

Kid's Korner Parent Handbook



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FOREWORD

One of the most important decisions you will be called upon to make in the early years of your child's life is the selection of a quality childcare provider. The individual(s) whom you choose to care for your child, will influence your child academically, emotionally, socially, and morally. Therefore, the care you choose will ultimately affect the outcome of your child's entire life. Kid's Korner will never claim to be "the best" childcare provider, that is a decision only a parent can determine for their family.

Kid's Korner Educare incorporates Christian values along with the personal attention derived from home day care and the educational and social system of a center. Kid's Korner's Educare system promotes quality curriculum which is personally designed and implemented by our Executive Director, Director and the teachers. It is done in accordance with the public and private schools' curriculum, National and State Standards, and Accreditation Standards to prepare the children for their academic years and develop their self-esteem. Our unique nurturing system instills individual and group self-esteem through social and educational play, self-directed activities and group activities.

We, the staff, invite you to try our alternative to the traditional method of day care/preschool. The superior childcare and unique educational system at Kid's Korner will ensure a positive experience for you and your child.

MISSION STATEMENT

Educating today for a brighter tomorrow.

PURPOSE

The purpose of Kid's Korner Educare Center, Inc. is to promote the strengthening of the family unit by creating a safe, supportive, and nurturing environment that offers care, education, health, nutrition, developmental services and character development regardless of race, color, national origin, sex, religion, age, disability, political beliefs, sexual orientation, and marital or family status.

PHILOSOPHY

We believe that children learn through play in all its forms: educational, developmental, self-directed, as well as group activities. To enhance this learning, we feel it is imperative to have dedicated, loving caregivers who instill individual self-esteem, a sense of responsibility, and promote proper development. Because the family unit is of the utmost importance, we endeavor to promote its strengthening. To do this we have Christian-centered values. We encourage parental involvement and provide support services. At Kid's Korner, we have an open door policy and parents are welcome to visit at any time.

BACKGROUND

Kid's Korner Educare Center, Inc., established in 1991, was designed to create a warm, nurturing, educational environment for children. When formed, select ideas from home daycare, childcare centers, and elementary schools were combined to attain an intimate atmosphere and the quality program we have today.

Because of the growing demand and ever present need for quality childcare, the decision was made to develop a program which provides children with a quality early childhood education, while keeping our goal of low child-to-staff ratios. It is our opinion that the low child to staff ratios only adds to our quality.

We, at Kid's Korner, believe to create a nurturing positive environment, a greater emphasis must be placed on the type of staffing. We believe certain individual characteristics such as dedication, patience, and love for children are equally as important as educational qualifications. We feel that natural love for children is a God-given gift and not something that can be obtained through a classroom or textbook alone. If a caregiver is to promote the qualities of self-esteem, self-discipline, and a general respect for the world around them, they must have more than the knowledge of child development. This is the difference that we strive to provide.

Because we are here to empower the child and their family, our educational goal is to allow the child to learn through play and exploration in all its forms, at their individual, age-appropriate pace. We make this possible by offering significant growth opportunities through our written curriculum, structured play and the use of areas designed specifically to promote all aspects of growth. Our staff are also committed to individual portfolio writing, to best understand the individual milestones of the children.

In addition to our superior educational and social program, Kid's Korner promotes a variety of programs and opportunities that will contribute to the strengthening of the family unit, since the family should be the child's primary source of love and support.

REGISTRATION

Accreditation

Kid's Korner Educare strives towards the professionalism offered through Accredited programs. Accredited programs promote the lowest staff to child ratios and the highest education standards in the industry. If you should have any questions about Accreditation please contact the National Accreditation Commission for Early Care and Education Programs - P.O. Box 90723 – Austin, TX 78709-0723 phone (512) 301-5557 www.naccp.org, National Early Childhood Program Accreditation – 1150 Hungryneck Blvd. Suite C305, Mount Pleasant, SC 29464 1-800-505-9878 www.necpa.net or NAEYC Accreditation at 1509 16th Street, N.W. – Washington, D.C. – 20036-1426 phone 1-800-424-2460.

Licensing

Kid's Korner Educare is licensed under Chapter 9503 Rule #3 of the State of Minnesota Department of Human Services, Division of Licensing located at 444 Lafayette Rd - St. Paul, MN 55155-3842. Their phone number is (651) 296-3971.

