments of employee performance, and develop trainings accordingly (see Personnel Employees-- Performance Evaluation.)

- Denver Developmental Screening Test, Appendix III-A
- Minneapolis Preschool Screening Instrument, Appendix III-B
- Creative Curriculum for Infants, Toddlers and Twos, Appendix III-C
- Creative Curriculum for Preschoolers, Appendix III-D
- Ages & Stages Questionnaire: Social-Emotional Appendix III-E
- Parent Feedback on Program Services, Appendix III-F
- Parent Satisfaction Survey, Appendix III-G

## Assessment Plan

### **Purpose**

Child assessment is a vital and necessary component of all high-quality early childhood programs. Assessment is important to understand and support young children's development. Each classroom completes screenings and assessments that encompass all areas of development; sensory, language, cognitive, gross-motor, fine-motor, and social-emotional. It is also essential to document and evaluate how effectively programs are meeting young children's educational needs, and to inform on program improvement.

### **Child Development**

Children do not just grow in size. They develop, evolve, and mature, mastering ever more complex understandings of the people, objects, and challenges in their environment. There is a general pattern or sequence for development that is true of most children. However, the rate, character, and quality of development vary from child to child. Culture influences development in different ways, and the goals for children differ from culture to culture.

Quality assessment looks at not only to what is happening within the child, but also to the care that child requires in order to thrive. For a child to develop and learn in a healthy and normal way, it is important not only to meet the basic needs for protection, food and health care, but also to meet the basic needs for interaction and stimulation, affection, security, and learning through exploration and discovery.

### **Procedure**

All screenings, checklists, and assessments will be completed by the lead teacher in the assigned classroom. Any assistance in this procedure will be completed by staff persons under the direct supervision of the lead teacher.

- Developmental screenings are completed within the first month of a child's enrollment in the Lindgren Child Care Center. This information is then discussed with parents during a formal parent/teacher conference after the screening is completed.
- Screenings are completed as an individually administered test and as checklist based on parent report. Developmental assessments are completed throughout the day and year using naturalistic observation of the children's interactions and behavior. Both group and individual observations will be used to compile documentation. All screenings and assessments are completed within the Lindgren Child Care Center complex.
- Various methods of information gathering are used to document developmental growth of children. These methods include but are not limited to work sampling, checklists, observation and rating scales.
- Developmental assessments are ongoing (year round) with results discussed with the parent throughout the semester, both daily along with two scheduled parent/teacher conferences, one each fall and spring semester.
- Parents are asked to be involved in their child's planning and assessment via an online journal using the Creative Curriculum assessment program. Also, on a daily basis the lead teachers discuss with parents developmental milestones reached, developmental progress, and developmental concerns.
- One of two environmental rating scales, ECERS-R in the preschool room and ITERS-R in the infant and toddler room, are completed periodically to assess environments. The information compiled by completing these rating scales will be used to determine future improvements center wide.
- The lead teachers in conjunction with the administrative team will annually evaluate the current screening and assessment tools. Outside professionals and parent involvement is sought to inform this evaluation.

### **Results**

The information gained during all screenings and assessments will be used to develop curriculum, parent education, and evidence for referral.

- The lead teachers will use the information gathered during the assessment process, identifying children's interests and needs, within their curriculum planning to best meet the needs of all children enrolled.
- During scheduled conferences lead staff and families develop learning goals for children. These goals are used to plan learning activities for children based on assessment of individual needs and interests. This is completed both during scheduled conferences and throughout the school year as needed.
- Both formally and informally the lead teachers will disseminate the screening and assessment information gathered for parents. This process will empower the parents as they will feel informed and

more knowledgeable about their child's developmental progress.

- In the event of a potential developmental delay the lead teachers will use the information gathered as evidence for referral for future diagnostic screenings and assessment. Depending on the type of atypical development various external agencies may be involved in diagnostic screenings and assessment.

#### **Confidentiality**

- All information obtained regarding any center family/child(ren) is considered confidential.
- Information obtained and collected by our program will be shared with other staff on a "need to know" basis. The lead teachers may use the information during in-service trainings to identify children's interests and needs.
- Practicum students and volunteers are not to be included in discussions of children and families, except for information which is relevant in order for them to complete their objectives.
- While the lead teacher may require assistance from the program staff to compile documentation for assessment, only the lead teacher and designated graduate assistants/ assistant teachers will have access to the complete assessment materials.
- All confidential materials will remain in a lockable filing cabinet in the office.
- All parents/guardians may gain access to their child's information by either asking the lead teacher, associate director, or director.
- All information compiled during screenings and assessment will be used to promote the healthy developmental growth of the child. The lead staff along with the participation of parents will review the completed information and together make goals for the child or a referral in cases of developmental delay.
- No information can be shared with an outside agency without written consent from the legal guardian. The decision to share information will be made by administrative staff (lead teachers, director).
- On request, the Regulatory authorities (Minnesota Department of Human Services) of the Lindgren Child Care Center will have access to our confidential materials.

#### **Language**

It is important to the Lindgren Child Care Center that all families are given the opportunity to fully understand, interpret, and become involved with their child's assessment and goals. The Lindgren Child Care Center will provide an interpreter for any family that needs and makes a request.

#### **Training**

Each lead teacher having a degree in early education has formal training in assessment delivery and interpretation. In addition the lead teachers have had formal training before using the specific screenings and assessments they employ within their assigned classrooms.

- Student staff are given opportunities to assist the lead teacher with documentation of assessment criteria only after they are trained on naturalistic observation procedures.

#### **Links to Screening and Assessment**

The below links can be used to obtain more information on the specific screenings & assessments used by the classroom teachers:

##### **Infant & Toddler Room**

- *Teaching Strategies GOLD® online*
- <https://www.teachingstrategies.com/page/GOLD-assessment-online.cfm>
  - Validity Study: <https://www.teachingstrategies.com/content/pageDocs/GOLD-Concurrent-Validity-2013.pdf>
  - Norms: <https://www.teachingstrategies.com/content/pageDocs/TS-GOLD-Growth-Norms-Tech-Summary-2012.pdf>
  - Reliability: <https://www.teachingstrategies.com/content/pageDocs/TS-GOLD-Technical-Summary-2013.pdf>
- Denver II screening tool: <http://www.denverii.com/>
  - Reliability and Validity[http://denverii.com/denverii/index.php?route=information/information&information\\_id=7#cq2](http://denverii.com/denverii/index.php?route=information/information&information_id=7#cq2)

##### **Preschool Room**

- *Teaching Strategies GOLD® online*
- <https://www.teachingstrategies.com/page/GOLD-assessment-online.cfm>
  - Validity Study: [https://www.teachingstrategies.com/content/pageDocs/GOLD-Concurrent-Validity-](https://www.teachingstrategies.com/content/pageDocs/GOLD-Concurrent-Validity-2013.pdf)

2013.pdf

- Norms: <https://www.teachingstrategies.com/content/pageDocs/TS-GOLD-Growth-Norms-Technical-Summary-2012.pdf>
- Reliability: <https://www.teachingstrategies.com/content/pageDocs/TS-GOLD-Technical-Summary-2013.pdf>
- Minneapolis Preschool Screening Instrument: <http://rea.mpls.k12.mn.us/Preschool.html>
  - Reliability and Validity [http://www.health.state.mn.us/divs/fh/mch/devscrn/instr/mpsi\\_summary.pdf](http://www.health.state.mn.us/divs/fh/mch/devscrn/instr/mpsi_summary.pdf)

#### **Environment**

- Early Childhood Environment Rating Scale: <http://www.fpg.unc.edu/~ECERS/>
- Program Administration Scale (PAS): <http://mccormickcenter.nl.edu/program-evaluation/program-administration-scale-pas/>

## Consent

All information compiled during screenings and assessment will be used to promote the healthy developmental growth of the child. The lead staff along with the participation of parents will review the completed information and together make goals for the child or a referral in cases of developmental delay.

No information can be shared with an outside agency without written consent from the legal guardian. The decision to share information will be made by administrative staff (lead teachers, associate director, and director).

- Informed Consent, Appendix III-J
- Consent to Release Private Data, Appendix III-K

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## Cultural Sensitivity

### Assessment

Programs use a variety of assessment methods that are sensitive to and informed by family culture, experiences, children's abilities and disabilities, and home language; are meaningful and accurate; and are used in settings familiar to the children.

Our program is sensitive to family culture by before being admitted to the program each family is asked to complete a Family & Cultural Information form. This form allows the teachers a small glimpse into the families' life. During daily discussion with the parents the teacher can use this information to better assess both parental and program concerns. Each teacher knows and understands the unique aspects of our families and is sensitive towards the child's understanding of its impact on her life.

Because of our belief of how children learn, (see child development below) the Lindgren Child Care Center gives each child the opportunity to learn and grow at their own pace. Adaptations will be made to the curriculum to assist children's development but the way he/she is assessed is unchanged.

### LCCC Assessment Plan (Child Development)

Children do not just grow in size. They develop, evolve, and mature, mastering ever more complex understandings of the people, objects and challenges in their environment. There is a general pattern or sequence for development that is true of most children. However, the rate, character, and quality of development vary from child to child. Culture influences development in different ways, and the goals for children differ from culture to culture.

Quality assessment looks at not only to what is happening within the child, but also to the care that child requires in order to thrive. For a child to develop and learn in a healthy and normal way, it is important not only to meet the basic needs for protection, food and health care, but also to meet the basic needs for interaction and stimulation, affection, security, and learning through exploration and discovery.

### Community Events

To better understand the cultural backgrounds of children, families, and the community, program staff (as a part of program activities or as individuals), participate in community cultural events, concerts, storytelling activities, or other events and performances designed for children and their families.

Frequently programs are offered in the community or even on-campus that is relevant for staff and family attendance. We make folks aware of these opportunities and encourage their attendance.

### Family Unit

The Lindgren Child Care Center staff use a variety of formal and informal strategies (including conversations) to become acquainted with and learn from families about their family structure; their preferred child-rearing practices; and information families wish to share about their socioeconomic, linguistic, racial, religious and cultural backgrounds.

Our teachers distribute to and request from ALL families a completed Family and Cultural Information Form. This solicits parents to share with the teacher information about family structure, child rearing practices, and linguistic, racial, religious, and cultural backgrounds. This gives a tremendous amount of information to program staff that helps better understand the Family and Cultural information about program families.

Individual teachers also employ unique techniques to solicit information from families. The infant teacher meets personally with each family before the baby begins care with us. The toddler and preschool teachers takes time to speak with each parent daily.

### Home Language

It is important to the Lindgren Child Care Center that all families are given the opportunity to fully understand, interpret, and become involved with their child's assessment and goals. The Lindgren Child Care Center will provide an interpreter for any family that needs and makes a request.

### Setting

Screenings are completed as an individually administered test and as checklist based on parent report. Developmental assessments are completed throughout the day and year using naturalistic observation of the children's interactions and behavior within the confines of the Lindgren Child Care Center. Both group and individual observations are used.

### Teacher/Family Consensus

Staff work to achieve consensus with families about assessment methods that will best meet the child's needs.

The Lindgren Child Care Center achieves consensus with families regarding assessment methods through our daily conversations along with our scheduled parent teacher conferences. Excerpts from the LCCC Assessment plan are below as further documentation of our assessment practices.

- Developmental assessments are ongoing (year round) with results discussed with the parent throughout the semester, both daily along with two scheduled parent/teacher conferences, one each fall and spring semester.
- Parents are asked to be involved in their child's planning and assessment via an online journal using the Creative Curriculum assessment program. Also, on a daily basis the lead teachers discuss with parents developmental milestones reached, developmental progress, and developmental concerns.
- The lead teachers in conjunction with the administrative team will annually evaluate the current screening and assessment tools. Outside professionals and parent involvement is periodically sought out as needed.

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## Curriculum

### Infants (2 months-15 months)

Children in the infant area follow individualized schedules which are planned cooperatively by the parents and lead teacher. Each schedule is modified as the child's development and parents' desires dictate. The staff's primary goal is to help infants develop a sense of trust and pleasure in relationships with their care givers, and in their new environment. The staff to child ration is 2:5, with 8 infants enrolled.

### Philosophy of the Infant Program

We believe:

- that in order for infants to develop trust, their needs should be responded to quickly, and with sensitivity and respect for their temperament and for their home routines
- infants are competent. They communicate their needs and feelings through body language, vocalizations and crying, and gestures. It is our job to learn to "read" what they are telling us and be responsive to their communication with us
- that it is important to provide age-appropriate learning opportunities, in all areas of development

### Infant Curriculum

The infant curriculum is guided by *The Creative Curriculum, for Infants, Toddlers & Two's*, published by Diane Trister Dodge, Sherrie Rudick, and Kai-lee' Berke. This curriculum is a comprehensive curriculum which includes goals and objectives for children's learning in all areas of development: social/emotional, physical, cognitive, and language. These 4 developmental goals are carried out through the care giving, the environment, and activities in the infant program. Sensitive care giving is a major component of the program, because it builds the foundation of trust that children need to be successful throughout life. The environment reflects diversity, beauty, and nature and is designed to convey a sense of calmness. Activities provided on a daily basis, such as music time, sensory activities, reading books, and outdoor experiences, are appropriate to the developmental stage of the baby.

If you wish to learn more about The Creative Curriculum you can log onto their website at [www.teachingstrategies.com](http://www.teachingstrategies.com) and click on the infants, toddlers, and two's side bar.

### Toddlers (16 months-32 months)

A structured day is planned indoors and outdoors for the toddler children, dependent on their particular schedules. Appropriate activities that foster the growth of each toddler's self-help skills, language development, social awareness, and positive, non-aggressive problem solving are incorporated. Nap time is scheduled in the afternoon. The staff to child ratio is 1:5, with 12 toddlers enrolled.

The Philosophy of the Toddler Program is to help toddlers feel safe and respected along with encouraging the toddler to develop in all areas (cognitive, social/emotional, language, physical and self-help) according to their individual ability using developmentally age appropriate practice. Relationship with the child and the child's family is also an important piece of the program. It is important to have parent involvement and create partnership with the parents so that the teacher and parent can work together on their child's development. (Theorist: Brazelton and Greenspan)

### Toddler Curriculum

The Toddler Curriculum that is used in the classroom is *The Creative Curriculum*, published by Diane Trister Dodge\* Sherrie Rudick\*Kai-lee' Berke. *The Creative Curriculum@ for Infants, Toddlers & Twos* is a comprehensive curriculum that helps teachers achieve the very best program for children under three. If the interactions children have are nurturing, consistent, and loving, and the experiences they have are appropriately challenging, then infants, toddlers, and twos grow and flourish. If you would like to learn more about the curriculum you can log on to their web site at [www.teachingstrategies.com](http://www.teachingstrategies.com) and click on the infants, toddlers, and two's side bar.

### Preschoolers (33 months-5 years)

Activities of social, motor, language, cognitive and sensory experiences are planned for the preschool children. This is done through emergent curriculum where the children's interests are observed, followed, and documented. Activities are then planned in all developmental areas which are connected to the children's interest area. They include large and small group activities for the day, music experiences with song or dance, story telling and role playing, creative movement activities, finger plays, arts and crafts, woodworking, outdoor play and special field trips. Naptime is scheduled in the afternoon. The staff to child ratio is 1:7, with 25 preschoolers enrolled.

The Philosophy of the Preschool Program is to provide children with endless opportunities to explore and investigate the world in which they live. The children's interests are paired with educational experiences (in all

developmental domains) that are relevant, engaging, and meaningful. We believe that children who become active participants in their learning will continue this trait through their educational careers. To assist the children in becoming active learners, we have adopted an emergent (project based) curriculum.

*It is only as children search for answers to their own questions via discussion, investigation, and experimentation that they begin to grasp and understand complex concepts that are foundational to later learning. Rather than use teacher directed thematic units, teachers integrate curriculum goals carefully within open-ended projects of inquiry chosen by the children (Katz & Chard, 1989).*

#### **Preschool Curriculum**

The framework is provided by the Early Childhood Indicators of Progress: Minnesota's Early Learning Standards. The primary purpose of these Indicators are to provide a framework for understanding and communicating a common set of developmentally appropriate expectations for young children within a context of shared responsibility and accountability for helping children meet these expectations. These early learning standards are broken down into six main domains, each of which are described in further detail using the links below. The framework provided by the Early Childhood Indicators of Progress is enhanced by the use of [The Creative Curriculum® for Preschoolers Assessment](#) tool. This a comprehensive national tool used to in all types of early childhood settings, including inclusive and early intervention programs. To learn more about [The Creative Curriculum® for Preschoolers Assessment](#) tool please follow this link: [www.teachingstrategies.com](http://www.teachingstrategies.com)

To view the complete Early Childhood Indicators of Progress please follow this link:

<http://cfl.state.mn.us/mdeprod/groups/EarlyLearning/documents/Publication/009530.pdf>

The Lindgren Child Care Center is an observation resource and training laboratory for the campus community. As such, parents will see student observers in classrooms in addition to the regular staff on a weekly basis.

- Infant Curriculum, Appendix III-L
- Toddler Curriculum, Appendix III-M
- Preschool Curriculum Appendix III-N

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## Classroom Guidance Policy/Procedure

*\*All policy is provided to parents and staff during orientation via online links available on orientation paperwork.*

### Goals

All policy/procedures are designed;

1. to assist children learn appropriate social skills which will enable them to become successful in all future interactions
2. to maintain classroom in which each child can feel secure and comfortable while learning
3. to limit or eliminate the use of suspensions, expulsion, and other exclusionary measures.

### Policy/Procedure

The Center's daily schedule, curriculum plans, classroom arrangements, and staffing patterns are designed to promote positive and enjoyable learning experiences, including respectful and trusting relationships among adults and children. When guiding children's behavior the Lindgren Child Care Center helps children learn acceptable behavior and develop inner controls. A child's age, intellectual development, emotional make up, and past experiences will be considered in guidance, and consistency will be maintained in setting rules and limits for children.

The following is a list of some child guiding techniques staff members' use:

- Tell the child what she/he CAN do;
- Establish eye contact when speaking with the child;
- Give choices whenever possible, but only when the child really has a choice;
- Encourage children to solve their own problems and work out conflicts;
- Re-direct a child to another activity;
- Help children learn how to join play.
- Teaching staff never use physical punishment such as shaking or hitting and do not engage in psychological abuse or coercion.
- Teaching staff never use threats or derogatory remarks and neither withholds nor threatens to withhold food as a form of discipline.

### Persistent Unacceptable Behavior/Extraordinary Behavior

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 any child in our program, presents with challenging behavior, teaching staff shall follow the standards of the [National Association for the Education of Young Children \(NAEYC\)](#):

- Observe the children, and then identify events, activities, interactions and other factors that predict and may contribute to challenging behavior.
- Rather than focus only on eliminating the behavior, teaching staff shall focus on teaching the child social, communication, and emotional regulation skills and using environmental modifications, activity modifications, adult or peer support and other teaching strategies to support the child's appropriate behavior.
- Teaching staff shall respond to challenging behavior, including physical aggression, in a manner that provides for the safety of the child and the safety of others in the classroom. Our response will be calm, respectful and provide the child with information on what is acceptable behavior and what is not.
- We will document the challenging behaviors and the intervention methods that were attempted in a behavior tracking log.
- 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. Teacher-parent discussions regarding a child's behavior shall be held in private and shall focus on working as a team to develop and implement an individualized plan that supports the child's inclusion and success.
- 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.
- If necessary, intervention shall ensure each child has access to professional services, such as referrals to the school district of residence, behavioral specialist or MN Help Me Grow the MN Department of Education funded referral system, community mental health center and/or a private therapist.
- In such cases when there is no improvement in the child's behavior subsequent to the implementation of the plan agreed upon by the parent, teacher and consultant. And where the challenging behavior threatens the safety of the child or classroom participants through hurting of themselves or others through verbal or physical means, all other possible interventions have been exhausted, and there is agreement that exclusion is in the best interest of the child. The LCCC will work the family to find alternative care through the local resource and referral network, Milestones.
- The LCCC acknowledges that this Behavior Guidance Policy/Procedure complies with federal and state civil rights laws.

### Prohibited Actions

Procedures for Reassignment or Termination

1. Lindgren Child Care Center Student Personnel are students employed under the University Work-Study Program and/or paid with Student Activities monies.
2. Conduct by Lindgren Child Care Center Student Personnel while performing as an employee of the Center which violates Lindgren Child Care Center policies, including the "Policy on the Use of Drug and Alcohol", MNState rules, State Law, and/or Federal law may serve as cause for reassignment or termination of that employee or volunteer's position at the center.
3. The Lindgren Child Care Center director may immediately reassign and/or terminate student personnel at the center if the action is necessary to insure the safety, health, and/or welfare of the children, parents, and/or other staff. Prohibited actions include;
  - a. Requiring a child to remain inactive for a long period of time
  - b. Rough handling
  - c. Shoving
  - d. Pushing
  - e. Pulling
  - f. Grasping any body part
  - g. Jerking
  - h. Squeezing
  - i. Excessive tickling
  - j. Hair pulling
  - k. Ear pulling
  - l. Shaking
  - m. Slapping
  - n. Kicking
  - o. Biting
  - p. Pinching
  - q. Hitting
  - r. Spanking

In addition, subjection of a child to emotional stress will result in dismissal. Examples include:

  - a. Name calling
  - b. Ridiculing
  - c. Humiliation
  - d. Sarcasm
  - e. Cursing at
  - f. Making Threats
  - g. Frightening a child
  - h. Withholding affection
  - i. Ostracism
  - j. Shaming
  - k. Making derogatory remarks about a child or the child's family
  - l. Using language that threatens, humiliates, or frightens the child
4. Staff will not separate children from the group unless:
  1. Less intrusive methods (redirection, discussion) have been tried but ineffective
  2. The child's behavior threatens the well-being of the child or other children in the program
  3. A child who requires separation from the group must
    1. Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person
    2. The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation
    3. The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops
  4. Children between six weeks and sixteen months will not be separated from the group as a means of behavior guidance.
5. Any situations presenting a possible violation in #2 above should be reported to the Lindgren Child Care Center director as soon as possible.
6. If a violation is substantiated by the director, the director will draft a written description of the incident(s) and the actions taken by the director.
7. The director will file the Incident Report(s) with the designated official listed in the College Bulletin, Faculty/Staff Handbook, MnSCU Rules, or Minnesota Law.
8. Any incidents of suspected child abuse, child sexual abuse, or child neglect by student personnel will be referred to the Vice President for Student Life and Development and the Stearns County Child Protection Officer in accordance with Minnesota statute.
9. The Financial Aid Office will be given written notification of any Work-Study student personnel reassignment by the Lindgren Child Care Center director as soon as possible to minimize disruption of work-study

- payments and/or further efforts at reallocating such monies.
10. Where appropriate, students may exercise all due process procedures relating to academic disciplinary appeals found in the Student Handbook.
  11. Assistant teachers will supervise aides in absence of lead teacher.
  12. The Lindgren Child Care Center will not tolerate any unexcused absences. Any such absences may result in termination of employment.
  13. Tardiness- excessive tardiness will be grounds for termination.
  14. Inappropriate language/statements are not acceptable. Respect and good judgment towards parents, children, and staff need to be observed at all times.
  15. It is unlawful for any staff member to treat a child in an abusing or neglectful manner. Persons suspected of child abuse and/or neglect will be reported by the director or lead teachers to the appropriate social service or police department representative. Investigation of existing staff will regard to alleged child abuse and neglect shall be pursued by the director, Vice President for Student Life and Development, and the appropriate enforcement agencies.
  16. Persons suspected of child abuse and/or neglect may be reassigned, suspended, or terminated from their employment at the Lindgren Child Care Center and the University. It shall be the policy of the Lindgren Child Care Center to not hire a staff person convicted of or admitting to or been the subject of substantial evidence of an act of child battering, child abuse, child molestation, or crimes of moral turpitude or debasement. All staff will be required to submit information for criminal background checks before working directly with children.
  17. Investigation of staff candidates with regard to alleged or proven child abuse, neglect, and/or moral turpitude will be done by the director and the Vice President for Student Life and Development.
  18. If a student staff person encounters a situation where there is suspicion or concern, it might be helpful to discuss his or her concern with the lead teacher or Director. Conversing shall be done ONLY in the center, behind the closed doors of the director's office.
  19. This follows the chain of command as written in the staff handbook. However, the law requires mandated reporters to personally make a report if they know or have reason to believe a child is being neglected or abused or has been within the past three years.
  20. Staff must maintain confidentiality of information unless they are talking to teachers, social services personnel, or law enforcement personnel. This means keeping information about children to themselves. Finally, staff must never allow their concerns to color or affect the positive regard they must hold for each and every family the Center serves.

#### **Separation from the Group**

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

- Prior to being removed from the group classroom teachers must:
  - Attempt less intrusive methods of guiding children's behavior and been ineffective.
  - The child's behavior threatens the well being of the child or other children in the program.

A child who requires separation from the group must:

- Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person.
- 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
- The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.

*Children between six weeks and 16 months are not separated from the group as a means of behavior guidance.*

#### **Separation Report**

All separations from the group will be noted in a daily log that includes;

- Child's name
- Staff person's name
- Time
- Date
- Information indicating what less intrusive methods were used to guide the child's behavior
- How the child's behavior continued to threaten the well being of the child or other children in care

If a child is separated from the group three or more times in one day, the child's parent shall be notified and the parent notification will be noted in the daily log. If a child is separated five or more times in one week, eight times or more in two weeks, the procedures in Persistent Unacceptable Behavior will be followed.

#### **Infant Guidance**

You will mostly use one or more of these:

1. Substitution.
2. Redirect child to another activity.
3. Remove child from a situation.
4. Remove object from child.
5. Saying in a positive way what you're doing.

- 
1. Saying "no" from across the room is usually ineffective.
  2. Instead of a number of staff saying the child's name, (which gives the child a lot of attention for the behavior) **one** staff person should move in physically close and take action.
  3. Immediate **action** works better than giving directions verbally.
  4. Staff should be down on the floor **close to the babies**, and move as the babies move, to **prevent situations**.
  5. Develop the ability to watch the **entire** room.

Tips:

1. Say things in the positive. "Out of your mouth", "use your fingers," etc.
2. Be specific. Instead of "Be nice" say "Touch gently".
3. Do not expect sharing of infants.
4. Use "no" sparingly. Find positive ways to say what the child *should* do.
5. Do not label a child ("naughty" etc.)

### Sharing and Limit-Setting

The following are some basic guidelines for appropriate guidance for babies:

Be specific. Tell the baby what he/she should do, not what he/she is doing wrong. Do not expect babies to share.
--

### Toddler Guidance

#### Conflict Resolution Policy for Toddlers

In the toddler room the staff is trained to do the following procedures to help toddlers in conflictive situations and to help the room operate more positively. I feel if a room is surrounded by positive remarks and is consistent, conflicts between toddlers are less.

- ❖ Staff are trained to have face-to-face interaction when setting limits, rather than talking from across the room
- ❖ Staff should tell toddlers what to do instead of what not to do. Say "walking feet inside". Instead of "Don't run or no running".
- ❖ Limit the use of negative words such as "Don't, Can't, Won't, and No" The word "no" sometimes has to be used, however, when a child is causing great harm to a child or to himself.
- ❖ The staff will praise the toddlers as much as possible, Catch them doing something good.
- ❖ Give choices to a toddler if they are refusing to do something. The choices that you give need to have the same outcome. Ex. Child does not want to wash hands. The staff can say "Do you want to put the soap on your hands or should I" either way the desired outcome will happen.
- ❖ If two children are fighting over a toy the staff will find another one of the same toy and give it to the child who wanted it.
- ❖ To avoid conflict between toddlers the room has two of every toy, because developmentally toddlers cannot share yet.
- ❖ If a child is hurtful with a toy, the child is first told what the toy is used for, but if they continue to hurt again with the toy, then they are removed from that area and redirected somewhere else to play. Ex. A child hits a child with a block; the child is told that blocks are for building only. Child hits again with the blocks, the child is removed to another area of the room
- ❖ Staff always show comfort to the child who was hurt first and then address the child who was hurting.
- ❖ Staff will teach toddlers to talk instead of hurting. Some words include: Move, My turn, Help.
- ❖ Sometime distraction still works, so use it if necessary
- ❖ Redirect toddlers when you see a conflict that might take place.
- ❖ When giving a direction keep it simple, 2-3 words work the best. Ex. Please walk, wash hands please etc...
- ❖ Give toddlers time to comply with requests and limits ( about 10 sec)
- ❖ If a child keeps putting toys in their mouth, instead of continuously telling them to keep the toy out of their mouth, give them a teething toy from the refrigerator, they are probably teething.
- ❖ Acknowledge the child's feelings and desires as legitimate even if you cannot give them what they want.

- ❖ If a child bites or has another form of consistent hurting behavior, the behavior is documented in a notebook. The staff are instructed to write such details as time, place, which child was hurt and how the staff handled the situation. The lead teacher shares this information with the parent at pick up.
- ❖ If a child does bite more than 2 times, then the lead teacher will sit down with the parent or parents and discuss writing up a behavior plan. The behavior plan will have both the teacher's and the parent's input. Once the plan is agreed upon by the parents, teacher and director, then the plan is discussed with the staff and implemented in the classroom.

## Preschool Guidance

***In the process of learning the complex life skills of cooperation, conflict resolution, and acceptable expression of strong feelings, children, like all of us, make mistakes. Guiding behavior is a big part of every teacher's job.***

***-Dan Gartrell-***

### Child Guidance

The center's daily schedule, curriculum plans, classroom arrangements, and staffing patterns are designed to promote positive and enjoyable learning experiences, including respectful and trusting relationships between adults and children. To provide for the safety of all children, as well as the individual development of each child's self-help and self-control skills, teachers maintain daily routines and set limits within each age group. These routines and limits are frequently discussed and defined with the children. Consistency, or knowing what to expect throughout the day, helps children develop a sense of trust and understanding in their environment.

Positive, guiding communication with each child is our primary practice to help children develop a sense of independence, confidence, and competence in their own abilities to get along with peers and adults and to involve themselves positively in classroom activities. Teachers "model" language and appropriate ways for children to express their feelings and emotions. Our belief is that children might show "mistaken" behavior when they do not know how to do it right. Our efforts in guiding children will focus on showing children appropriate behavior.

### Preschool Behavior Guidance Techniques

All children are encouraged to "talk" to explain how they feel. Appropriate and positive behaviors are recognized and reaffirmed daily. A teacher's response to inappropriate or negative behavior may include: ignoring the behavior, reasonably discussing the problem, redirecting the child's activity, and using clear, firm words to instruct the child about more positive ways to express him/herself. A preschool child might be invited to assist in restoring order as a consequence of some inappropriate behavior. For instance, a child might be asked to help rebuild the block tower of another that was knocked down. Consequences will be constructed with reasonable alternatives rather than punitive punishing responses.

### Principles for Guidance of Young Children

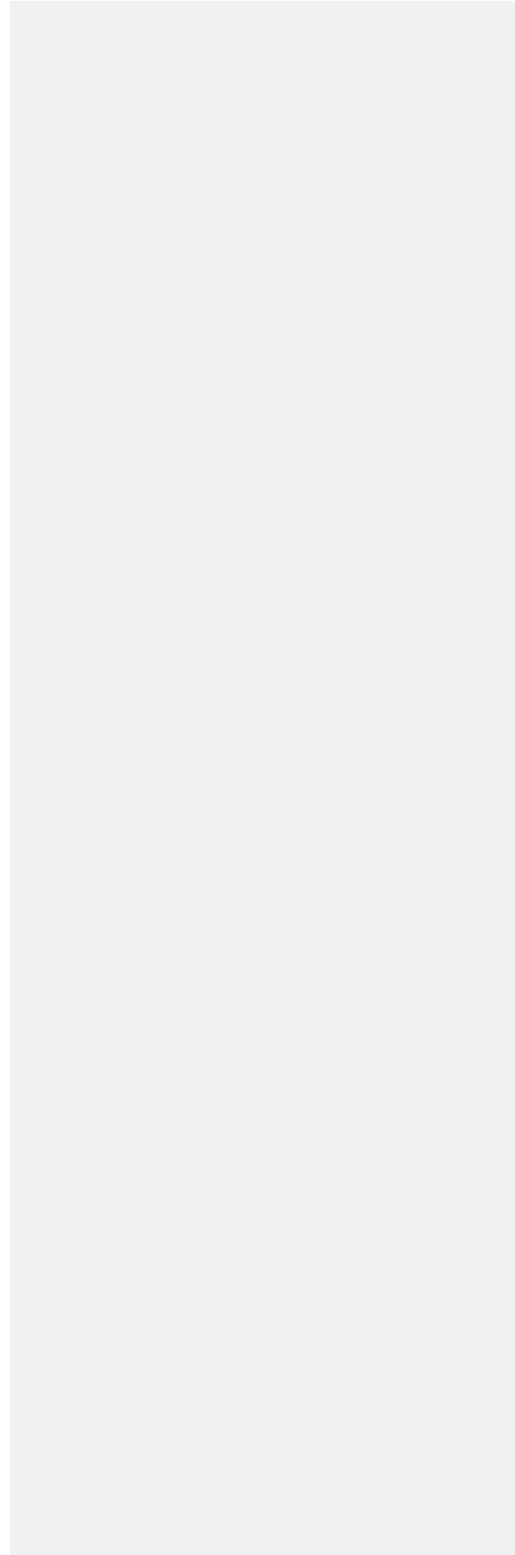
Children playing in a group need help and guidance. We use these principles to guide the children:

1. We face children when speaking to them.
2. We make sure to have the child's attention before giving directions or making suggestions. Go to him/her; call him/her by name.
3. We give positive suggestions. Such as "Please keep the crayons on the table", rather than "Don't put the crayons on the floor". This puts the child in the wrong without suggesting what he should do. The two statements may seem to mean the same thing, but there is a great deal of difference in the way they aid or hinder the child's actions.
4. We avoid comparisons and competitions among children. Children should not feel that their chances for approval depend on being "first" or "best" or beating someone.
5. We give logical reasons when reasons are in order. Say "Throwing the ball in the house may hit someone. Would you like to color or play with the blocks now?" Avoid saying, "We do not throw balls in the house". The child wonders what is meant by "We", why he has to do as "We" do. He stops to please you or because you make him, without associating any reason or realizing any danger.
6. We offer choices where possible. Say "John has the truck now. Would you like to play with the clay or the blocks?" The choice is between playing with the clay or the blocks. Suggesting choices helps in getting the child started to play. If John continues to have a difficult time choosing an activity we may take the child in our lap, talk to him about what he might do, and then go with him to show what can be done with the toy.
7. We will not offer choice about routine. When we say "Will you wash your hands now", we are implying the rest of the sentence, "or not". Better to say, "Time to wash".
8. The best help forestalls trouble. When two children are playing and a third approaches, a suggestion such as "Here comes Mary and she can help set the table", or "You can give her one of the picture books" helps them to accept the new child.
9. When limits are necessary they should be clearly defined and consistently maintained. We must be responsible for limiting children so that they do not come to harm, hurt others, or destroy property. We will establish methods for limiting the number of participants when safety is a concern.
10. We will give the child only as much help as he needs. We will not do things for the child that he/she can reasonably be expected to do for themselves. We may suggest trying one way or another, then let them do it. The results may be a "poor thing, but his own". However, we will be ready to give help before the child is completely discouraged by too much failure.
11. Some things we know about children.
  - a. The younger the child, the more quickly he goes from one thing to another.
  - b. The tired child may be overactive and excited.
  - c. Keeping calm helps the child to be more calm.
  - d. If trouble seems to be brewing, a change of activity helps most. This is the time to sing a song, have a drink or water, go for a walk, etc. Redirect before, not after the outburst.

Children need time to change activity or routine. Give "advanced warning" of planned changes. "When you finish your story

(your block building, etc.) it will be time to go outside" (or to the bathroom, etc.).

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## Holidays

Holiday activities can contribute to anti-bias curriculum. They are fun and children get involved. Participating in celebrations and rituals helps build a sense of group collectivity. Holidays are a part of our society's cultural life. Parents will find the teachers do not emphasize holidays in their curriculum. However, if parents have a particular custom or ritual they would like to share with all the children, they are encouraged to talk to their child's lead teacher.

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## Interpretation

The Lead Teaching Staff meets at least weekly to interpret and use assessment results to align curriculum and teaching practices to the interests and needs of the children. On a monthly basis the Lindgren Child Care Center holds a mandatory staff in-service with training from our comprehensive scheduled training plan. Also occurring at these in-services includes individual classroom breakout sessions which will be cover individual behavior/developmental concerns.

The Lindgren Child Care Center staff provides families with information about the choice, use, scoring, and interpretation of screening and assessment methods that includes

- the purpose and use for which an assessment is designed and its programmatic purpose and use,
  - Child assessment is a vital and necessary component of all high-quality early childhood programs. Assessment is important to understand and support young children's development. It is also essential to document and evaluate how effectively programs are meeting young children educational needs, and to inform on program improvement
- the interpretations of the results and their meaning in terms of future learning opportunities for their child,
  - The lead teachers will use the information gathered during the assessment process, identifying children's interests and needs, within their curriculum planning to best meet the needs of all children enrolled.
  - Both formally and informally the lead teachers will disseminate the screening and assessment information gathered for parents. This process will empower the parents as they will feel informed and more knowledgeable about their child's developmental progress.
  - In the event of a potential developmental delay the lead teachers will use the information gathered as evidence for referral for future diagnostic screenings and assessment.
- the way teaching staff or others have been trained to use assessment procedures and interpret results as well as the conditions under which the child will be assessed (e.g., group size, time constraints, familiarity with adults involved), and
  - The information gained during all screenings and assessments will be used to develop curriculum, parent education, and evidence for referral.
  - Depending on the type of atypical development various external agencies may be involved in diagnostic screenings and assessment
- access to or information about the specific instruments used.
  - The below links can be used to obtain more information on the specific screenings & assessments used by the classroom teachers:

## Infant & Toddler Room

- Creative Curriculum Developmental Continuum for Infants, Toddlers, and Twos: <http://www.creativecurriculum.net/>
- Denver II screening tool: <http://www.denverii.com/>

## Preschool Room

- Creative Curriculum Assessment for Preschoolers: <http://www.creativecurriculum.net/>
- Minneapolis Preschool Screening Instrument: <http://rea.mpls.k12.mn.us/Preschool.html>

## Environment

- Early Childhood Environment Rating Scale: <http://www.fpg.unc.edu/~ECERS/>

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## Norm Referenced and Standardized Tests

When the Lindgren Child Care Center uses published instruments, it evaluates information from the publisher about the standardization sample, standardization procedures, scoring, reliability, and validity to ensure that the results obtained with the instruments are valid for the program's purposes.

Each lead teacher researches for effectiveness and is trained in application procedure of each screening and assessment implemented in the Lindgren Child Care Center.

- Norms & Standardizations, Appendix III-O

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## Pervasive Developmental Disorders

The diagnostic category of Pervasive Developmental Disorders (PDD) refers to a group of disorders characterized by delays in the development of socialization and communication skills. Parents may note symptoms as early as infancy, although the typical age of onset is before 3 years of age. Symptoms may include problems with using and understanding language; difficulty relating to people, objects, and events; unusual play with toys and other objects; difficulty with changes in routine or familiar surroundings, and repetitive body movements or behavior patterns.

Autism (a developmental brain disorder characterized by impaired social interaction and communication skills, and a limited range of activities and interests) is the most characteristic and best studied PDD.

Other types of PDD include Asperger's Syndrome, Childhood Disintegrative Disorder, and Rett's Syndrome. Children with PDD vary widely in abilities, intelligence, and behaviors. Some children do not speak at all, others speak in limited phrases or conversations, and some have relatively normal language development. Repetitive play skills and limited social skills are generally evident. Unusual responses to sensory information, such as loud noises and lights, are also common.

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## Outdoor Play

**Cold** - Daily outdoor play is scheduled for all children. The Center does not go outside when ambient air temperatures are 0°F or colder. Parents should be sure their child has clothing suited to the weather. The Center may ask parents to go home and get appropriate clothing when needed. It is the Center's policy that if children are healthy enough to attend child care they are healthy enough to go outdoors.

**Heat**—The Lindgren Child Care Center monitors the St. Cloud Heat Index at the SCSU weather website <http://www.stcloudstate.edu/weather/> along with following the recommendation from Robert Wiesman (SCSU Meteorologist) which is made public via SCSU-Announce list serve. When it is determined that the heat is excessive for young children all children will remain in their classroom for the remainder of the day.

**Air Quality**—The Lindgren Child Care Center follows the recommendation from Robert Wiesman (SCSU Meteorologist), which is made public via SCSU-Announce list serve, on matters of air quality. When air quality becomes dangerous for young children and elderly a message is relayed to the entire SCSU community. When this has been determined all children will remain in their assigned classrooms until the air quality concern is lifted.

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## Parent/Teacher Conferences

Family members are provided information, either verbally or in writing, about their child's development and learning on at least a quarterly basis, with written reports at least two times a year.

Both parents and staff may wish to call for additional conferences as needed. The Lindgren Child Care Center believes very strongly in keeping our parents informed as to the development of their children. Below is specific language from our assessment plan to document our parent teacher communication policy.

- Developmental assessments are ongoing (year round) with results discussed with the parent throughout the semester, both daily along with two scheduled parent/teacher conferences, one each fall and spring semester.
- Parents are asked to be involved in their child's planning and assessment via an online journal using the Creative Curriculum assessment program.
- Also, on a daily basis the lead teachers discuss with parents developmental milestones reached, developmental progress, and developmental concerns.
- Both formally and informally the lead teachers will disseminate the screening and assessment information gathered for parents. This process will empower the parents as they will feel informed and more knowledgeable about their child's developmental progress.

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## Photo/Video/Research

Teachers use digital cameras and digital video to capture the activities of children. Documentation of children's activities is used for parents to see what their children are doing in the center, and also a way to broadcast back to children in visual ways what they have been doing. This is how the Center uses and displays photos and video. Occasionally campus newspaper and public relations office ask to take photos of the center for use in their efforts, and when news stories are done about the center. In the event that faculty and students of SCSU propose a research project at the center, a project description and specific permission form will be distributed to parents.

Parents must give permission for children to be photographed or videotaped.

- Permission Form, Appendix III-P

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## Separation from the Group

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

**Prior to being removed from the group classroom teachers must:**

- Attempt less intrusive methods of guiding children's behavior and been ineffective.
- The child's behavior threatens the well being of the child or other children in the program.

**A child who requires separation from the group must:**

- Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person.
- 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
- The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.

*Children between six weeks and 16 months are not separated from the group as a means of behavior guidance.*

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## Suspected Developmental Delay

Procedures to follow when a teacher suspects developmental delay in a child:

1. Periodically, anecdotal observations made by teachers of children reveal possible developmental issues.
2. In such an occurrence, teachers will use a screening tool to inform their observations. Infant and toddler teachers will use the Denver Developmental Screening Test, and the preschool teacher will use the MPSI, and Ages and Stages.
3. Teachers will invite parents to visit with them about the suspicions and the screening results.
  1. No delay signaled by screening tool: teacher should have conversation with parents to discuss what parents see at home in their child's behavior relative to the concerns of the teacher. Perhaps it is important to share developmental milestone fliers with parents at this time. Revisit the issue with the parents at the next conference.
  2. Concern is signaled by screening tool: teacher should schedule a visit with the parents to discuss the screen.
    1. Both parties observe and work on skills. Set 2-3 goals; set timelines; meet again to discuss goal achievement and next steps.
    2. Letter sent directly to physician or school district for formal evaluation.
4. After professional evaluation, the parents, professional staff, teaching staff and any other interested/appropriate party should create an individualized program plan for the child. All staff as appropriate shall implement the plan.
5. Continued conversation between teacher and parents and other professional staff is essential, and should be initiated by the classroom teacher.

(See Child Care for Children with Special Needs, Appendix III-P)

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## Separation Report

All separations from the group will be noted in a daily log that includes;

- Child's name
- Staff person's name
- Time
- Date
- Information indicating what less intrusive methods were used to guide the child's behavior
- How the child's behavior continued to threaten the well being of the child or other children in care

If a child is separated from the group three or more times in one day, the child's parent shall be notified and the parent notification will be noted in the daily log. IF a child is separated five or more times in one week, eight times or more in two weeks, the procedures in Persistent Unacceptable Behavior will be followed.

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## Staff Training

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

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## Teaching the Children

The Center's environments are created to inspire and spark children's curiosity. When children are curious about their world, they explore it and experiment with it. This is the cognitive process that drives learning. Think of the staff as facilitators of learning, not teachers of facts.

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## Allergies/Environmental

We will maintain child and staff areas according to individual environmental health needs. For example, when we cared for a child with a severe sun allergy, we had our windows covered with UV-filtering film. We solicit allergy information from our teaching staff via the Staff Emergency Information Form, and the Staff Health Assessment form, where staff can identify allergies or special health needs and have their health professionals make recommendations to us. We also request this information from parents regarding their children, when parents have the Medical Record and Health Care Summary completed by their health care provider. As part of St. Cloud State University, we are governed by their AWAIR Workplace Accident and Injury Reduction efforts, which comply with respiratory protection programs and indoor air quality.

As stated earlier, we do not allow tree nuts or peanut butter into our center.

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## **Bloodborne Pathogen Exposure Control Plan**

The Lindgren Child Care Center follows a comprehensive bloodborne pathogen exposure control plan. This plan is augmented by the [SCSU Post Exposure control plan](#).

- Bloodborne Pathogen Exposure Control Plan, Appendix IV-B

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## Communicable Disease Reporting

The Lindgren Child Care Center provides information to families verbally and in writing about any unusual level or type of communicable disease to which their child was exposed, signs and symptoms of the disease, mode of transmission, period of communicability, and control measures that are being implemented at the program and that families should implement at home. Good communication among healthcare providers, childcare providers, school health staff, parents/guardians, and the health department can play a major role in preventing the spread of communicable diseases. It is important that parents/guardians let childcare providers and/or school health staff know whenever their children are diagnosed with a communicable disease. The childcare center will, as required by law, notify regulatory agencies as needed of communicable diseases.

### Minnesota reporting rule

Many diseases must be reported to the health department. According to Minnesota rule (MCAR 4605.7040 to 4605.7900), 77 specific diseases are reportable. Disease fact sheets included in Section 6 indicate which diseases are reportable, and reportable diseases are marked with an asterisk (\*) in the table of contents. Childcare providers and school health staff are required by the rule to report diseases to the health department. Some communicable diseases can be very serious, so it is important for parents to notify the classroom teachers immediately with diagnosis information. The Lindgren Child Care Center annually checks with the MDH website for any changes in the disease reporting rule:

[www.health.state.mn.us/divs/idepc/dtopics/reportable/rule/index.html](http://www.health.state.mn.us/divs/idepc/dtopics/reportable/rule/index.html)

**The current list of infectious diseases designated as notifiable in the United States at the national level by the Centers for Disease Control and Prevention (CDC) are listed at**

<https://wwwn.cdc.gov/nndss/conditions/notifiable/2016/infectious-diseases/>.

**The caregiver/teacher should contact the local health department:**

- a. When a child or staff member who is in contact with others has a reportable disease;
- b. If a reportable illness occurs among the staff, children, or families involved with the program;
- c. For assistance in managing a suspected outbreak. Generally, an outbreak can be considered to be two or more unrelated (e.g., not siblings) children with the same diagnosis or symptoms in the same group within one week. Clusters of mild respiratory illness, ear infections, and certain dermatological conditions are common and generally do not need to be reported.

Caregivers/teachers should work with their child care health consultants to develop policies and procedures for alerting staff and families about their responsibility to report illnesses to the program and for the program to report diseases to the local health authorities.

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## Abuse Reporting -- Suspected Child Abuse and Neglect

Lindgren Child Care Center's staff are required by Minnesota state law to report suspected child abuse and/or neglect to the proper authorities. All staff are mandated reporters, and it is not allowed to pass off the obligation to report by telling a lead teacher or director. There are two important levels of child abuse and neglect reporting that must be understood when working at Lindgren Child Care Center:

1. **Reporting suspected abuse/neglect of a child by someone outside of the child care center.** Such incidents must be reported to Child Protection Services (St. Cloud Phone 320-255-6000, ask for Child Protection) the local police (302-255-1200), or the county sheriff.
2. **Reporting of abuse/neglect events that occur within the center itself.** Such incidents must be reported to the Department of Human Services, Division of Licensing. Call 651-431-6600 to make the appropriate report. Any person who in good faith suspects abuse of a minor is obligated to report that suspicion.
3. 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.
4. If you know or suspect that a child is in immediate danger, call 911

### Who Should Report Child Abuse and Neglect

- Any person may voluntarily report abuse or neglect.
- If a person works with children in a licensed facility, he or she are legally required or mandated to report and cannot shift the responsibility of reporting to his or her supervisor or to anyone else at his or her licensed facility. If someone knows or have reason to believe a child is being or has been neglected or physically abused within the preceding three years, he or she must immediately (within 24 hours) make a report to an outside agency.

### What to Report

- Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.566).
- 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.
- 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.

### Retaliation Prohibited

An employer of any mandated reporter shall not retaliate against the mandated reporter for reports made in good faith or against a child with respect to whom the report was made unless it is proven that the report was made to do harm. The Reporting of Maltreatment of Minors Act contains specific provisions regarding civil actions that can be initiated by mandated reporters who believe that retaliations have occurred

### Failure to Report

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

### Internal Review

When the center has information about the reporting of suspected abuse and neglect, either internally or externally, the director will conduct an internal review and take corrective action if necessary.

This internal review will evaluate:

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



At time of report:

- At the time of report, the staff persons will be reassigned to other duties that do not call for unsupervised contact with children until the culmination of the Internal Investigation at which time he/she may return, or be subject towards further investigation.
- Investigation of existing staff will regard to alleged child abuse and neglect shall be pursued by the director, Vice President for Student Life and Development, and the appropriate enforcement agencies.
- Persons suspected of child abuse and/or neglect may be reassigned, suspended, or terminated from their employment at the Lindgren Child Care Center and the University.
- It shall be the policy of the Lindgren Child Care Center to not hire a staff person convicted of or admitting to or been the subject of substantial evidence of an act of child battering, child abuse, child molestation, or crimes of moral turpitude or debasement. All staff will be required to submit information for criminal background checks before working directly with children.

#### **Primary & Secondary Positions to Ensure Internal Reviews are completed**

The internal review will be completed by the director. If this individual is involved in the alleged or suspected maltreatment the associate director will be responsible for completing the internal review.

#### **Documentation**

Documentation of internal review will be completed and will be provided to the commissioner upon request.

#### **Corrective Action Plan**

Based on the results of the internal review, the Lindgren Child Care Center will 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.

#### **Staff Training**

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

## Diapering

Infants, toddlers, and some preschoolers need diapering. Your teacher in each area has specific diapering instructions you must follow for each child. Cleanliness, health, and safety are the most important components of all these procedures.

For children who are unable to use the toilet consistently, the program makes sure that:

- For children who require cloth diapers, the diaper has an absorbent inner lining completely contained within an outer covering made of waterproof material that prevents the escape of feces and urine. Both the diaper and the outer covering are changed as a unit.
- Cloth diapers and clothing that are soiled by urine or feces are immediately placed in a plastic bag (without rinsing or avoidable handling) and sent home that day for laundering.
- Staff check children for signs that diapers or pull-ups are wet or contain feces (a) at least every two hours when children are awake and (b) when children awaken.
- Diapers are changed when wet or soiled.
- Staff change children's diapers or soiled underwear in the designated changing areas and not elsewhere in the facility.
- Each changing area is separated by a partial wall or is located at least three feet from other areas that children use and is used exclusively for one designated group of children. For kindergartners, the program may use an underclothing changing area designated for and used only by this age group. (This indicator only is an Emerging Practice.)
- At all times, caregivers have a hand on the child when the child is being changed on an elevated surface.
- Surfaces used for changing and on which changing materials are placed are not used for other purposes, including temporary placement of other objects, and especially not for any object involved with food or feeding.
- Containers that hold soiled diapers and diapering materials have a lid that opens and closes tightly by using a hands-free device (e.g., a step can).
- Containers are kept closed and are not accessible to children.

Staff members whose primary function is preparing food do not change diapers until their food preparation duties are completed for the day.

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## Food and Nutrition

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

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

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

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

This institution is an equal opportunity provider.

Our meal service times for toddlers, preschoolers, and infants over one year are:

- 8:30 a.m. breakfast
- 11:00 a.m. lunch
- 2:00 – 2:30 p.m. snack

Babies under one year eat at the times most appropriate to them as shared by their parents with the infant teacher.

The Center prepares the breakfast and snacks on-site from simple foods requiring little preparation. The hot noon meal is catered by our on-campus food service, SODEXHO, Inc. Food preparation here at Lindgren occurs using sanitary procedures for staff to follow.

The center will supply breakfast, lunch and an afternoon snack for children, and appropriate foods for infants.

### Breastfeeding

The 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.

### Choking Hazards

The Center does not the following foods at any time: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonfuls of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole.

Staff cut foods into pieces no larger than 1/4-inch square for infants and 1/2-inch square for toddlers/twos, according to each child's chewing and swallowing capability.

### Infants/Toddlers

- The Lindgren Child Care Center 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.

- Infants unable to sit are held for bottle-feeding. All others sit or are held to be fed. 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. 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.
- 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.
- 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. 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.
- 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.

### **Menus**

Center menus are prepared and posted in every classroom on the refrigerators. These menus are prepared between the director, teachers, and the staff at SODEXHO, Inc, the caterer. They are kept on file for review by Dr. Brenda Lenz, who serves as our health consultant. Copies of the entire menu cycle are available to parents on request. Because we participate in the CACFP, the menus are also reviewed by specialists in the Child Nutrition Section of the Minnesota Department of Education, who administers our participation in the CACFP.

### **Special Diet**

On rare occasions children have medical dietary needs. Parents may request alternative foods, but in order for the Center to continue receiving reimbursement for that meal, parents must have their doctors complete a Special Dietary Request. These are available from the director.

- Allergy/Food Exemption Statement, Appendix IV-C

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## Children's Files

In accordance with Minnesota State Licensing requirements, parents must submit a statement certifying the date of the child's last physical examination, the child's immunization records, a list of specific health needs, and the name, address and telephone number of the child's physician. The following forms are required:

Contract for Service

Medical Record and Health Care Summary Child  
Care Immunization Record

Family and Cultural Information Form

Food Allergy Action Plan (If Applicable)

## Confidentiality

- All information obtained regarding any center family/child(ren) is considered confidential.
- Information within a child's file will be available to the director, lead staff, and assistant teachers in the absence of lead staff. The lead teachers may use the Family and Cultural Information from during in-service trainings to identify children's interests and needs.
- Practicum students and volunteers are not to be included in discussions of children and families, except for information which is relevant in order for them to complete their objectives.
- All confidential materials will remain in a lockable filing cabinet in the office.
- All parents/guardians may gain access to their child's information by either asking the lead teacher, or director.
- No information can be shared with an outside agency without written consent from the legal guardian. The decision to share information will be made by administrative staff (lead teachers, director).
- On request, the Regulatory authorities (Minnesota Department of Human Services) of the Lindgren Child Care Center will have access to our confidential materials.
  
- Medical Record and Health Care Summary Appendix IV-D
- Child Care Immunization Record, Appendix IV-E
- Administration of Diaper Rash Ointments, etc., Appendix IV-F

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## Hand Washing

### *How to wash hands:*

- Rub hands together vigorously for at least 20 seconds using warm running water and liquid soap.
- Wash under fingernails, between fingers, back of hands, and wrists.
- Rinse hands.
- Dry hands with a single-use paper towel.
- For hand-held faucets, turn off water using a paper towel instead of bare hands to avoid recontamination of clean hands.

The program follows these practices regarding hand washing:

- Staff members and those children who are developmentally able to learn personal hygiene are taught hand-washing procedures and are periodically monitored.
- Hand washing is required by all staff, volunteers, and children when hand washing would reduce the risk of transmission of infectious diseases to themselves and to others.
- Staff assists children with hand washing as needed to successfully complete the task. Children wash either independently or with staff assistance.
- If a situation may arise that a hand washing sink is not available, children over 24 months may be permitted to sanitize their hands using a hand sanitizer with 60-95% alcohol based product.

Children and adults wash their hands

- on arrival for the day;
- after diapering or using the toilet (use of wet wipes is acceptable for infants);
- after handling body fluids (e.g., blowing or wiping a nose, coughing on a hand, or touching any mucus, blood, or vomit);
- before meals and snacks, before preparing or serving food, or after handling any raw food that requires cooking (e.g., meat, eggs, poultry);
- after playing in water that is shared by two or more people;
- after handling pets and other animals or any materials such as sand, dirt, or surfaces that might be contaminated by contact with animals; and
- when moving from one group to another (e.g., visiting) that involves contact with infants and toddlers/twos.

Adults also wash their hands

- before and after feeding a child;
- before and after administering medication;
- after assisting a child with toileting; and
- after handling garbage or cleaning.

Except when handling blood or body fluids that might contain blood (when wearing gloves is required), wearing gloves is an optional supplement, but not a substitute, for hand washing in any required hand-washing situation listed above.

- Staff wears gloves when contamination with blood may occur.
- Staff does not use hand-washing sinks for bathing children or for removing smeared fecal material.
- In situations where sinks are used for both food preparation and other purposes, staff clean and sanitize the sinks before using them to prepare food.

When accident or injury warrants, the child will receive First Aid as necessary, and if the emergency is immediate, 9-911 will be called and the parent will be notified.

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### **Health Consultant**

Sigrid Hedman-Dennis MSN, RN, APRN-CNS, BC Assistant Professor within St. Cloud State's Nursing Sciences, has agreed to act as advisor to the Lindgren Child Care Center on questions the staff may have regarding child health situations. A health consultant confers monthly with LCCC along with annually reviewing all health care policies.

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## Hepatitis B Vaccine

All of our staff are given the option to have a HBV vaccination because of the exposure to blood or other infectious materials. The staff fill out a form stating when they have had the vaccination series, when they have scheduled the vaccination series, or if they decline the vaccination. If staff do not have the vaccination but choose to get it, the Center will reimburse them for the cost.

Staff Health Assessment, Appendix IV-H

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## Hospital Information

If a child becomes seriously injured, the Center will call Gold Cross Ambulance Services for transport to the St. Cloud Hospital emergency room. Parents will be notified to go to the hospital. A staff person will accompany the child to the Emergency Room and will stay until parents arrive. Below is the address and phone number of the St. Cloud Hospital.

St. Cloud Hospital  
1406 6th Avenue N.  
St. Cloud, MN 56303  
320-251-2700

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## **Illness and Exclusion of Children**

All children become ill at one time or another, to be proactive we ask that all families have a backup plan for child care in the event of short or long-term exclusion. Teaching Staff will make the final decision about whether children may need to be excluded from care. The decision will be based on the program's inclusion/exclusion criteria and their ability to care for the child who is ill without compromising the care of other children in the program. The family's description of the child's behavior will be considered when determining whether the child is well enough to return. A primary health care provider's note may be required to readmit a child to determine whether the child is a health risk to others, or if guidance is needed about any special care the child requires.

Daily health checks are performed upon arrival of each child each day. Throughout the program day, Teaching Staff will objectively determine if the child is ill or well and will notify the parent/guardian when a child develops new signs or symptoms of illness. Parent/guardian notification will be immediate for emergency or urgent issues. For children whose symptoms do not require exclusion, staff may provide verbal or written notification as symptoms appear, or at the end of the program day.

### **Key criteria for exclusion of children who are ill:**

When a child becomes ill but does not require immediate medical help, a determination will be made regarding whether the child should be sent home (i.e., should be temporarily "excluded" from child care). In addition to specific criteria found below in a-u, primary determining criteria that is always considered includes an illness which:

- **Prevents the child from participating comfortably in activities;**
- **Results in a need for care that is greater than the Teaching Staff can provide without compromising the health and safety of other children;**
- **Poses a risk of spread of harmful diseases to others.**

Temporary exclusion is recommended when the child has any of the following conditions:

- a) The illness prevents the child from participating comfortably in activities;
- b) The illness results in a need for care that is greater than the staff can provide without compromising the health and safety of other children;
- c) A severely ill appearance - this could include lethargy/lack of responsiveness, irritability, persistent crying, difficult breathing, or having a quickly spreading rash;
- d) Fever (temperature above 101°F [38.3°C] by any method) with a behavior change in infants older than 2 months of age. For infants younger than 2 months of age, a fever (above 100.4°F [38°C] by any method) with or without a behavior change or other signs and symptoms (e.g., sore throat, rash, vomiting, diarrhea) requires exclusion and immediate medical attention;
- e) Diarrhea - defined by stools that are more frequent or less formed than usual for that child and not associated with changes in diet. Exclusion is required for all diapered children whose stool is not contained in the diaper and toilet-trained children if the diarrhea is causing "accidents". In addition, diapered children with diarrhea should be excluded if the stool frequency exceeds two stools above normal for that child during the time in the program day. Readmission after diarrhea can occur when diapered children have their stool contained by the diaper (even if the stools remain loose) and when toilet-trained children are not having "accidents" and when stool frequency is no more than 2 stools above normal for that child during the time in the program day;
- f) Vomiting more than two times in the previous twenty-four hours, unless the vomiting is determined to be caused by a non-infectious condition and the child remains adequately hydrated;
- g) Abdominal pain that continues for more than two hours or intermittent pain associated with fever or other signs or symptoms of illness;

- h) Mouth sores with drooling that the child cannot control unless the child's primary care provider or local health department authority states that the child is noninfectious;
- i) Rash with fever or behavioral changes, until the primary care provider has determined that the illness is not an infectious disease;
- j) Active tuberculosis, until the child's primary care provider or local health department states child is on appropriate treatment and can return;
- k) Impetigo, only if child has not been treated after notifying family at the end of the prior program day. Exclusion is not necessary before the end of the day as long as the lesions can be covered;
- l) Streptococcal pharyngitis (i.e., strep throat or other streptococcal infection), until the child has two doses of antibiotic (one may be taken the day of exclusion and the second just before returning the next day);
- m) Head lice, only if the child has not been treated after notifying the family at the end of the prior program day. (note: exclusion is not necessary before the end of the program day);
- n) Scabies, only if the child has not been treated after notifying the family at the end of the prior program day. (note: exclusion is not necessary before the end of the program day);
- o) Chickenpox (varicella), until all lesions have dried or crusted (usually six days after onset of rash and no new lesions have appeared for at least 24 hours);
- p) Rubella, until seven days after the rash appears;
- q) Pertussis, until five days of appropriate antibiotic treatment;
- r) Mumps, until five days after onset of parotid gland swelling;
- s) Measles, until four days after onset of rash;
- t) Hepatitis A virus infection, until one week after onset of illness or jaundice if the child's symptoms are mild or as directed by the health department. (Note: Protection of the others in the group should be checked to be sure everyone who was exposed has received the vaccine or receives the vaccine immediately.);
- u) Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

If any of the above criteria are met, the child will be excluded, regardless of the type of illness.

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## Immunizations

The Minnesota Department of Health requires each child's immunizations to be up to date in order for him or her to be enrolled in the center. The recommended schedule is available at doctor offices or at [www.health.state.mn.us/divs/idepc/immunize/schedules.html](http://www.health.state.mn.us/divs/idepc/immunize/schedules.html).

Office staff check children's immunizations periodically to be sure all children are keeping up to date on their immunizations. If immunizations have not been or are not to be administered because of a medical condition (contraindication), a statement from the child's primary care provider documenting the reason why the child is temporarily or permanently medically exempt from the immunization requirements should be on file. If immunizations are not to be administered because of the parents/guardians' religious or philosophical beliefs, a legal exemption with notarization, waiver or other state-specific required documentation signed by the parent/guardian should be on file.

The parent/guardian of a child who has not received the age-appropriate immunizations prior to enrollment and who does not have documented medical, religious, or philosophical exemptions from routine childhood immunizations should provide documentation of a scheduled appointment or arrangement to receive immunizations. This could be a scheduled appointment with the primary care provider or an upcoming immunization clinic sponsored by a local health department or health care organization. An immunization plan and catch-up immunizations should be initiated upon enrollment and completed as soon as possible according to the current "Recommended Immunization Schedules for Persons Aged 0 Through 18 Years – United States" from the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP).

If a vaccine-preventable disease to which children are susceptible occurs in the facility and potentially exposes the unimmunized children who are susceptible to that disease, the health department/consultant will be consulted to determine duration of exclusion to minimize possible exposure, or until the appropriate immunizations have been completed.

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## Administration of Drugs/Medications

Routine or "as needed" medications are not administered by the staff. This includes medications for asthma (inhaler or neb), pain, fever (Tylenol, Advil), antibiotics, cough syrup, and others. Parent(s) are welcome to stop by the center to administer medications they wish their child to have. It is up to the parent(s) to store and transport any medications. [Lockers are available throughout the campus]. Parent(s) of children with asthma are urged to consult their physician about an "asthma action plan" developed in regards to this medication policy. For example – having the parent administer an short-acting bronchodilator (Albuterol) inhaler prior to playing outside to avoid an asthma attack.

All staff at the LCCC will be trained to administer medications necessary to sustain life (i.e. heart, lung, and diabetic medication) only with written permission from parents and written directions signed by the physician ordering such medications. All staff reserve the right to request specific training regarding administration of meds prior to complying with doctor's directions. Staff will administer medications during a life-threatening event. For example an anaphylactic shock (epinephrine injection).

- The parent(s) needs to provide the director with a current physician order (within a year) indicating medication, dose, route, along with specific directions as to when (what symptoms) the child should receive this medication.
- The medication container must be clearly labeled from the pharmacy with the child's name, dose, route, directions, and expiration date. The medication must be "current" and not "expired." This medication will be stored in the office, in a cabinet clearly labeled with a Red Cross.
- Following administration of epinephrine the emergency services will be called and the parent notified.
- It is the responsibility of the parent to replenish the medication stored in the center and to ensure the medication is current (not expired).

The Lindgren Child Care Center asks all parents to give the Center written permission to use non-prescription medications, other than Center ointments, wipes, and sunscreen, to children.

Written parent permission is required for staff to use any diaper rash ointments, diaper wipes, and commercial sunscreen, Sunscreen will only be used on children over 6 months of age.

## Outdoor Safety

To protect against cold, heat, sun injury, and insect-borne disease, the program ensures that:

- Children wear clothing that is dry and layered for warmth in cold weather.
- Children have the opportunity to play in the shade. When in the sun, they wear sun-protective clothing, applied skin protection, or both. Applied skin protection will be either sunscreen or sun block with UVB and UVA protection of SPF 15 or higher that is applied to exposed skin (only with written parental permission to do so).
- When public health authorities recommend use of insect repellents due to a high risk of insect-borne disease, only repellents containing DEET are used, and these are applied only on children older than two months. Staff apply insect repellent no more than once a day and only with written parental permission.

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### **Procedures for a Child Who Requires Exclusion:**

Teaching Staff must decisions about caring for the child while awaiting parent/guardian pick-up on a case-by-case basis providing care that is comfortable for the child considering factors such as the child's age, the surroundings, potential risk to others and the type and severity of symptoms the child is exhibiting. The child should be supervised by Teaching Staff who knows the child well and who will continue to observe the child for new or worsening symptoms. If symptoms allow the child to remain in their usual care setting while awaiting pick-up, the child should be separated from other children by at least 3 feet until the child leaves to help minimize exposure of staff and children not previously in close contact with the child. All who have been in contact with the ill child must wash their hands. Toys, equipment, and surfaces used by the ill child should be cleaned and disinfected after the child leaves.

Teaching Staff will discuss the signs and symptoms of illness with the parent/guardian who is assuming care along with a review of guidelines for return to child care. If necessary, provide the family with a written communication that may be given to the primary care provider. The communication should include onset time of symptoms, observations about the child, vital signs and times (e.g., temperature 101.5°F at 10:30 AM) and any actions taken and the time actions were taken (e.g., one children's acetaminophen given at 11:00 AM). The nature and severity of symptoms and or requirements of the local or state health department will determine the necessity of medical consultation. Telephone advice, electronic transmissions of instructions are acceptable without an office visit;

- a. If the child has been seen by their primary health provider, follow the advice of the provider for return to child care;
- b. If the child seems well to the family and no longer meets criteria for exclusion, there is no need to ask for further information from the health professional when the child returns to care. Children who had been excluded from care do not necessarily need to have an in-person visit with a health care provider;

- c. Lead Staff/Director will contact the LCCC health consultant if there is a question of a reportable (harmful) infectious disease in a child or staff member in the facility. If there are conflicting opinions from different primary care providers about the management of a child with a reportable infectious disease, the health consultant's will make a final determination;
- d. Document actions in the child's file with date, time, symptoms, and actions taken (and by whom); sign and date the document;
- e. In collaboration with the local health department, notify the parents/guardians of contacts to the child or staff member with presumed or confirmed reportable infectious infection.

Teaching Staff make the decision about whether a child meets or does not meet the exclusion criteria for participation and the child's need for care relative to the staff's ability to provide care. If parents/guardians and the child care staff disagree, and the reason for exclusion relates to the child's ability to participate or the caregiver's/teacher's ability to provide care for the other children, the caregiver/teacher should not be required to accept responsibility for the care of the child.

## Pets

We will keep fish as pets. All other pets are prohibited. Should we consider hosting visiting animals, we would require veterinarian documentation of full immunization, and notes from the veterinarian regarding the suitability of the animal's nature and temperament for close proximity with children. If a child who is allergic to a particular animal is in our care, that would prevent said animal from visiting. We do not keep reptiles.

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## Staff Illness

In addition to children, staff should also be excluded from the child care facility under certain circumstances, including if they are unable to participate or perform the functions required for their position or if they are suffering from certain infectious diseases. A staff member or staff means any person working or volunteering to perform duties in a child care facility, including caregivers.

Directors/Lead Teachers are responsible for observing the staff for signs of illness throughout the day. Staff members have the responsibility of reporting, to the director or person in charge, any signs of infection or illness that may pose a hazard to the health of children and other staff. If a staff member is sent home, it is important to know when that person will be able to return to work.

Special attention must be given to staff members that handle food because many illnesses can be spread through food from an infected person. Additionally, children under the age of five years old and those with weakened immune systems are at increased risk for foodborne illness. Food handling activities include preparation of any food (i.e. washing, cutting, cooking, and portioning), the mixing and feeding of bottles, and feeding infants and toddlers solid foods. Food handling staff must notify the director or person in charge if they exhibit any of the following symptoms:

1. Vomiting;
2. Diarrhea;
3. Jaundice;
4. Sore throat with fever; or
5. Any open or draining wound that is not covered with a water proof bandage and is:
  - a. On the hands or wrists\*;
  - b. On any exposed portions of the arms; or
  - c. On other parts of the body.

Any ill teaching staff member may return to work based on the same exclusion policy we have for the children at the LCCC. Please refer to the Illness and Exclusion in the parent handbook for greater detail.

Staff members are scheduled to work according to a staff to child ratio dictated by state law. Therefore it is impossible for a staff member not to work when scheduled. The Center encourages staff to take good care of their health. If staff members should need to have a substitute based on the information above, he or she will be required to post a request on GroupMe to find a sub for the specified shift. Telephone and availability lists will be available, and staff must inform the center of their sub. Frequent substitutions may be cause for dismissal.

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## Taking the Child's Temperature

- Take the child's temperature with the Temporal Scanner, located in the pink basket above the cupboard above the receptionist's desk in the office, to determine the magnitude of the child's fever. Follow directions in the Temporal Scanner booklet.
- If the fever is above 100°F, notify parents, as child needs to go home.
- Make child comfortable... remove clothes if hot or cover with blankets if child has chills.
- Encourage water unless child is nauseated.

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## Tooth Brushing

Our Lindgren Child Care Center program serves two meals and a snack during our operation day. Therefore our infant (for babies older than one year), toddler, and preschool rooms provide an opportunity daily for tooth brushing and gum cleaning. We choose not to use toothpaste.

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## Water/Sensory Tables

Children in the infant, toddler, and preschool rooms make extensive use of water sensory tables in their classrooms. Water tables are drained at the end of each day, and sprayed with sanitizing solution. Water table toys are washed with soapy water and dried, or put through the dishwasher. Children are to wash their hands in the hand washing sink after water play because their hands are wet, typically have washed their hands before water play because it is offered when they come in from a large-motor time, have toileted and washed their hands. They are discouraged from participating in water play if they have obvious and visible open sores. Water tables are filled each day of their use with fresh tap water.

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## Accident Prevention

The environment is arranged to be safe.

- Hazardous and potentially toxic substances will be locked and kept out of the children's reach. Surfaces are covered with non-toxic substances, and all room furnishings are safety approved.
- Staff will be trained in keeping size of playthings age appropriate.
- Infant's bottles will not be propped-up.
- The kitchen area is an adult-only area.
- All electrical outlets are equipped with safety plugs.
- Traffic area and sidewalks are designated as high priority for snow removal.
- The director inspects the facility periodically for potential hazards and corrections.
- Twice a year the accident log is evaluated for hazardous areas.

Upon arrival each classrooms opening staff will conduct a daily inspection of potential hazards within their designated classrooms. Prior to children playing on the playground a staff member will conduct similar inspections to the outdoor area.

Where appropriate, proper accident prevention and safety procedures will be taught to the children. Environment regulations will prohibit climbing on furnishings other than designated climbers, and prohibit the putting of small objects in the mouth.

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## Accident Reports

If a child receives a scrape, bump, or bite that requires First Aid and attention, staff must complete an Accident Report. Accident Reports are located on the receptionist's desk. The staff member must give an accurate description of what happened, and what he or she did via First Aid (washed with warm soapy water, boo boo bunny, etc.) Giving hugs and sympathy are important parts of treatment as well and can be noted. Staff should make sure the date, time, and place of accident are reported. The yellow copy goes into the child's cubby for the parent, and the white copy goes to the office. If an incident involves another child, it is important to not identify that child by name...it's confidential.

- Accident Report, Appendix V-A

## Arrivals/Departures and Access to the Center

We ask that all parents utilize the main entrance at the South end of the Engineering and Computing Center (ECC Building) with dropping off and picking up children. Upon enrollment, the director will electronically send St. Cloud State Public Safety the affiliated student/faculty/staff tech id number. Public Safety will then log the parent into the appropriate schedule giving access to the center. Parents are to use their St. Cloud State University ID for access through the door swipe on each door. Parents who forget their ID, new parents who have not yet received an id, and visitors must use the intercom system located in the small vestibule at the main (South) Entrance to gain entrance. After swiping your id, please remember to close the door behind you as we require that each family independently gains access while entering the Lindgren Child Care Center. When any person discontinues affiliation with the center, access to the center will also be removed.

Parents and authorized adults must accompany children into and out of the center at all times, and must sign children in and out using the Procure card swipe system when coming and going. Parents are encouraged to keep routine arrival and departure schedules for optimum staffing. Children that receive special services and are transported by that third party will be signed out by the staff person responsible in walking the child to the bus/transportation vehicle. After the student arrives back at the center the staff person responsible in resuming care will sign the child back into care.

For the safety of yourself, your family and other families; leaving your vehicle idling is extremely discourage in both extreme heat and cold temperatures.

## Authorized to Pick Up Children

Parents must pick up their own children. In certain instances, they ask others to pick up their children.

### Authorized person

The parent will notify the Center when an individual they have designated as authorized on their registration form will be picking up their child. Children are only released to authorized persons. If a parent tells staff that someone else will be picking up their child staff must check to be sure that person is identified as authorized on the registration form. If they are not, staff must ask the parent to write in their name. Authorization is not done over the telephone.

When an authorized person comes to pick up a child, staff should:

1. Ask the name of the person attempting to pick up the child.
2. 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.
3. Check child's file in the office to see if that person is listed as authorized.
4. Release the child only after verifying the person's identity and with parent/guardian authorization.

### Unauthorized person

If the person attempting to pick up the child is not listed or is listed as unauthorized, staff should call SCSU law enforcement immediately by dialing 9-911. Tell the unauthorized person that the Center cannot release children to anyone other than those listed as authorized, and that they are not listed.

### Incapacitated person

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:

1. Tell them he or she would prefer they not drive; his or her concern is for the family.
2. Offer to call them a cab/uber, or a friend to drive them.
3. Tell them that if they chose to drive with their child, you are responsible to call 911 and report, along with making a Maltreatment report to social services.
4. Call the St. Cloud Police if they leave with the child.

## Release of Children

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

Verbal permission will be accepted over the phone ONLY if that person is already authorized. If the parent or authorized adults are unavailable or cannot be reached by 30 minutes after closing time, the center will contact the Child Protective Services to take custody of the child.

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. 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.

## Charge for Picking-Up Late Children

The center closes at 5:30 p.m. during fall and spring semesters and 5:00 p.m. summer. We expect children to be picked up by those times. Two things happen when you are late picking-up your child. First, your child becomes anxious about why you are late. Second, staff (who have lives outside of the center) are detained past their scheduled time and are late for their evening commitments. If children are picked up after 5:40 p.m. (or 5:10 p.m. summer) according to Center clock, a \$50.00 late fee will be applied per child. After 5:50 p.m. (or 5:20 p.m. summer) according to Center clock, an additional \$100.00 will be applied per child. At this time Child Protection will be notified to take custody of the children.



## Cleaning and Disinfecting

The Center cleans and disinfects to effectively control germs by frequent and thorough hand washing and cleaning and disinfecting surfaces. The Center does it whether dirt is visible or not, knowing that germs are invisible. Disinfecting is the process of destroying harmful germs on surfaces using specific products, and in the child care industry household bleach is the product recommended by the Centers for Disease Control, American Academy of Pediatrics, and US Health Department.

The Center bleaches tables, changing tables, high chairs, and other hard-surface center items. Staff make bleach fresh each morning in the following proportions:

Type of Surface	Amount of Bleach ULTRA	Amount of Water
Hard Surfaces: Changing tables	1 ¼ tsp.	1 pint = 2 cups
Tables, high chairs, mouthed toys	¼ tsp.	1 pint = 2 cups

Each classroom maintains a Cleaning and Sanitizing Checklist (example in this folder) at least by task, and some also by named teaching staff responsible. Teaching staff perform these cleaning and sanitizing tasks daily. These Cleaning and Sanitizing Checklists are designed from the above-mentioned as recommended by NAEYC's "Cleaning, Sanitizing, and Disinfecting Frequency Table." Our custodian is responsible for toilets, mopping floors, vacuuming, carpet cleaning monthly, trashes, and these tasks are taken care of on a nightly basis.

We identify the following:

- Cleaning: washing dirt with soap and water
- Sanitizing: removing dirt and bacteria, i.e. bleach water

Depending on the classroom, we either sanitize hats after each wearing (toddler room) or we do not use hats in that dramatic play area (preschool and infant rooms).

- Floors, toilet seats, and changing table tops can all be sanitized, and we also use a disposable barrier on all changing tables. Additionally the custodian mops floors every day with disinfectant.
- Staff uses vinyl gloves when managing blood and bowel movements.
- Children with impetigo are asked to wear bandages over their lesions.
- Staff cleans blood with blood-borne pathogen clean up kits supplied by St. Cloud State University.
- Toilet accidents are cleaned with soap and water.
- Vomit is cleaned up using special clean-up kits, followed by immediate shampooing of carpets if the vomit hits a carpeted area.
- Staff sanitizes nonporous surfaces using bleach water.
- Staff clean infant and toddler carpets of spit-up immediately by spot cleaning with detergent, and bleach water;
- Staff disposes of contaminated materials and diapers in closed plastic bags.
- All mouthed toys are washed in the dishwasher. There are containers in both the infant and toddler rooms where staff place mouthed toys, and these are washed in the dishwasher daily, and BEFORE they are again presented to children. Preschool toys that go into the mouth are removed from the children's area and washed and sanitized with spray, or are placed in the dishwasher.

All surfaces are cleaned using a 3 step process: 1)soapy water 2) clear water 3) diluted bleach solution sprayed and sit for 2 minutes.

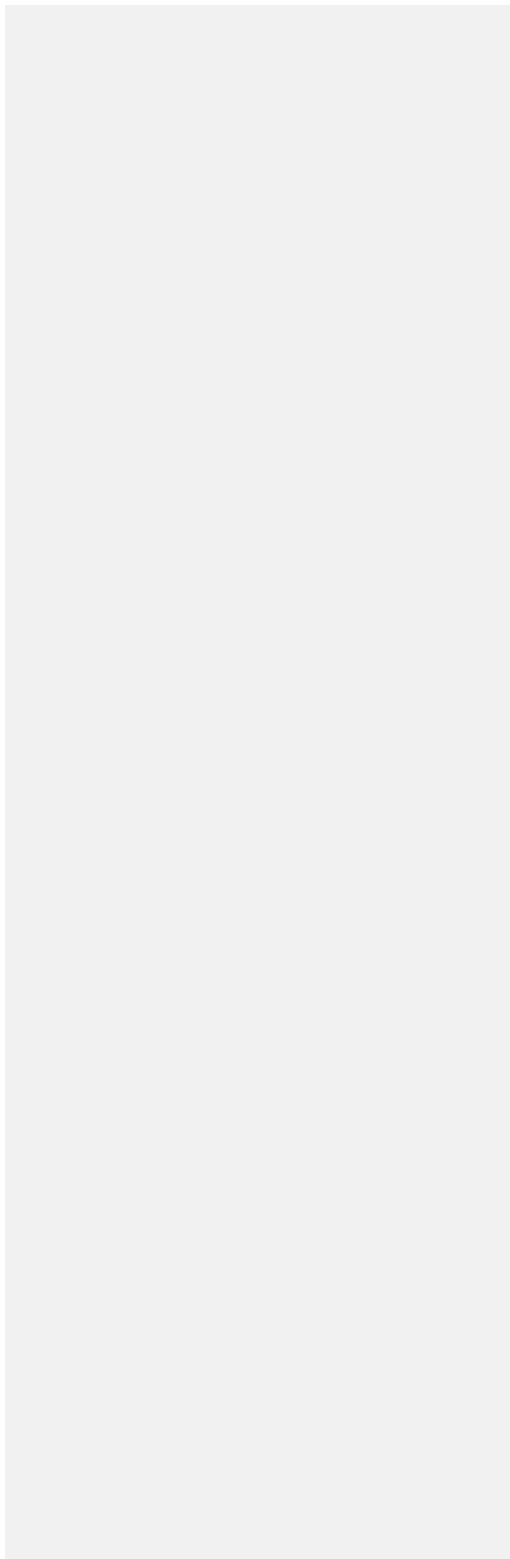
All staff use gloves when changing BM diapers, or dealing with blood. Vomit and blood clean-up kits are kept in the center for use by staff. Immediate calls to custodial or hazardous waste pick-up staff is made when these substances are cleaned up, and the collected materials includes any paper towels and gloves used in the clean-up.

If vomit, feces, or urine gets onto carpeting, we also immediately call custodial staff to clean the area commercially. Until the clean-up occurs, the area is covered with cloth and a chair.

Small area rugs are laundered weekly, our carpets cleaned monthly by the custodian. When small 'urps' happen on the carpet in the infant room, they are cleaned with water and detergent, then clear water, then sprayed with diluted bleach solution.

All diapers are placed in closed hands-free diaper receptacles in their respective changing areas.

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## Confidentiality

Children are a huge source of enjoyment and provide a constant supply of great stories. As parents and their child attend LCCC they will become familiar with the other children and families, and may wish to share stories. Parents must maintain confidentiality of identity when talking about their child's activities and place of care. The Lindgren Child Care Center expects the same of parent users as LCCC staff; that conversations outside the center not identify children and families to others.

All staff are required to keep all knowledge about the children confidential, even if staff become friends with parents. This includes:

- All information obtained regarding any center family/child(ren) is considered confidential.
- Information obtained and collected by our program can be shared with other staff on a "need to know" basis. Please remember that practicum students and volunteers are not to be included in discussions of children and families, except for information which is relevant in order for them to complete their jobs. Sensitive information must not be shared with everyone, only those persons who are directly involved. No information can be shared with an outside agency without written consent from the legal guardian. The decision to share information will be made by administrative staff (lead teachers, director).
- All confidential materials must remain in a lockable filing cabinet in the center.
- If any materials appear to be missing, notify administrative staff immediately.
- Do not discuss families or children in the presence of other families or children.
- If a family begins discussing another family or child, quickly inform them you cannot do that, and it is not appropriate for them to do so, either.
- All information compiled during screenings and assessment will be used to promote the healthy developmental growth of the child. The lead staff along with the participation of parents will review the completed information and together make goals for the child or a referral in cases of developmental delay.
- No information can be shared with an outside agency without written consent from the legal guardian. The decision to share information will be made by administrative staff (lead teachers, director).
  - Informed Consent, Appendix III-J
  - Consent to Release Private Data, Appendix III-K
- On request, the Regulatory authorities (Minnesota Department of Human Services) of the Lindgren Child Care Center will have access to our confidential materials.

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## Food Safety

We employ a number of methods to protect children with food allergies from contact with the problem food. We work with catering staff to have a recommended alternative food provided for that child. Center staffs that purchase breakfast and snack foods are skilled at label reading to avoid purchase of foods with tree nut oils, and any peanut product. We consider ourselves a nut-free center; however know that food production at our caterers is not nut-free. We allow no foods from homes to be brought in and served in the center, indicated in our Operations Manual, as a final way to protect children from outside foods. When we prepare lists of children's names with food allergies for posting in our food preparation areas, we actually cover-up the list with a piece of construction paper, but food production staff lift up the cover often to remind themselves who has what food allergy or preference.

It is our policy to honor food preferences whenever we can. For instance, we always honor to the best of our abilities, Muslim requests that their children not be served pork. If families wish their children to remain vegetarian we also find sufficient protein sources to feed those children in lieu of meat.

## Food Preparation and Storage

The Lindgren Child Care Center takes steps to ensure food safety in its provision of meals and snacks Staff discard foods with expired dates. The program documents compliance and any corrections that it has made according to the recommendations of the program's health consultant, nutrition consultant, or a sanitarian that reflect consideration of federal and other applicable food safety standards.

### Food Guidelines

1. Wash hands before beginning **any** work in the food preparation area, i.e. before making bleach, cleaning food prep area touching any food container/dish, washing dishes, putting dishes away, cleaning tables...always wash your hands!
2. Milk expiration dates must be checked daily to ensure freshness.
3. If fruit is taken from a #10 can and leftovers exist, the remaining may be stored for future use. Do not store unused food in the can. Empty into plastic containers (under sink) and cover or use zip-type storage bags. Label and date all stored items.
  - All fruit from a #10, can may be served to children within two days of the can being opened. It is imperative that food is labeled and dated correctly.
4. Unused fruit juice from concentrate must be labeled and dated and stored in a sealed container. Label and date all stored items.
  - All juice from concentrate may be served to children within two days of the juice being prepared. It is imperative that all juice is labeled correctly.
5. If a fruit or vegetable will be served, thoroughly wash the fruit/vegetable under cold running water, rubbing away any bacteria. Cut fruit and vegetables on a clean cutting board or plat with a clean knife. Due to allergies and cross-contamination, do not use the same knife without rewashing before cutting another product.
6. Foods catered from Sodexo will be served at the designated lunch period. Any cut up/prepared fresh fruit that is leftover from the lunch service may be used for snack on the day of service. Any remaining prepared fresh fruit must be disposed at the completion of snack.
7. Uncut/unprepared fresh fruit delivered by Sodexo food service will remain refrigerated until use (with the exception of bananas which will be kept in a bowl above the refrigerator.) It is the responsibility of the breakfast food preparation staff person to evaluate all fruit for freshness.
8. Any leftover cold cuts delivered by Sodexo may remain refrigerated and used on the date of services and then disposed of unless expiration date from Sodexo is stated differently. For instance, this periodically may happen to keep turkey meat on hand for children that do not eat beef or pork.
  - Sealed cold cuts that are opened at the center must be labeled, dated, and stored in a sealed container. These meats may be used for up to 10 days from the date of opening or the expiration date, whichever come first. After lunch is completed extra food containers are to be dumped into red garbage can and stacked for washing...before washing ny dishes countertop must be washed and bleached
10. After meals all leftover food is put into bucket by the children, buckets are then dumped into the red garbage can at the end of the counter, this needs to be emptied after lunch dishes are completed.

## Foods from Home

Our standard operational procedures prohibit foods brought into the center from homes with the following

exceptions:

- Parents bring in filled and ready-to-serve baby bottles for their babies if they prefer to feed a formula other than that which we provide;
- Parents bring in breast milk, either fresh or frozen, for their babies to drink;
- Bottles are labeled with the baby's first and last name, and the date and time that the formula was prepared or the breast milk was pumped;
- Each autumn we host a Fall Family Potluck, when parents and staff bring dishes to share.

### **Special Feeding Needs**

The center enrolls children with special needs whenever feasible for the child and the center. If a child currently enrolled develops signs of special needs, center staff continues to work with families sharing resources and support. Our participation in the CACFP, and its Civil Rights policy for reasonable accommodation, would also require us to make food substitutions, modifications, and records for families. Infant food intake is recorded every time a baby ingests food, and that record is available to parents each day, posted on the front of that baby's locker. When children older than infants have special feeding needs, program staff keeps a daily record documenting the type and quantity of food a child consumed that day and shares that information with parents.

### **Food Temperature**

Liquids and foods that are hotter than 110 degrees Fahrenheit are kept out of children's reach. We monitor the temperatures of our automatic hand washing sinks, and have the sensors adjusted periodically to about 100 degrees Fahrenheit. Staff will not bring hot liquids (110 degrees Fahrenheit or above) into the classrooms. They may keep their hot beverages in the staff room. Infant staff does not use bottle warmers nor microwaves to warm bottles, rather take the chill off from bottles in hot tap water. These are monitored so the temperature of the tap water is not 110 degrees Fahrenheit. We check food temperatures when food arrives from the Caterer to ensure a hot food temp of 140 degrees or higher. Foods are then placed in serving bowls on tables for family style service, and have cooled to 110 degrees or below by the time children sit at table and begin serving themselves.

Notices about keeping foods and liquids 110 degrees F. or higher out of reach of children are posted in the food preparation areas of the center.

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## Indoor Large Motor Areas

Children of all ages at the Lindgren Child Care Center have daily opportunities for outdoor play (when weather, air quality, or environmental safety conditions do not pose a health risk). When outdoor opportunities for large-motor activities are not possible because of conditions, the center provides similar activities inside. Indoor equipment for large-motor activities meets national safety standards and is supervised at the same level as outdoor equipment.

- We do not go outside when winter wind chill temperatures are -10 degrees F., nor when the air temperature is 0 degrees F. Be sure your child has clothing suited to the weather. We may ask you to go home and get appropriate clothing when needed. It is the Center's policies that if children are healthy enough to attend child care they are healthy enough to go outdoors.
- Our indoor large muscle areas include the wrestling gym and the upper Halenbeck balcony gym. Each offers some different qualities for the children. Each offers the children a chance to run, jump, and roll to gain strength and confidence in self. The wrestling gym gives the children a place to run, jump, roll and wrestle in a soft environment where safety from falling on hard ground is not a concern because the floor and walls are padded. And the upper balcony in Halenbeck gives the children a unique experience of riding bikes and gaining strength in a large and high room. Indoor equipment for large-motor activities meets national safety standards and is supervised at the same level as outdoor equipment.

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## Limits of Behaviors

CHILDREN MAY NOT HURT OTHERS.

CHILDREN MAY NOT HURT THEMSELVES.

CHILDREN MAY NOT HURT EQUIPMENT

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## Outdoor Rules

Staff should remember that when they are outside with the children, their main concern should be the children and their safety. Staff should be INTERACTING WITH and watching the children AT ALL TIMES. They must not abuse this time for rest and relaxation.

When on the playground, children are not allowed to throw rocks. Children should only throw balls in play.

Staff should use precaution when children are around strangers. Staff shall be sure they know where their entire group is at all times. STAFF MUST NOT INTERACT WITH STRANGERS. IF THEY ARE KNOW TO STAFF, THEY ARE STILL STRANGERS TO THE CHILDREN.

Before leaving the center, staff must be sure to take a head count and write a note on the white message board in the classroom. Information should include the time leaving, anticipated return time, and route of walk or destination. One staff member must bring their cell phone with and leave their number with someone in the office. Children should be encouraged to use the restroom before leaving and wait for the group. Staff must bring the fanny pack which contains basic first aid supplies.

Children should walk on the sidewalk and not go into the street or on stairways. Everyone must use designated cross-walks. Children should never climb on sign posts, hydrants or trees, nor should they touch wild or seemingly domestic animals.

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## Outings and Outside

When walking outdoors, the Center has one teacher in front, one in back, and children holding hands. A constant head count is maintained. Staff are generally aware of common safety such as no stone throwing or jabbing with sticks. Children with applicable will assist in looking both ways before crossing a road. Children will not be allowed to venture into parking lots or work areas. Each classroom also posts a note saying where they are when they leave for walks.

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## Parental Notification

When a child becomes ill at the center, or has a serious accident, parents are notified according to their class schedule on file. The director or person in charge will call the department office where the student's class is and leave a message that the student/parent report to the child care center immediately. Parents will be notified verbally and by note of infectious diseases as they occur in the center.

In case of accident, procedure for emergency medical care will be to call 9-911.

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## Safety of Children

All staff members have undergone criminal background checks. Each teacher has systems in place so they know which children are in their care at all times. The Lindgren Child Care Center has very explicit policies (that require parent's utmost cooperation) about who is authorized to pick up each child. Staff members monitor very closely who comes through the Center doors, and who looks into the playground, and are always ready to notify SCSU Campus Security about the Center's concerns.

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## Child Picked-Up after Scheduled Hours

Parents sign a Contract for Services that designate specific hours of attendance. When a child that is in attendance past contracted hours;

- Parents will be called immediately unless prior approval has been granted.
- If parents cannot be reached staff will attempt to contact emergency contacts
- Staff will communicate with University Public Safety to attempt to reach parents if on campus
- If parents or emergency contacts unreachable staff must call Child Protection at 9-255-6000, and request an officer to come and take the child.

The center closes at 5:30 p.m. during fall and spring semesters and 5:00 p.m. summer.

- If children are picked up after 5:10 p.m. (or 4:30 p.m. summer) a \$50.00 late fee will be applied per child.
- After 5:30 p.m. (or 4:50 p.m. summer) an additional \$100.00 will be applied.
- The staff person in charge must fill out a Late Pick-Up form and the form must be signed by the parent when they arrive.
- When parents are late, begin calling their telephone numbers immediately.
- Also call the authorized persons to have them come and assume responsibility for the child.
- If by 6:00 p.m. (or 5:00 p.m. summer) children have not been picked-up, staff must call Child Protection at 9-255-6000, and request an officer to come and take the child. After doing so, staff must inform the director of the situation.

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## Disaster Preparedness and Emergency Evacuation Procedures Plan

The complete Lindgren Child Care Center Disaster Preparedness and Emergency Evacuation Procedures Plan is posted behind the emergency routes on each exit door and also behind the main office door.

- Disaster Preparedness and Emergency Evacuation Procedures Plan, Appendix VI-A

PLAN	DESIGNATED PERSON
<p><b>Shelter in place:</b> <i>danger outside of the building or danger inside the building; lockdown.</i> All doors are locked, all shades are drawn, children and staff gather in safe places: preschool cubby areas, by toddler hand sink, in the staff room and store room, infants on the infant floor. We will admit no one until we get the all clear from authorities.</p>	Associate Director and if both director and associate director are not on-site, lead teachers are the designated persons to assume authority.
<p><b>Evacuate because of fire:</b> 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 parking lot N just west of the building, or to the Education Building. <i>In the event of fire in the center, direct exits lead from the infant, toddler, and preschool rooms to the outside. 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. All classrooms are equipped with smoke detectors. [Staff Handbook p. 4]</i></p>	Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.
<p><b>Evacuate because of tornado:</b> 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 ECC 123 conference room, crouching next to the walls and/or under the conference table. <i>When weather is threatening, keep children's play away from the windows. Monthly tornado drills are conducted April to September. When evacuation is deemed necessary, children exit out of the north door and walk down corridor to room ECC 123. Children should crouch near the walls in the 'tuck' position, and cover their heads with their arms. [Staff Handbook p. 4]</i></p>	Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.
<p><b>Missing children:</b> <i>The staff person in charge will constantly maintain a head count. If a child is missing, the staff person in charge will immediately notify SCSU Security, delegate another person to be in charge, and go in search of the child. If the child is not found in 10 minutes, the St. Cloud Police Department will be notified.</i></p>	Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated. If this should occur during transition, the assistant director would assume authority, and designate another staff person to be in charge.
<p><b>Security Threats:</b> <i>If we are advised to evacuate not only our current space but also the ECC building, we will go to the A120 lounge of the Education Building. Easy automobile access to this area is from N Parking Lot, or 4th Avenue. We will post this information on signs on our doors when we leave the ECC Building. When advised to shelter in place, we will lock all doors, pull blinds, and admit no one until we get the all clear from authorities.[Staff Handbook, p.5]</i></p> <p>St. Cloud State University maintains an <b>Emergency Operations Plan and Procedure</b>, and an easy-to-use flip chart of these procedures is</p>	Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.

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<p>located in the Lindgren Child Care Center office as well as in the classrooms. The overall plan is intended to be sufficiently flexible to accommodate contingencies of all types, magnitudes, and duration.</p>	
<p><b>Utility Failure:</b> <i>The Lindgren Child Care Center will close as does the University when there is a power or other utility failure. In the event the current needs to be cut, the person in charge will notify the ECC Building Manager. [Staff Handbook, p.4]</i></p>	<p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p>
<p><b>Emergency transport and escort from the program:</b> <i>If your child becomes seriously injured, we will call Gold Cross Ambulance Services for transport to the St. Cloud Hospital emergency room. You will be notified to go to the hospital; a staff person will accompany your child to ER and stay until you arrive. St. Cloud Hospital, 1406 6th Avenue N.; St. Cloud, MN 56303 320.251.2700. [Parent Handbook p., 13]</i></p>	<p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p>
<p><b>Practice and drill:</b> <i>Fire and Tornado Procedures: The Center practices monthly fire drills and follows routine evacuation procedures. We practice monthly tornado drills April to September. Emergency evacuation routes are posted on all the exits. [Parent Handbook, p. 13]</i></p>	<p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p>
<p><b>Blizzard Procedure:</b> <i>The Lindgren Child Care Center will follow the same schedule of weather-related closing as does the University. [Staff Handbook, p.4]</i> <b>Weather Related Closings:</b> <i>The center closes only on the rare circumstances that University classes are cancelled. Cancellation information is broadcast on KCLD-FM and WJON-AM as well as ECCO-AM radio. We encourage parents to use their best judgment in determining whether or not their child will attend on severe weather days without undue risk. [Parent Handbook, pp. 13 – 14]</i></p>	<p>Associate Director is the designated person to assume authority, and if both the director and associate director are not on-site, lead teachers are designated.</p>

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## Allergies/Food

As the Lindgren Child Care Center is made aware of allergies of children and or staff, the Center makes efforts within its capacity, to comply with recommendations of health-professionals regarding those specific allergies. For example, if staff has food allergies, the Center does not assign them to duties that require their contact with the preparation, service, or clean-up of food. Children who have allergies are identified to the Center by their parents (if the allergies are known). If the allergy is a food allergy, statements completed and signed by physicians indicate to the Center what foods to substitute for the allergenic food. The Lindgren Child Care Center asks families of a child with food allergies to give consent for posting information about that child's food allergy and, if consent is given, then posts that information in the food preparation area and in the areas of the facility the child uses so it is a visual reminder to all those who interact with the child during the program day. If the allergy is severe, a Food Allergy Action Plan completed by the physician describes for the Center to use for emergency measures, such as Epi-Pens. The same Allergy Action Plan is completed to tell the Lindgren Child Care Center how to respond to a severe insect bite. Statements in our facility indicate the Center serves no nut products in the center, and allows no foods from homes to be brought in and served to children.

- Allergy Action Plan, Appendix IV-A

Any child with a food allergy must have a Food Allergy Action Plan on file; they are to be the brightest paper in the file (yellow). The plan will guide staff as what to do if the child experiences an allergic reaction and has directions on administering Epi-pens. Each staff member will be trained in the use of Epi-pens at the beginning of each semester.

- Food Allergy Action Plan, Appendix VI-B

## Inside the Building Emergency - Evacuation

If the Center is advised to evacuate not only the current space but also the ECC building, everyone in the Center will go to the A120 lounge of the Education Building. Easy automobile access to this area is from N Parking Lot, or 4th Avenue. Staff members will post this information on signs on our doors when staff leave the ECC Building. The instruction to evacuate children to the Education Building are:

1. each teacher takes his/her sign in sheets, places them in their backpack, and readies children to leave building;
2. leave the center by the door furthest away from the danger;
3. on the back of the office door is a RED pocket folder with yellow laminated signs, stating where the Center is going. A staff member must tape one of these to all 3 external doors, 2 in the hallway, and one by the preschool lockers (There are 2 extra of these in the Preschool backpack);
4. in addition to each teacher's backpack, staff must also take along the crisis kit from the office;
5. all staff who have cellular phones should get them and bring them;
6. The Center will enter the Education Building from the doorway staff deem most safe. Children and staff will settle in the lounge, EB A120 immediately;
7. staff members will begin to call parents from the emergency contact sheets located in the brown envelopes in the backpacks;
8. other staff members will be stationed near the doors to spot parents;
9. have parents pick up and sign out their child ONE AT A TIME, to maintain order, and keep track of children
10. SCSU has an emergency procedures contract with the American Red Cross, who would come to campus eventually to provide support and conduct any necessary evacuation.

When accident or injury warrants, the child will receive First Aid as necessary, and if the emergency is immediate, 9-911 will be called and the parent will be notified.

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### **Serious Injury, Fire, or Death**

All serious injuries, fire, or deaths will be reported to the appropriate county and state Department of Human Services personnel by the director.

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## Birthdays

Children's birthdays are a special day to share with friends. The Lindgren Child Care Center cannot have parents bring in cake, snacks, etcetera for birthdays as there is a policy that states, there will be no outside food brought into the center. Each child will receive a birthday sign on the locker/cubby for their birthday acknowledging the importance of the day. Your child's birthday is a special day to share with friends. If you would like to commemorate your child's birthday, please speak with your child's teacher about an appropriate gift.

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## Blankets and Comfort Objects

Each child may bring a blanket and/or comfort object to use during naptime. The items may be held at the center in the child's blue tub or may be brought to and from home each day. The items must remain in either the tub or the child's cubby except for naptime.

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## Child Care Outside of Hours

It is not the mission of the Center to provide childcare for its clients in any location other than at the Center during regular operating hours. Any arrangement for childcare which does not take place at the Center is strictly a private arrangement between the parents and the individual staff member. No such private arrangements shall be made for childcare during the work shift of a staff member or interfere with the operation of the Center or the individual's job performance. Parents and staff should understand that such arrangements are not within the course and scope of the staff member's job duties and that staff members are free to either accept or reject such requests from parents.

Parents should register their desire to hire babysitters with the SCSU Student Employment Service, [www.scsucareers.com](http://www.scsucareers.com).

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## Child Caused Injury

If a child should injure another person such that medical costs are incurred, it is understood that the parent(s) of the injuring child may be responsible for payments of those medical costs. If a child bites another child and breaks the skin, this will be reported to the Health Department, and the parent will be encouraged to seek medical help.

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## Children with Special Needs

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 the Lindgren 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.

- Informed Consent, Appendix VII-A
- Consent to Release Private Data, Appendix VII-B

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## Clothing

Children often become so involved in activities at the center that they forget about the types of clothing they are wearing. To meet the children's needs to fully participate in the program and be successful in dressing themselves, parents should keep the following in mind when dressing their children for the Center:

- Be simple enough so the child can put in on and take it off easily.
- Be loose enough to provide freedom of movement.
- Be durable and washable enough to permit vigorous play.
- Be inexpensive so that soiling, damage, or loss will not cause great concern.
- Be appropriate to present weather conditions.
- ALL clothing should be labeled with the child's name.

All children need a complete change of clothing at the center. Infants, toddlers, and those being toilet trained should have 3 complete sets of clothing in their lockers/cubbies. Parents must supply an adequate amount of disposable diapers for all children not toilet-trained. The Lindgren Child Care Center does not allow the use of cloth diapers for health reasons. Parents will incur a charge of \$1.00 per disposable diaper when there are not disposable diapers supplied for their child, which is added to the monthly bill.

Children's wet or dirty clothing needs to be changed immediately. Center staff members check the child's cubby for clean clothing. There is also extra clothing in each area. For older children, teaching staff encourage them to do their own changing. Dirty clothes are put in plastic bags, labeled with the child's name and placed in the cubby. For infants and toddlers, we put the bag in the "Soiled Clothes" locker and leave a note on the child's chart.

### Clothing Suited to the Weather

Parents must be sure to have clothing appropriate to the weather each day their child attends. Children play outdoors every day. In Summer wide-brimmed sun hats, and in Spring and Fall a light jacket, hat, and gloves, is appropriate. In Winter, hats, mittens, boots, snow pants, and jackets are necessary. All clothing, including shoes and boots, must be marked with child's name.

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## Clothing Suited to the Weather

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## Communication

E-mail is an official form of communication to students, faculty, and staff at St. Cloud State, so please check e-mail frequently to be sure you don't miss important announcements. Your SCSU generated e-mail, ending in @stcloudstate.edu, will be the only official e-mail used for communication. Non student parents may be added to a distribution list, but reliability of delivery cannot be guaranteed.

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## Eligibility

Members of the university community must meet one of the following criteria to enroll children in the Lindgren Child Care Center:

- Undergraduate student taking 3 or more credits per semester (3 per summer session);
- Graduate student taking 3 or more credits per semester (3 per summer session);
- Students who stop-out of school to work over the summer, but have met the student eligibility requirements the previous spring semester and will meet student eligibility requirements the subsequent fall semester may use the center during the 12 weeks of summer session;
- Staff/faculty status will apply to families where at least one supporting parent is employed at SCSU. Student status will preempt staff/faculty status when one supporting parent maintains full-time SCSU enrollment, 15 undergrad or 6 grad credits each semester;
- Parents may arrange child care hours to accommodate class, study or work schedules according to need.

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## Extraordinary Behavior

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. 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 subsequent to the implementation of the plan agreed upon by the parent and teacher.

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## Family Functions

Family functions, training opportunities, and picnics will be planned throughout the year. Participation in these activities is encouraged and appreciated by children, parents, and staff. We provide three opportunities per year, centered on food, for families to meet with one another informally, to learn from and provide support for each other. They are a Fall Family Pot Luck, a Valentine's Day Breakfast, and a Spring Barbeque. Entire families along with all of our employees are invited to all three events, and we have excellent participation.

We also host a campus-wide used book sale every spring, as part of our campus' and curriculum 'green' efforts. Children understand that recycling is a good thing for the planet, and they see a used book sale as a recycling method. Parents, families, and all campus constituents are invited to donate used books to our sale, and the children operate the sale along with their parents and staff for 2 days.

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## Field Trips

The Lindgren Child Care Center will take walking field trips within the boundaries of St. Cloud State University. Individual classroom teachers schedule walking fieldtrips based on current curriculum interests and needs. We do not take field trips away from the SCSU campus. When on a walking field trip the staff will be equipped with a first aid kit, emergency phone numbers, and a designated personal cellular telephone.

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## Linguistically Relevant Staff and/or Volunteers

If the classroom teachers along with a family see a need for staff or volunteer services that are linguistically relevant the Lindgren Child Care Center will make every effort to make this connection. This will be done by contacting the relevant linguistic or cultural student organization on campus. Another resource could be the Center for International Studies, SCSU.

### **Non-Enrolled Children Visiting**

Unless prior arrangements have been made with the director, children who are not enrolled in the center must be accompanied by their own parent/guardian at all times. Staff to child ratios must be maintained at the center, the insurance does not cover children that are not enrolled.

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## Orientation Meeting

Families who have recently enrolled their child in at Lindgren, and have completed all the forms in the Enrollment Packet are expected to schedule a 30 minute orientation meeting with the director. During this time policies and procedures will be explained and parents may have questions answered. If there are several new families at one time a mandatory orientation meeting may be scheduled. Parents should also expect to have an enrollment conference with their child's classroom teacher during the weeks immediately preceding their child's first day of attendance.

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## Communication

Staff must treat parents and children with the utmost respect. They should take time to answer parents' questions, but never discuss a child in front of that child to the parents. Discussing children's behavior with parents is the job of the lead teacher. Communication among staff is essential however. Staff should share things about children without violating their self-respect. Staff members should work together with all staff to solve problems internally, keeping teachers informed.

If a parent or someone else asks a staff member a question he or she does not know the answer to, he or she must say so and assure the person that he or she will find out the answer or that someone who does know will get in touch with them. Staff must not make up answers that they think are correct; they should find out for sure.

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## Toys

Toys brought from home present problems for the children and the staff. Personal possessions are often difficult to share or may get broken. If it becomes necessary for a child to bring a toy from home it must be something that can be shared by a group of children (CD, books, etc.) or else it must be left in the child's cubby/locker. Toys that resemble weapons are NOT acceptable at the center. If a child has a special toy, expensive toy, or toy with many pieces, parents must please keep it safely at home.

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## Visiting

Parents may visit any area of the facility at any time during the program's regular hours of operation as we have an open door policy at the Lindgren Child Care Center. Parents or prospective parents are welcome at any time. We encourage parents to stop in and visit the center and their children. Persons authorized to pick up a child may visit with prior approval from the child's parent. We have sign-ins for practicum students and ask they wear name tags.

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## Charge for Picking-Up Late Children

The center closes at 5:30 p.m. during fall and spring semesters and 5:00 p.m. summer. We expect children to be picked up by those times. Two things happen when you are late picking-up your child. First, your child becomes anxious about why you are late. Second, staff (who have lives outside of the center) are detained past their scheduled time and are late for their evening commitments. If children are picked up after 5:40 p.m. (or 5:10 p.m. summer) according to Center clock, a \$50.00 late fee will be applied per child. After 5:50 p.m. (or 5:20 p.m. summer) according to Center clock, an additional \$100.00 will be applied per child. At this time Child Protection will be notified to take custody of the children.

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## Children's Files

The registration forms in the children's files in the Lindgren Child Care Center office file cabinet contain information staff may need to use when trying to locate parents or others in an emergency. Phone numbers, addresses, and places of employment are accessible to staff so they can implement the procedures regarding Child Not Picked-Up if necessary. The files need to remain in the Center and information needs to remain confidential. It may be beneficial for staff members to share ideas about an individual child with the teacher at times, but it MUST NOT be discussed outside the Center.

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## County Contracts

The Lindgren Child Care Center is happy to work with families who have third-party assistance in payment of their child care costs. It is the responsibility of those families to maintain current contracts with their counties, as child care charges are posted to these student accounts as well. Counties all pay after the month of service, and because of this lag it is imperative that clients maintain current contracts in order to register on-time and avoid holds.

At the end of each month, the Lindgren Child Care Center counts the number of absences of children with county contracts and records them on the County Contract Attendance sheet in the director's office. The Minnesota Child Care Assistance Programs may not pay for more than 25 absent days per child in a calendar year, and more than 10 absent days per child in a row.

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## **Enrollment/Registration**

Upon accepting the position to place a child with the Lindgren Child Care Center, parents will complete all the necessary forms and supply the Center with contact and emergency information. The parents are encouraged to visit the Center. Lead teachers will contact each new family to meet with them and orient them to the Center's classroom and solicit important information about each child. Parents are required to attend an orientation meeting about Center policies and procedures.

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## Fees

When children are enrolled, they are enrolled for the semester. Parents are billed based on their child's enrollment, not attendance. Parents are not billed for any days that classes are not in session, but will be billed for any days their child is absent, whether due to illness or vacation.

The Lindgren Child Care Center charges by the week, and current fees are available from the website ([www.stcloudstate.edu/childcare](http://www.stcloudstate.edu/childcare)) or from the office. Charges for each month's child care are calculated at the beginning of each month, and include the cost of scheduled hours for the month. **Accounts will be monitored on a weekly basis. When your unpaid charges are \$500.00 and over, we will be unable to care for your child until the bill is paid. If the child care slot is NOT filled before the charges are paid you child will be welcomed back. If you chose to dis-enroll at this time, the two week dis-enrollment notification policy will apply.** Charges are entered into the University's billing system, and appear on the parent's electronic account. It is the responsibility of the parent to keep their bill current. When the Lindgren Child Care Center enters the charges, they are immediately considered due. **We recommend you ask us to calculate your child care charges for the entire semester, and have your financial aid apply to pay for all your semester's charges.**

The Lindgren Child Care Center is happy to work with families who have third-party assistance in payment of their child care costs. It is the responsibility of those families to maintain current contracts with their counties, as child care charges are posted to these student accounts as well. Counties all pay after the month of service, and because of this lag it is imperative that clients maintain current contracts in order to register on-time and avoid holds.

There is one refund policy. Refunds will be paid to student users for schedule changes

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## Finals Week

Parents are billed for Final's Week the same way they are billed for the regular weeks. The Center asks that parents supply the Center with new contact information about that week, as the schedules may be different than during the semester.

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## Payment Procedures

All child care payments are made to the cashier in the Business Office, AS123.

Accounts are checked periodically to ensure bills are being paid. Payment is due when posted.

To check student account:

1. Go to SCSU Homepage
2. Log on to Huskynet Services
3. Enter SCSU id and password
4. Click on Bills and Payment (left hand column)
5. Click on Full Account Detail

To check faculty/staff accounts:

1. Go to SCSU Homepage
2. Faculty & Staff
3. Registration
4. On-Line Services Sign-In
5. Enter SCSU id and password
6. On the top right hand corner click on Switch to Student eservices
7. Click on Bills & Payment (left hand column)
8. Click on Full Account Detail

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## Payment Requests

In order to request a payment be made to a vendor, a Payment Request must be filled out to follow University requirements. This form requires basic information about who is being paid, what they are being paid for, and the signature of the official advisor to the organization. An organization will also need to include a vendor number and if possible an invoice number on the bottom of this form. Once the form is completed the white copy and the invoice should be sent to the Business Office, the yellow copy is for the organization's records. These forms usually require one week to process.

Payment Request, Appendix VIII-B

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## Purchasing Supplies

The Lindgren Child Care Center purchases mailing labels from Central Stores on campus, located in Administrative Services building, room 104. Office supplies are primarily purchased from Office Depot online. Parent and Staff Handbooks, Accident Reports, and Staff Schedule/Information Sheets are purchased from Printing Services, located in the Brown Hall Basement. Other large printing orders are done there, too. For smaller printing orders, lamination, and enlargements, the Lindgren Child Care Center uses Copies Plus, located in Atwood Memorial Center on campus.

- Central Stores Purchasing Process, Appendix VIII-C
- University Printing Services Request, Appendix VIII-D

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## Tax Information

Taxpayers wishing to claim either the child care tax credit or the dependent care exclusion should ask the director's assistant to prepare for them a statement of childcare PAID in the tax year. Then parents have the correct name and address of the center as well on the letterhead. We are a tax-exempt, not for profit entity. **The State E.I. number is 1746999, and the Federal I.D. number is 41 1687554.**

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## Termination/Grievance

Termination- In the event any of the following occur, a child and parent(s) may be excluded from the center:

- Non-payment of fees
- Non-affiliation with the university
- Abuse of staff or children at the center
- Inability of staff to adequately care for child's needs
- Chronic lateness in child pick-up
- Parent is hostile, uses profane language, and is verbally or physically threatening or abusive toward staff or clients of the center
- Abuse of center policies.

Grievance- If a parent has a complaint or concern about some aspect of the program, they should first try to settle the grievance with the teacher or other adult involved. Policy matters or unresolved conflicts should be discussed with the center director. Further unresolved matters may be taken to the Vice President for Student Life and Development.

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## Wait List

A Wait List application, accompanied by a non-refundable \$20.00 waiting list fee, is the first step in applying for any of the center's child slots. Applicants are placed on the wait list according to the date those forms and checks are received in the Center. When openings occur, families are contacted according to the information supplied by the parents at the time of application, and offered the slot. Telephones not answered and messages not returned will cause us to go to the next name on the wait list. As openings in the classrooms occur, enrollment of children is determined by the following criteria:

- Internal movement-moving a child from a younger group to an older group;
  - Child of a staff member;
  - Previously enrolled child returning from an approved leave of absence;
  - Sibling of a currently enrolled child;
  - Center waiting list.
- 
- Wait List Form, Appendix VIII-E

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## Withdrawal and Leave of Absence

The center requires a two-week written notice for withdrawal from the center. Parents must date and sign their withdrawal and give it to the director. Parents are responsible for the payment of fees during the two-week period. If it becomes necessary for a child to take a leave of absence from the center for a semester or the summer, parents may complete a disenrollment form. The child's name is kept as priority on the waiting list, although the center cannot guarantee an opening on the desired return date. A \$20.00 disenrollment fee is required.

Disenrollment Form, Appendix VIII-F

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## Chain of Command

Generally, all staff are under the supervision of the director. However, there are teacher positions where supervision is directly received. The Infant Teacher supervises the infant aides and assistants. The Toddler Teacher supervises the toddler aides and assistants, and the Preschool Teacher supervises the preschool aides and assistants. Inter-staff problems must be resolved within the center. Staff must talk it out. If that doesn't work, staff should arrange a mutual meeting with the director.

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## POSITION STATEMENT

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# naeyc

## Code of Ethical Conduct and Statement of Commitment

Revised April 2005

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A position statement of the National Association for the Education of Young Children

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*Endorsed by the Association for Childhood Education International  
Adopted by the National Association for Family Child Care*

### Preamble

NAEYC recognizes that those who work with young

children face many daily decisions that have moral and ethical implications. The **NAEYC Code of Ethical Conduct** offers guidelines for responsible behavior and sets forth a common basis for resolving the principal ethical dilemmas encountered in early childhood care and education. The **Statement of Commitment** is not part of the Code but is a personal acknowledgement of an individual's willingness to embrace the distinctive values and moral obligations of the field of early childhood care and education.

The primary focus of the Code is on daily practice with children and their families in programs for children from birth through 8 years of age, such as infant/toddler programs, preschool and prekindergarten programs, child care centers, hospital and child life settings, family child care homes, kindergartens, and primary classrooms. When the issues involve young children, then these provisions also apply to specialists who do not work directly with children, including program administrators, parent educators, early childhood adult educators, and officials with responsibility for program monitoring and licensing. (Note: See also the "Code of Ethical Conduct: Supplement for Early Childhood Adult Educators," online at [www.naeyc.org/about/positions/pdf/ethics04.pdf](http://www.naeyc.org/about/positions/pdf/ethics04.pdf).)

### Core values

Standards of ethical behavior in early childhood care

and education are based on commitment to the following core values that are deeply rooted in the history of the field of early childhood care and education. We have made a commitment to

- Appreciate childhood as a unique and valuable stage of the human life cycle
- Base our work on knowledge of how children develop and learn
- Appreciate and support the bond between the child and family
- Recognize that children are best understood and supported in the context of family, culture,\* community, and society
- Respect the dignity, worth, and uniqueness of each individual (child, family member, and colleague)
- Respect diversity in children, families, and colleagues
- Recognize that children and adults achieve their full potential in the context of relationships that are based on trust and respect

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\* The term *culture* includes ethnicity, racial identity, economic level, family structure, language, and religious and political beliefs, which profoundly influence each child's development and relationship to the world.

## Conceptual framework

The Code sets forth a framework of professional responsibilities in four sections. Each section addresses an area of professional relationships: (1) with children, (2) with families, (3) among colleagues, and (4) with the community and society. Each section includes an introduction to the primary responsibilities of the early childhood practitioner in that context. The introduction is followed by a set of ideals (I) that reflect exemplary professional practice and by a set of principles (P) describing practices that are required, prohibited, or permitted.

The **ideals** reflect the aspirations of practitioners. The **principles** guide conduct and assist practitioners in resolving ethical dilemmas.\* Both ideals and principles are intended to direct practitioners to those questions which, when responsibly answered, can provide the basis for conscientious decision making. While the Code provides specific direction for addressing some ethical dilemmas, many others will require the practitioner to combine the guidance of the Code with professional judgment.

The ideals and principles in this Code present a shared framework of professional responsibility that affirms our commitment to the core values of our field. The Code publicly acknowledges the responsibilities that we in the field have assumed, and in so doing supports ethical behavior in our work. Practitioners who face situations with ethical dimensions are urged to seek guidance in the applicable parts of this Code and in the spirit that informs the whole.

Often “the right answer”—the best ethical course of action to take—is not obvious. There may be no readily apparent, positive way to handle a situation. When one important value contradicts another, we face an ethical dilemma. When we face a dilemma, it is our professional responsibility to consult the Code and all relevant parties to find the most ethical resolution.

## Section I

### Ethical Responsibilities to Children

Childhood is a unique and valuable stage in the human life cycle. Our paramount responsibility is to provide care and education in settings that are safe,

\* There is not necessarily a corresponding principle for each ideal.

healthy, nurturing, and responsive for each child. We are committed to supporting children’s development and learning; respecting individual differences; and helping children learn to live, play, and work cooperatively. We are also committed to promoting children’s self-awareness, competence, self-worth, resiliency, and physical well-being.

### Ideals

- I-1.1**—To be familiar with the knowledge base of early childhood care and education and to stay informed through continuing education and training.
- I-1.2**—To base program practices upon current knowledge and research in the field of early childhood education, child development, and related disciplines, as well as on particular knowledge of each child.
- I-1.3**—To recognize and respect the unique qualities, abilities, and potential of each child.
- I-1.4**—To appreciate the vulnerability of children and their dependence on adults.
- I-1.5**—To create and maintain safe and healthy settings that foster children’s social, emotional, cognitive, and physical development and that respect their dignity and their contributions.
- I-1.6**—To use assessment instruments and strategies that are appropriate for the children to be assessed, that are used only for the purposes for which they were designed, and that have the potential to benefit children.
- I-1.7**—To use assessment information to understand and support children’s development and learning, to support instruction, and to identify children who may need additional services.
- I-1.8**—To support the right of each child to play and learn in an inclusive environment that meets the needs of children with and without disabilities.
- I-1.9**—To advocate for and ensure that all children, including those with special needs, have access to the support services needed to be successful.
- I-1.10**—To ensure that each child’s culture, language, ethnicity, and family structure are recognized and valued in the program.
- I-1.11**—To provide all children with experiences in a language that they know, as well as support children in maintaining the use of their home language and in learning English.
- I-1.12**—To work with families to provide a safe and smooth transition as children and families move from one program to the next.

## Principles

**P-1.1**—Above all, we shall not harm children. We shall not participate in practices that are emotionally damaging, physically harmful, disrespectful, degrading, dangerous, exploitative, or intimidating to children. *This principle has precedence over all others in this Code.*

**P-1.2**—We shall care for and educate children in positive emotional and social environments that are cognitively stimulating and that support each child's culture, language, ethnicity, and family structure.

**P-1.3**—We shall not participate in practices that discriminate against children by denying benefits, giving special advantages, or excluding them from programs or activities on the basis of their sex, race, national origin, religious beliefs, medical condition, disability, or the marital status/family structure, sexual orientation, or religious beliefs or other affiliations of their families. (Aspects of this principle do not apply in programs that have a lawful mandate to provide services to a particular population of children.)

**P-1.4**—We shall involve all those with relevant knowledge (including families and staff) in decisions concerning a child, as appropriate, ensuring confidentiality of sensitive information.

**P-1.5**—We shall use appropriate assessment systems, which include multiple sources of information, to provide information on children's learning and development.

**P-1.6**—We shall strive to ensure that decisions such as those related to enrollment, retention, or assignment to special education services, will be based on multiple sources of information and will never be based on a single assessment, such as a test score or a single observation.

**P-1.7**—We shall strive to build individual relationships with each child; make individualized adaptations in teaching strategies, learning environments, and curricula; and consult with the family so that each child benefits from the program. If after such efforts have been exhausted, the current placement does not meet a child's needs, or the child is seriously jeopardizing the ability of other children to benefit from the program, we shall collaborate with the child's family and appropriate specialists to determine the additional services needed and/or the placement option(s) most likely to ensure the child's success. (Aspects of this principle may not apply in programs that have a lawful mandate to provide services to a particular population of children.)

**P-1.8**—We shall be familiar with the risk factors for and symptoms of child abuse and neglect, including physical, sexual, verbal, and emotional abuse and physical, emotional, educational, and medical neglect. We shall know and follow state laws and community procedures that protect children against abuse and neglect.

**P-1.9**—When we have reasonable cause to suspect child abuse or neglect, we shall report it to the appropriate community agency and follow up to ensure that appropriate action has been taken. When appropriate, parents or guardians will be informed that the referral will be or has been made.

**P-1.10**—When another person tells us of his or her suspicion that a child is being abused or neglected, we shall assist that person in taking appropriate action in order to protect the child.

**P-1.11**—When we become aware of a practice or situation that endangers the health, safety, or well-being of children, we have an ethical responsibility to protect children or inform parents and/or others who can.

## Section II

### Ethical Responsibilities to Families

Families\* are of primary importance in children's development. Because the family and the early childhood practitioner have a common interest in the child's well-being, we acknowledge a primary responsibility to bring about communication, cooperation, and collaboration between the home and early childhood program in ways that enhance the child's development.

#### Ideals

**I-2.1**—To be familiar with the knowledge base related to working effectively with families and to stay informed through continuing education and training.

**I-2.2**—To develop relationships of mutual trust and create partnerships with the families we serve.

**I-2.3**—To welcome all family members and encourage them to participate in the program.

\* The term *family* may include those adults, besides parents, with the responsibility of being involved in educating, nurturing, and advocating for the child.

**I-2.4**—To listen to families, acknowledge and build upon their strengths and competencies, and learn from families as we support them in their task of nurturing children.

**I-2.5**—To respect the dignity and preferences of each family and to make an effort to learn about its structure, culture, language, customs, and beliefs.

**I-2.6**—To acknowledge families' childrearing values and their right to make decisions for their children.

**I-2.7**—To share information about each child's education and development with families and to help them understand and appreciate the current knowledge base of the early childhood profession.

**I-2.8**—To help family members enhance their understanding of their children and support the continuing development of their skills as parents.

**I-2.9**—To participate in building support networks for families by providing them with opportunities to interact with program staff, other families, community resources, and professional services.

### Principles

**P-2.1**—We shall not deny family members access to their child's classroom or program setting unless access is denied by court order or other legal restriction.

**P-2.2**—We shall inform families of program philosophy, policies, curriculum, assessment system, and personnel qualifications, and explain why we teach as we do—which should be in accordance with our ethical responsibilities to children (see Section I).

**P-2.3**—We shall inform families of and, when appropriate, involve them in policy decisions.

**P-2.4**—We shall involve the family in significant decisions affecting their child.

**P-2.5**—We shall make every effort to communicate effectively with all families in a language that they understand. We shall use community resources for translation and interpretation when we do not have sufficient resources in our own programs.

**P-2.6**—As families share information with us about their children and families, we shall consider this information to plan and implement the program.

**P-2.7**—We shall inform families about the nature and purpose of the program's child assessments and how data about their child will be used.

**P-2.8**—We shall treat child assessment information confidentially and share this information only when there is a legitimate need for it.

**P-2.9**—We shall inform the family of injuries and incidents involving their child, of risks such as exposures to communicable diseases that might result in infection, and of occurrences that might result in emotional stress.

**P-2.10**—Families shall be fully informed of any proposed research projects involving their children and shall have the opportunity to give or withhold consent without penalty. We shall not permit or participate in research that could in any way hinder the education, development, or well-being of children.

**P-2.11**—We shall not engage in or support exploitation of families. We shall not use our relationship with a family for private advantage or personal gain, or enter into relationships with family members that might impair our effectiveness working with their children.

**P-2.12**—We shall develop written policies for the protection of confidentiality and the disclosure of children's records. These policy documents shall be made available to all program personnel and families. Disclosure of children's records beyond family members, program personnel, and consultants having an obligation of confidentiality shall require familial consent (except in cases of abuse or neglect).

**P-2.13**—We shall maintain confidentiality and shall respect the family's right to privacy, refraining from disclosure of confidential information and intrusion into family life. However, when we have reason to believe that a child's welfare is at risk, it is permissible to share confidential information with agencies, as well as with individuals who have legal responsibility for intervening in the child's interest.

**P-2.14**—In cases where family members are in conflict with one another, we shall work openly, sharing our observations of the child, to help all parties involved make informed decisions. We shall refrain from becoming an advocate for one party.

**P-2.15**—We shall be familiar with and appropriately refer families to community resources and professional support services. After a referral has been made, we shall follow up to ensure that services have been appropriately provided.

### Section III

#### Ethical Responsibilities to Colleagues

In a caring, cooperative workplace, human dignity is respected, professional satisfaction is promoted, and positive relationships are developed and sustained. Based upon our core values, our primary responsibility to colleagues is to establish and maintain settings and relationships that support productive work and meet professional needs. The same ideals that apply to children also apply as we interact with adults in the workplace.

##### A—Responsibilities to co-workers

###### Ideals

- I-3A.1**—To establish and maintain relationships of respect, trust, confidentiality, collaboration, and cooperation with co-workers.
- I-3A.2**—To share resources with co-workers, collaborating to ensure that the best possible early childhood care and education program is provided.
- I-3A.3**—To support co-workers in meeting their professional needs and in their professional development.
- I-3A.4**—To accord co-workers due recognition of professional achievement.

###### Principles

- P-3A.1**—We shall recognize the contributions of colleagues to our program and not participate in practices that diminish their reputations or impair their effectiveness in working with children and families.
- P-3A.2**—When we have concerns about the professional behavior of a co-worker, we shall first let that person know of our concern in a way that shows respect for personal dignity and for the diversity to be found among staff members, and then attempt to resolve the matter collegially and in a confidential manner.
- P-3A.3**—We shall exercise care in expressing views regarding the personal attributes or professional conduct of co-workers. Statements should be based on firsthand knowledge, not hearsay, and relevant to the interests of children and programs.
- P-3A.4**—We shall not participate in practices that discriminate against a co-worker because of sex, race, national origin, religious beliefs or other affiliations,

age, marital status/family structure, disability, or sexual orientation.

##### B—Responsibilities to employers

###### Ideals

- I-3B.1**—To assist the program in providing the highest quality of service.
- I-3B.2**—To do nothing that diminishes the reputation of the program in which we work unless it is violating laws and regulations designed to protect children or is violating the provisions of this Code.

###### Principles

- P-3B.1**—We shall follow all program policies. When we do not agree with program policies, we shall attempt to effect change through constructive action within the organization.
- P-3B.2**—We shall speak or act on behalf of an organization only when authorized. We shall take care to acknowledge when we are speaking for the organization and when we are expressing a personal judgment.
- P-3B.3**—We shall not violate laws or regulations designed to protect children and shall take appropriate action consistent with this Code when aware of such violations.
- P-3B.4**—If we have concerns about a colleague's behavior, and children's well-being is not at risk, we may address the concern with that individual. If children are at risk or the situation does not improve after it has been brought to the colleague's attention, we shall report the colleague's unethical or incompetent behavior to an appropriate authority.
- P-3B.5**—When we have a concern about circumstances or conditions that impact the quality of care and education within the program, we shall inform the program's administration or, when necessary, other appropriate authorities.

##### C—Responsibilities to employees

###### Ideals

- I-3C.1**—To promote safe and healthy working conditions and policies that foster mutual respect, cooperation, collaboration, competence, well-being, confidentiality, and self-esteem in staff members.

**I-3C.2**—To create and maintain a climate of trust and candor that will enable staff to speak and act in the best interests of children, families, and the field of early childhood care and education.

**I-3C.3**—To strive to secure adequate and equitable compensation (salary and benefits) for those who work with or on behalf of young children.

**I-3C.4**—To encourage and support continual development of employees in becoming more skilled and knowledgeable practitioners.

### Principles

**P-3C.1**—In decisions concerning children and programs, we shall draw upon the education, training, experience, and expertise of staff members.

**P-3C.2**—We shall provide staff members with safe and supportive working conditions that honor confidences and permit them to carry out their responsibilities through fair performance evaluation, written grievance procedures, constructive feedback, and opportunities for continuing professional development and advancement.

**P-3C.3**—We shall develop and maintain comprehensive written personnel policies that define program standards. These policies shall be given to new staff members and shall be available and easily accessible for review by all staff members.

**P-3C.4**—We shall inform employees whose performance does not meet program expectations of areas of concern and, when possible, assist in improving their performance.

**P-3C.5**—We shall conduct employee dismissals for just cause, in accordance with all applicable laws and regulations. We shall inform employees who are dismissed of the reasons for their termination. When a dismissal is for cause, justification must be based on evidence of inadequate or inappropriate behavior that is accurately documented, current, and available for the employee to review.

**P-3C.6**—In making evaluations and recommendations, we shall make judgments based on fact and relevant to the interests of children and programs.

**P-3C.7**—We shall make hiring, retention, termination, and promotion decisions based solely on a person's competence, record of accomplishment, ability to carry out the responsibilities of the position, and professional preparation specific to the developmental levels of children in his/her care.

**P-3C.8**—We shall not make hiring, retention, termination, and promotion decisions based on an individual's sex, race, national origin, religious beliefs or other affiliations, age, marital status/family structure, disability, or sexual orientation. We shall be familiar with and observe laws and regulations that pertain to employment discrimination. (Aspects of this principle do not apply to programs that have a lawful mandate to determine eligibility based on one or more of the criteria identified above.)

**P-3C.9**—We shall maintain confidentiality in dealing with issues related to an employee's job performance and shall respect an employee's right to privacy regarding personal issues.

## Section IV

### Ethical Responsibilities to Community and Society

Early childhood programs operate within the context of their immediate community made up of families and other institutions concerned with children's welfare. Our responsibilities to the community are to provide programs that meet the diverse needs of families, to cooperate with agencies and professions that share the responsibility for children, to assist families in gaining access to those agencies and allied professionals, and to assist in the development of community programs that are needed but not currently available.

As individuals, we acknowledge our responsibility to provide the best possible programs of care and education for children and to conduct ourselves with honesty and integrity. Because of our specialized expertise in early childhood development and education and because the larger society shares responsibility for the welfare and protection of young children, we acknowledge a collective obligation to advocate for the best interests of children within early childhood programs and in the larger community and to serve as a voice for young children everywhere.

The ideals and principles in this section are presented to distinguish between those that pertain to the work of the individual early childhood educator and those that more typically are engaged in collectively on behalf of the best interests of children—with the understanding that individual early childhood educators have a shared responsibility for addressing the ideals and principles that are identified as "collective."

**Ideal (Individual)**

**I-4.1**—To provide the community with high-quality early childhood care and education programs and services.

**Ideals (Collective)**

**I-4.2**—To promote cooperation among professionals and agencies and interdisciplinary collaboration among professions concerned with addressing issues in the health, education, and well-being of young children, their families, and their early childhood educators.

**I-4.3**—To work through education, research, and advocacy toward an environmentally safe world in which all children receive health care, food, and shelter; are nurtured; and live free from violence in their home and their communities.

**I-4.4**—To work through education, research, and advocacy toward a society in which all young children have access to high-quality early care and education programs.

**I-4.5**—To work to ensure that appropriate assessment systems, which include multiple sources of information, are used for purposes that benefit children.

**I-4.6**—To promote knowledge and understanding of young children and their needs. To work toward greater societal acknowledgment of children's rights and greater social acceptance of responsibility for the well-being of all children.

**I-4.7**—To support policies and laws that promote the well-being of children and families, and to work to change those that impair their well-being. To participate in developing policies and laws that are needed, and to cooperate with other individuals and groups in these efforts.

**I-4.8**—To further the professional development of the field of early childhood care and education and to strengthen its commitment to realizing its core values as reflected in this Code.

**Principles (Individual)**

**P-4.1**—We shall communicate openly and truthfully about the nature and extent of services that we provide.

**P-4.2**—We shall apply for, accept, and work in positions for which we are personally well-suited and professionally qualified. We shall not offer services that we

do not have the competence, qualifications, or resources to provide.

**P-4.3**—We shall carefully check references and shall not hire or recommend for employment any person whose competence, qualifications, or character makes him or her unsuited for the position.

**P-4.4**—We shall be objective and accurate in reporting the knowledge upon which we base our program practices.

**P-4.5**—We shall be knowledgeable about the appropriate use of assessment strategies and instruments and interpret results accurately to families.

**P-4.6**—We shall be familiar with laws and regulations that serve to protect the children in our programs and be vigilant in ensuring that these laws and regulations are followed.

**P-4.7**—When we become aware of a practice or situation that endangers the health, safety, or well-being of children, we have an ethical responsibility to protect children or inform parents and/or others who can.

**P-4.8**—We shall not participate in practices that are in violation of laws and regulations that protect the children in our programs.

**P-4.9**—When we have evidence that an early childhood program is violating laws or regulations protecting children, we shall report the violation to appropriate authorities who can be expected to remedy the situation.

**P-4.10**—When a program violates or requires its employees to violate this Code, it is permissible, after fair assessment of the evidence, to disclose the identity of that program.

**Principles (Collective)**

**P-4.11**—When policies are enacted for purposes that do not benefit children, we have a collective responsibility to work to change these practices.

**P-4.12**—When we have evidence that an agency that provides services intended to ensure children's well-being is failing to meet its obligations, we acknowledge a collective ethical responsibility to report the problem to appropriate authorities or to the public. We shall be vigilant in our follow-up until the situation is resolved.

**P-4.13**—When a child protection agency fails to provide adequate protection for abused or neglected children, we acknowledge a collective ethical responsibility to work toward the improvement of these services.



## Glossary of Terms Related to Ethics

**Code of Ethics.** Defines the core values of the field and provides guidance for what professionals should do when they encounter conflicting obligations or responsibilities in their work.

**Values.** Qualities or principles that individuals believe to be desirable or worthwhile and that they prize for themselves, for others, and for the world in which they live.

**Core Values.** Commitments held by a profession that are consciously and knowingly embraced by its practitioners because they make a contribution to society. There is a difference between personal values and the core values of a profession.

**Morality.** Peoples' views of what is good, right, and proper; their beliefs about their obligations; and their ideas about how they should behave.

**Ethics.** The study of right and wrong, or duty and obligation, that involves critical reflection on morality and the ability to make choices between values and the examination of the moral dimensions of relationships.

**Professional Ethics.** The moral commitments of a profession that involve moral reflection that

extends and enhances the personal morality practitioners bring to their work, that concern actions of right and wrong in the workplace, and that help individuals resolve moral dilemmas they encounter in their work.

**Ethical Responsibilities.** Behaviors that one must or must not engage in. Ethical responsibilities are clear-cut and are spelled out in the Code of Ethical Conduct (for example, early childhood educators should never share confidential information about a child or family with a person who has no legitimate need for knowing).

**Ethical Dilemma.** A moral conflict that involves determining appropriate conduct when an individual faces conflicting professional values and responsibilities.

### Sources for glossary terms and definitions

Feeney, S., & N. Freeman. 1999. *Ethics and the early childhood educator: Using the NAEYC code*. Washington, DC: NAEYC.  
Kidder, R.M. 1995. *How good people make tough choices: Resolving the dilemmas of ethical living*. New York: Fireside.  
Kipnis, K. 1987. How to discuss professional ethics. *Young Children* 42 (4): 26–30.

The National Association for the Education of Young Children (NAEYC) is a nonprofit corporation, tax exempt under Section 501(c)(3) of the Internal Revenue Code, dedicated to acting on behalf of the needs and interests of young children. The NAEYC Code of Ethical Conduct (Code) has been developed in furtherance of NAEYC's nonprofit and tax exempt purposes. The information contained in the Code is intended to provide early childhood educators with guidelines for working with children from birth through age 8.

An individual's or program's use, reference to, or review of the Code does not guarantee compliance with NAEYC Early Childhood Program Standards and Accreditation Performance Criteria and program accreditation procedures. It is recommended that the Code be used as guidance in connection with implementation of the NAEYC Program Standards, but such use is not a substitute for diligent review and application of the NAEYC Program Standards.

NAEYC has taken reasonable measures to develop the Code in a fair, reasonable, open, unbiased, and objective

manner, based on currently available data. However, further research or developments may change the current state of knowledge. Neither NAEYC nor its officers, directors, members, employees, or agents will be liable for any loss, damage, or claim with respect to any liabilities, including direct, special, indirect, or consequential damages incurred in connection with the Code or reliance on the information presented.

### NAEYC Code of Ethical Conduct Revisions Workgroup

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## Statement of Commitment\*

As an individual who works with young children, I commit myself to furthering the values of early childhood education as they are reflected in the ideals and principles of the NAEYC Code of Ethical Conduct. To the best of my ability I will

- Never harm children.
- Ensure that programs for young children are based on current knowledge and research of child development and early childhood education.
- Respect and support families in their task of nurturing children.
- Respect colleagues in early childhood care and education and support them in maintaining the NAEYC Code of Ethical Conduct.
- Serve as an advocate for children, their families, and their teachers in community and society.
- Stay informed of and maintain high standards of professional conduct.
- Engage in an ongoing process of self-reflection, realizing that personal characteristics, biases, and beliefs have an impact on children and families.
- Be open to new ideas and be willing to learn from the suggestions of others.
- Continue to learn, grow, and contribute as a professional.
- Honor the ideals and principles of the NAEYC Code of Ethical Conduct.

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\* This Statement of Commitment is not part of the Code but is a personal acknowledgment of the individual's willingness to embrace the distinctive values and moral obligations of the field of early childhood care and education. It is recognition of the moral obligations that lead to an individual becoming part of the profession.

## Custody/Family Legal Involvement

It is the policy of the Lindgren Child Care Center to be an advocate for the child/children during times of family distress. To follow this policy, classroom teachers along with administrators will give out only objective information pertinent to the care of the child while being cared for at the center. This information includes any paperwork within the child's file, which consists of; contract for services, enrollment forms, permissions forms, medical summary form, and immunization forms, along with screening and assessment information. If any further information is required from the classroom teacher or administrators a court subpoena will need to be filed. This is done so both parents have equal access to the expertise of the LCCC professional staff.

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## Diversity

Efforts are made and documented to hire and maintain staff with the cultural and racial characteristics of the families served. Policies are in place for obtaining staff or volunteers who speak the language of the children served, and these individuals regularly interact with the children and families.

St. Cloud State University Affirmative Action policies apply to the full-time professional MSUAASF hires. More to the point however, because we obtain at least one half of our employees through the college Work Study program, we have little control over the racial demographics of those authorizations. To address this specifically, we have successfully written a Cultural Diversity Grant to the University specifically designed to allow us to hire culturally and racially relevant staff into our program.

Finally, when there is need for staff or volunteers who speak a language of a child and family, we seek the volunteer services of linguistically relevant international students who volunteer in our classroom, to speak native language with all of our children, and interact with the families as well.

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## Dress

Customers (parents, students, families, guests, other University personnel) form impressions of the University and the department based on their experiences with services provided and how we present ourselves. An employee's dress or attire is an important part of these impressions. Clothing should be tasteful and appropriate for the position, the Lindgren Child Care Center will show Husky Pride by providing SCSU apparel for all staff, which is required by all..

- o Staff must dress neatly and appropriately for working with young children and for meeting parents.
- o Apparel promoting other universities should be avoided.
- o Shirts should be long enough to touch pants and have appropriate necklines. Underwear of all types should not be showing and visible cleavage is not acceptable.
- o Shorts and skirts need to be of appropriate length (when arms are resting at your side, fingers should not be able to touch bare skin).
- o Pajamas are not acceptable work attire.
- o Text or graphics must be appropriate with final approval by the direct supervisor.
- o Some people (parents, faculty, and co-workers) are allergic to chemicals in perfumes, colognes, and lotions so wear these substances with restraint.
- o Hats may not be appropriate in an office; however, may be required for certain positions. Head covers required for religious purposes or to honor cultural tradition are allowed.
- o Children go outdoors daily, so staff need to dress for outdoor weather appropriately. THIS MEANS WINTER TOO!
- o Staff must remember that they are a role model for the children in our care.

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## Duty Hours

In order to maintain the legal and necessary adult to child ratio, it is essential that staff work the hours they are scheduled. The Center is open 5 days a week. When staff members are scheduled on Fridays, the Center expects them to work on Fridays. If staff are unable to work their hours (illness, etc.) it is their responsibility to find someone to work for them. Failure to find someone to cover their hours will result in disciplinary action.

Each time staff will be required to fill out an absence report form, and give it their lead teacher. If a staff member needs to go to class immediately following his or her work here, and he or she leaves 10 minutes before the hour, he or she must have arrived at work 10 minutes before his or her hour started. Staff get paid to work full 60 minute hours. Staff should, however, remain in their area until their replacement has arrived.

If a staff member works for a period longer than four hours, staff are provided a 15 minute break for each four hour period. If a staff member works a full 8 hour day or longer, this person will receive two 15 minute paid breaks, and one unpaid 30 minute break for lunch.

At any point, a staff person may request a short and immediate break when they are unable to perform their duties. If this break would create a hardship within a classroom ratio, the director will come into a classroom for additional support.

- Absence Report Form, Appendix IX-A

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## Personnel Files

Several forms will be found in your staff materials. The following procedures apply:

1. Staff Emergency Form- fill out completely and return to the director,
2. W-4- fill out withholding allowance, sign and return it immediately to the director.
3. I-9- fill out and return to the director. This form needs to be completed once at SCSU.
4. Personnel Information Form- fill out both sides completely, sign and return to the director.
5. Background Study Form- fill out completely with black ink, and return it immediately to the director.
6. You must also provide a current copy of post-secondary transcripts.
7. Complete confidentiality statements and other paperwork as requested, and submit to the director.

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### General Safety Rules

For the protection and safety of all employees, the LCCC has established the following rules designed to prevent accidents and injuries. Compliance with these rules will be mandatory.

- All accidents and injuries must be reported to the supervisor at the time of occurrence and recorded.
- All spilled juice, water and other liquids must be wiped up immediately.
- Any defective equipment must be immediately reported to your supervisor.
- Failure by an employee to comply with the safety rules will be grounds for corrective discipline.
- Equipment shall not be operated until you have received proper instruction on their operation.
- Mop buckets containing water shall not be left unattended at any time.
- All staff must ensure that any door with a door closure attached remains securely latched at all times.
- All doors and emergency exits will remain free of obstructions.
- Cots shall have 18 inches clearance on all sides.
- All cribs shall have 24 inches of clearance on all sides excluding sides adjacent to classroom walls.
- Children will be instructed to refrain from climbing on equipment or furniture not designed for this purpose.
- When carrying material, caution will be exercised in observance of obstructions, loose material, etc.
- All material will be stacked and stored in proper areas.
- Materials will not be stored in hallways or walkways. They must be kept clear at all times.
- **Lifting:** Attempting to lift or push an object which is too heavy must be avoided. You must contact the supervisor when help is needed to move a heavy object.

Follow these tips to avoid compressing the spinal discs or straining your lower back when you are lifting (child or object):

- **Keep a wide base of support.** Your feet should be shoulder-width apart, with one foot slightly ahead of the other (karate stance).
- **Squat** down, bending at the hips and knees only. If needed, put one knee to the floor and your other knee in front of you, bent at a right angle (half kneeling).
- **Keep good posture.** Look straight ahead, and keep your back straight, your chest out, and your shoulders back. This helps keep your upper back straight while having a slight arch in your lower back.
- **Slowly lift** by straightening your hips and knees (not your back). Keep your back straight, and don't twist as you lift.
- **Hold** the load as close to your body as possible, at the level of your belly button.
- **Use your feet** to change direction, taking small steps.
- **Lead with your hips** as you change direction. Keep your shoulders in line with your hips as you move.
- **Set down** your load carefully, squatting with the knees and hips only.

## Health and Wellness

Our goal for is to make a positive difference in the lives of our teaching staff and to help them enjoy happier, healthier lives. We will provide awareness and education by including worksite wellness information in new staff orientation, posting flyers on walls or bulletin boards and sending e-mail correspondence. Components of our wellness program will include:

*Environmental wellness:* The positive perception of the environment that one works and lives in.

*Emotional wellness:* Possession of a secure self-identity and a positive sense of self- regard; also the ability to cope with and/or improve unpleasant mood states

*Spiritual wellness:* A positive perception of meaning and purpose in life.

*Social wellness:* A perception of having support available from family, friends, or co- workers in times of need and a perception of being a valued support provider.

*Intellectual wellness:* The perception of being internally energized by an optimal amount of intellectually stimulating activity.

*Physical wellness:* A perception and expectation of physical health.

All teaching staff should know about available resources available to them as members of the St. Cloud State community. The below links will lead to on and off campus resources to support each teaching staff member in stress management, prevention and treatment of depression, and/or general wellness.

<https://www.stcloudstate.edu/sld/departments.aspx> Student Life and Development

<https://www.stcloudstate.edu/sps/campus-resources.aspx> Campus Resources

<https://www.stcloudstate.edu/sps/community-resources.aspx> Community Resources

## Staff Meetings

Each week the lead teachers meet with the director at a designated time every week. Individual age group teachers will schedule their own staffing and planning sessions according to availability of personnel. Each age group staff must meet at least once a month.

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## Opening and Closing

Opening: If a staff member "opens" in the morning, he or she has a key. He or she must be there no later than 7:00 a.m. summer or 7:30 a.m. fall and spring semesters to open the door. Specific opening duties are posted for each classroom. He or she must greet parents and children upon arrival.

Closing: If a staff member "closes" in the late afternoon, there are many things that need to be done. He or she is responsible for the children that are left in the center until closing. That staff member must greet parents when they come to pick up their children and assist them in getting the children's things together. If he or she does not recognize someone picking up a child, he or she should ask him/her to identify him/herself, ask to see a picture I.D. and double check the information in the child's file for Authorized Persons to Pick Up Child. Staff must stay in the center until all children in their area are picked up. Specific closing responsibilities are posted in each classroom.

Friends, "important others", rides home, etc, are NOT ALLOWED to wait for staff in the center until they finish. They must wait outside of the center in the ECC building.

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## Staff Orientation

Before new teaching staff are able to have unsupervised contact with children, they must complete a comprehensive orientation training. This orientation consists of MN Department of Human Services licensing training requirements and Criminal Background Check in addition to center and classroom specific information. When every piece of the training and criminal background check is complete and clear, the new teaching staff is able to have unsupervised contact with children. Unless notified by the director, it is assumed all practicum/internship students have NOT completed the complete training and background check procedure and will NOT receive any unsupervised contact with children. Volunteers and support staff will NOT have unsupervised contact at any time. They must be with, and supervised by, regularly scheduled teaching staff at all times.

## Performance Evaluation

Lindgren Child Care Center employs staff in two broad categories. The first category is comprised of the full-time professional staff; the director, associate director, and infant, toddler, and preschool lead teachers. All of the personnel policies of these individuals are guided by the Master Agreement between the Minnesota State Colleges and Universities (MnSCU) and the Minnesota State University Association of Administrative and Service Faculty (ASF) affiliated with Minnesota Teamsters Local 320.

The Master Agreement Article 6 describes that all evaluation reports are contained in the personnel file, and by Employer and ASF member understanding these evaluations must be completed annually.

The second broad category of staff at Lindgren Child Care Center is made-up of all of our part-time St. Cloud State University student employees. All part-time student employees are evaluated four times a year by their lead supervising teachers, using an instruments designed for each classroom. Student staffs complete a self evaluation at mid-term along with the end of each semester along with the classroom teacher. Each classroom teacher has created an age specific evaluation form which includes: Interaction with Children, Interaction with Parents, Interaction with Staff, and Personal Responsibilities.

- Preschool Staff Evaluation, Appendix IX-S
- Toddler Staff Evaluation, Appendix IX-T
- Infant Staff Evaluation, Appendix IX-U
- Graduate Assistant Evaluation, Appendix IX-V
- MSUAASF Evaluation/Planning Form, Appendix IX-W

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## Position Description

Staff at the Lindgren Child Care Center must meet certain requirements for the different types of teacher: teacher, assistant teacher, and teaching staff. In addition, there are descriptions of the position for assistant teachers, teaching staff, receptionists/office assistants, and the assistant to the director.

- Teaching Requirements, Appendix IX-X
- Position Description-Assistant Teacher, Appendix IX-Y
- Position Description-Teaching Staff, Appendix IX-Z
- Position Description-Receptionist/Office Assistant, Appendix IX-a
- Position Description-Assistant to the Director, Appendix IX-b

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## Procedures for Reassignment or Termination of Student Personnel

1. Lindgren Child Care Center Student Personnel are students employed under the University Work-Study Program and/or paid with Student Activities monies.
2. Conduct by Lindgren Child Care Center Student Personnel while performing as an employee of the Center which violates Lindgren Child Care Center policies, including the "Policy on the Use of Drug and Alcohol", MnSCU rules, State Law, and/or Federal law may serve as cause for reassignment or termination of that employee or volunteer's position at the center.
3. The Lindgren Child Care Center director may immediately reassign and/or terminate student personnel at the center if the action is necessary to insure the safety, health, and/or welfare of the children, parents, and/or other staff. Prohibited actions include;
  - a. Rough handling
  - b. Shoving
  - c. Hair pulling
  - d. Ear pulling
  - e. Shaking
  - f. Slapping
  - g. Kicking
  - h. Biting
  - i. Pinching
  - j. Hitting
  - k. Spanking

In addition, subjection of a child to emotional stress will result in dismissal. Examples include:

- a. Name calling
  - b. Ostracism
  - c. Shaming
  - d. Making derogatory remarks about a child or the child's family
  - e. Using language that threatens, humiliates, or frightens the child
4. Staff will not separate children from the group unless:
    1. Less intrusive methods (redirection, discussion) have been tried but ineffective
    2. The child's behavior threatens the well being of the child or other children in the program
    3. A child who requires separation from the group must
      1. Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person
      2. The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation
      3. The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops
    4. Children between six weeks and sixteen months will not be separated from the group as a means of behavior guidance.
  5. Any situations presenting a possible violation in #2 above should be reported to the Lindgren Child Care Center director as soon as possible.
  6. If a violation is substantiated by the director, the director will draft a written description of the incident(s) and the actions taken by the director.
  7. The director will file the Incident Report(s) with the designated official listed in the College Bulletin, Faculty/Staff Handbook, MnSCU Rules, or Minnesota Law.
  8. Any incidents of suspected child abuse, child sexual abuse, or child neglect by student personnel will be referred to the Vice President for Student Life and Development and the Stearns County Child Protection Officer in accordance with Minnesota statute.
  9. The Financial Aid Office will be given written notification of any Work-Study student personnel reassignment by the Lindgren Child Care Center director as soon as possible to minimize disruption of work-study payments and/or further efforts at reallocating such monies.
  10. Where appropriate, students may exercise all due process procedures relating to academic disciplinary appeals found in the Student Handbook.
  11. Assistant teachers will supervise aides in absence of lead teacher.
  12. The Lindgren Child Care Center will not tolerate any unexcused absences. Any such absences may result in termination of employment.
  13. Tardiness- excessive tardiness will be grounds for termination.

14. Inappropriate language/statements are not acceptable. Respect and good judgment towards parents, children, and staff need to be observed at all times.
15. It is unlawful for any staff member to treat a child in an abusing or neglectful manner. Persons suspected of child abuse and/or neglect will be reported by the director or lead teachers to the appropriate social service or police department representative.
16. At the time of report, the staff persons will be reassigned to other duties that do not call for unsupervised contact with children until the culmination of the Internal Investigation at which time he/she may return, or be subject towards further investigation.
17. Investigation of existing staff with regard to alleged child abuse and neglect shall be pursued by the director, Vice President for Student Life and Development, and the appropriate enforcement agencies.
18. Persons suspected of child abuse and/or neglect may be reassigned, suspended, or terminated from their employment at the Lindgren Child Care Center and the University.  
It shall be the policy of the Lindgren Child Care Center to not hire a staff person convicted of or admitting to or been the subject of substantial evidence of an act of child battering, child abuse, child molestation, or crimes of moral turpitude or debasement. All staff will be required to submit information for criminal background checks before working directly with children.
19. Investigation of staff candidates with regard to alleged or proven child abuse, neglect, and/or moral turpitude will be done by the director and the Vice President for Student Life and Development.
20. If a student staff person encounters a situation where there is suspicion or concern, it might be helpful to discuss his or her concern with the lead teacher or Director. But does not eliminate the person's responsibility to report.
21. This follows the chain of command as written in the staff handbook. However, the law requires mandated reporters to personally make a report if they know or have reason to believe a child is being neglected or abused or has been within the past three years.
22. Staff must maintain confidentiality of information unless they are talking to teachers, social services personnel, or law enforcement personnel. This means keeping information about children to themselves. Finally, staff must never allow their concerns to color or affect the positive regard they must hold for each and every family the Center serves.
23. Grievance- If a teaching staff member has a complaint or concern about some aspect of the program, they should first try to settle the grievance with the other party involved. Policy matters or unresolved conflicts should be discussed with the center director. Further unresolved matters may be taken to the Vice President for Student Life and Development.

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## Program Professional Development Plan (PPDP)

The LCCC Program Professional Development plan is an annually updated document which is developed by the director and lead teachers. Specific trainings included in this plan come from staff evaluations, staff satisfaction survey, parent satisfaction survey, and lead staff observation. The PPDP is shared with teaching staff during each orientation: Fall, Winter, Summer.

## Professional Resources for Teaching Staff

1. [MN Thrive Initiative](#)
2. National Association for the Education of Young Children [NAEYC](#)
3. Minnesota Association for the Education of Young Children [MNAEYC](#)
4. [National Coalition for Campus Children's Centers](#)
5. [Center for Inclusive Child Care](#)
6. [Develop: The MN Quality Improvement & Registry Tool](#)
7. [MN Department of Education](#)
8. [Early Childhood Family Education](#)
9. MN Department of Human Services (licensing)
10. [Transforming Minnesota's Early Childhood Workforce](#)
11. [Minnesota Centers of Excellence for Young Children with Disabilities](#)

## Recruitment and Maintenance of Staff

### Teachers

Our teachers have longevity in this program. These positions are supported with union contracts and exceptional fringe benefits. When we have the need to hire, we follow university Affirmative Action procedures for hiring, which include conducting regional searches. Work is done by search and screening committees, recommendations for hire go to the Vice President for Student Life and Development, and finally to the President of the University. Qualifications for the position are defined by the position description.

### Teaching Staff

Our policy and practice will be that each child's age group will have staff assigned to achieve particular ratios as stated. There is a full-time lead teacher in each classroom. Teaching staff do vary from day to day and from hour to hour. Once the schedule is established, the teaching staff is stable for the rest of the semester. Frequently the same staff person will come, leave, and return to work in the room. Teaching staff assigned to a particular age group work with that age group throughout the duration of their employment at Lindgren Child Care Center. Close examination of enclosed staffing patterns verify that, from hour to hour, the composition of the teaching staff does not change more than 50%.

Student staff are trained, coached, and mentored by their lead teachers. They work in these lead teacher's classrooms for their tenure here at St. Cloud State University. Therefore they consistently work in the same age classroom, and have responsibilities for working with a specific assigned group of children. This provides for continuity of relationships between teaching staff and children.

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## Role

Staff are qualified teachers, assistant teachers, and child care aides. Lead teachers have Bachelor degrees and Pre-kindergarten teaching licensure with strong experience in early childhood care and education. Assistant teachers have at least two years of post-secondary education and experience in licensed child care centers. Child care aides are developing skills of working with young children while working at the center, many of which are SCSU work-study students. All staff members are required to participate in on-going training designed specially for the center to ensure consistency with our mission and program goals. An excellent adult to child ration is maintained at all times, averaging two to five for infants, one to five for toddlers, and one to seven for preschoolers.

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## Salary

All student staff is eligible for salary increases based on length of employment and professional qualifications. Currently all beginning student staff will begin employment with a \$10.00 per hour salary. After one year the student will be granted a raise to \$10.25 per hour. After two years of required coursework, staff with 1020 hours of experience working with children are eligible to be paid at the assistant teacher rate of \$10.50 per hour. If a student employee has 4016 hours of experience and 24 credit hours of relevant coursework, the employee shall receive a \$12.00 per hour salary. All salary increases also require support from lead teacher in classroom of employment through semester performance evaluations. The base salary for work-study students is set by the Office of the Chancellor, MNState.

Unclassified Change Form: The Unclassified Change Form is used to make additional payments to employees already in the payroll system, such as overloads, extra duty days, or substitute pay. It is also used to notify HR of a change in assignment, i.e., reassigned time.

- Unclassified Change Form, Appendix IX-c

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## Staff Development and Training

In accordance with our philosophy the St. Cloud State University's Lindgren Child Care Center offers a comprehensive training program that gives each teaching staff member the opportunity to learn, develop, and practice in a high quality early care and education facility. This Five-Part Staff Development Strategy describes how student employees are prepared for employment in the early care and education field.

These areas include;

1. A rigorous orientation giving each new and returning staff person the tools necessary to begin work at the Lindgren Child Care Center,
  2. Appropriately scheduling staff according to experience and capability,,
  3. Monthly in-service trainings designed by the lead teachers and administrative team. These trainings are offered each year along with relevant topics to address issues happening in the classrooms and with specific needs of classroom staff. This plan complies with both MN Statute 245A.40 and NAEYC Accreditation requirements,
  4. Modeling, mentoring, and evaluation,
  5. Child Care Aware professional development and training opportunities that seek to positively impact the experiences of children in child care settings by expanding the knowledge, skills, attitudes and beliefs of those who care for them.
    - Trainings are offered through Child Care Aware of MN
    - All trainings are approved by Parent Aware, the MN Early Childhood Quality Rating System
    - All trainings are structured to lead to credentials, such as the CDA.
    - Staff register with the MN Center for Professional Development were they are able to track themselves in the MNCPD Career Lattice
    - Staff are encouraged to complete a career professional development plan through the MNCPD
- Professional Development Plan, Appendix IX-d
  - Annual Training Plan, Appendix IX-e
  - MN Statute 245A.40, Appendix IX-f
  - Preschool Staff Handbook, Appendix IX-h

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## Staff Health Assessment

All staff, professional and student, will be required to have on file a completed Staff Health Assessment form. This form will be completed by the staff person's health care provider. The only exemption to full completion of this form is for graduates of Minnesota State High Schools after 1997. These students do not have to supply the university with complete immunizations as they have been compliant to state policy during their high school career.

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## Substitute Teachers

Orientation for substitute teachers must contain the following elements:

- Health, safety, and emergency procedures (from Staff Handbook, pages 4-14);
- Accepted guidance and classroom management techniques (from Parent Handbook, page 19);
- Child abuse and neglect reporting procedures (from Staff Handbook, page 9);
- Regulatory requirements, i.e. Rule 3, NAEYC, CACFP.

After completion of orientation, all substitutes must complete the blue Personnel Information Form, Confidentiality Statement and Guidelines Form, and a MN Background Check Information Sheet.

- Orientation Elements (subs, volunteers, etc) IX-S
- Personnel Information Form, Appendix IX-G

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## Summer Staff Lunch Policy

If there is leftover food after all the children have finished eating, leftover food may be put into the refrigerator. The date must be written on the food. If there is time during naptime and a staff member has not had the opportunity to eat lunch, staff may dish up a plate of food from the refrigerator and eat in the back staffroom (providing there are enough staff in the room with the children). The only time that staff are allowed to eat in the room is when they are seated at a table with children who are also eating. Otherwise, food must always be eaten in the back staffroom. The afternoon staff must empty the lunch food from the refrigerator and wash the dishes each day.

During the fall and spring, no lunch food will be saved for staff.

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## Teachers and Specific Classrooms

Each child's age group will have staff assigned to achieve particular ratios as stated. Teaching staff assigned to a particular age group will be primarily assigned to work with that age group throughout the duration of their employment at Lindgren Child Care Center.

Student staff are trained, coached, and mentored by their lead teachers. They work in these lead teacher's classrooms for their tenure here at St. Cloud State University. Therefore they consistently work in the same age classroom, and have responsibilities for working with a specific assigned group of children.

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## Background Checks

It is the expectation of the Lindgren Child Care Center that every practicum student has Minnesota Criminal Background Check completed prior to any experience with children. It is also the expectation that departments which use the Lindgren Child Care Center as a primary practicum site (Child and Family Studies, Nursing Sciences, Communication Disorders) will complete the required background checks on each student prior to any practicum experience.

- Background Check Information Form, Appendix X-A
- Criminal Background Study, Appendix X-B

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## Child/Practicum Interactions

Practicum students and/or volunteers are never counted in the ratio of their designated classroom and will not assume any primary responsibility for the care of the children at the Lindgren Child Care Center. No practicum experience or volunteer students will ever be alone with or be assuming responsibility for the care of any children. The exception to this policy will be granted for teacher candidates as this will be an expectation as they polish their professional skills.

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## Classrooms

The Lindgren Child Care Center accepts no more than 4 practicum students/volunteers at any given time, in the following rooms:

- Infant room: 1
- Toddler room: 1
- Preschool room: 2

Practicum experience students will be instructed by the designated classroom teacher how to best complete the objectives of their assignment. Volunteers will also be instructed by the designated classroom teachers with the primary objectives of assisting with routine classroom tasks.

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## Faculty Responsibility

Faculty which intend on using the Lindgren Child Care Center as a practicum site for an entire class must complete an Observation/Participation Application form prior to any practicum experience. Class assignments are to be reviewed and approved by the director or associate director before activities are scheduled.

Observation/Participation Application, Appendix X-C

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## Practicum Orienting Procedure

Prior to any practicum experience or student observation each student must read and agree to all materials within the Lindgren Child Care Center, Guidelines for Student Observers. This form includes protocol in participation, confidentiality, conduct, and various housekeeping items. Upon entering the child care center each student is required to sign in and make them a name tag, signing in also designates that they have read and agree to comply with the Practicum Experience Guidelines.

- Practicum Experience Guidelines, Appendix X-D

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## Student Responsibility

We understand that faculty put the responsibility of finding practicum sites/experiences on the students as part of their assignment. These students will be required to supply to us a syllabus with the requirements, objectives, along with any required assessments from our classroom teachers prior to any practicum experience. This syllabus will be reviewed by the director or associate director, the practicum students may be required to meet with the director, associate director, or classroom teacher prior to acceptance to show appropriate child development knowledge.

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## Volunteer Orienting Procedure

Orientation for volunteers and support staff contains the following elements:

- Health, safety, and emergency procedures (SUIDS/AHT)
- Accepted guidance and classroom management techniques
- Child abuse and neglect reporting procedures
- Regulatory requirements, i.e. Rule 3, NAEYC, CACFP.

Volunteers and support staff will NOT have unsupervised contact at any time. They must be with, and supervised by, regularly scheduled teaching staff at all times.

After completion of orientation volunteers must complete the blue Personnel Information Form.

- Personnel Information Form, Appendix X-E
- Substitute and Volunteer Orientation Materials, Appendix X-F
- Background Check Information Form, Appendix X-A

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