Eligibility

Children between the ages of six weeks and twelve years of age are eligible to attend Kid's Korner. Kid's Korner is licensed to provide unique quality care for up to 230 children in the following three age groups: 32 infants (6 weeks- 17 months), 42 toddlers (18 months - 33 months), 156 pre-school/school-age combination (34 months through 12 years). All children enrolled are provided with quality care in a safe and loving environment regardless of race, creed, religious affiliations or individual needs. Kid's Korner does reserve the right to terminate, refuse, or restrict care to a child if behavioral and/or social issues may affect the safety, health and general well-being of the child, peers, parents or staff. Though we offer special needs care, we are not a skilled nursing facility and do reserve the right to evaluate children prior to or in consideration of continued enrollment at Kid's Korner.

Pre-Admission

Prior to admission of any child, a personal interview between the parents/guardians, children, child's teacher and/or the site director is required. This interview affords parents and children the opportunity to view and learn about Kid's Korner as well as discuss questions and concerns with the Director. At this time, parents are required to inform Kid's Korner of any special medical conditions, needs or allergies. These forms must be completed with appropriate forms prior to enrollment.

Kid's Korner encourages the child to come in and be introduced to the classroom, teachers, and other friends. This is an opportunity to welcome the child, see the classroom arrangement, meet friends, check out the classroom, find the bathrooms, be introduced to the schedule, expectations and how the classroom is managed. It is a time for the child to ask questions or simply explore. The family will also be given a "Classroom Welcome Packet" to further explain items needed, milestones and goals of the classroom.

Realizing that all environments are not suitable for all children and also that all children's needs vary, our evaluation of admittance is based not only on the personality of the child, but also the parent's philosophy on childcare and rearing. Kid's Korner does reserve the right to refuse admittance based on this determination.

Enrollment

At the time of the pre-admission interview, parents will be given the fee information and an enrollment application packet which will include all of the necessary forms required to enroll a child. The application packet will include the following forms: an enrollment application, child's emergency card, health care summary, immunization record, Tylenol permission slip, a permission slip for diapering products, sunscreen and insect repellents and a developmental history form including a Food Program Data Income report and an Enrollment/Admission & Payment Agreement. ALL FORMS MUST BE COMPLETED PRIOR TO THE CHILD'S FIRST DAY OF CARE. All forms and information contained in your child's file will be kept in a secured file and viewed only by Kid's Korner administrator and staff (at administrative discretion). These exceptions are the State of Minnesota, Department of Human Services licensor who periodically inspects files to ensure licensing standards are met, Accreditation to ensure accreditation standards are met, Steele County Public Health to ensure immunizations and health care policies are met, and if your child receives funding through a county or state agency. Under all other circumstances, written permission will be obtained before giving any information to any other person or agency.

KNOW YOUR RIGHTS

Affirmative Action Statement/USDA

USDA Nondiscrimination Statement

SNAP and FDIPIR State or local agencies, and their subrecipients, must post the following Nondiscrimination Statement:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, 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: [How to File a Complaint](#), 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.

This institution is an equal opportunity provider.

Parent Grievance Procedure

Please contact the Executive Director and/or Director immediately if you believe you have been discriminated against. Your confidence and satisfaction in our service is important to us. Every effort will be made to address and resolve your concerns promptly. If you feel your concerns have not been satisfied, please submit your concerns in writing within three (3) working days to the Executive Director. A meeting of the staff involved, the Executive Director and yourself, will be conducted to resolve the concern within seven (7) working days.

TUITION POLICIES AND PROCEDURES

Registration and Registration Fees

Upon the acceptance of your child for admission, you will be assessed the first week of tuition and the registration fee both of which are non-refundable. In the case of families receiving assistance, your copayment plus a \$50.00 deposit is due upon acceptance of enrollment. It is also your understanding that Kid's Korner Educare does require a two week written notice should you decide to terminate your child care for any reason which you are responsible to pay for. The registration fee will be used to help defer the costs of processing your application, fund classroom projects, field trips and special events. This fee plus the first week of tuition is due at the time of enrollment to secure or guarantee a spot.

Child Care Tuition/Rates

All childcare Tuition will be posted on a separate rate sheet clearly explaining the Tuition for children and any discounts should they apply. **Tuition/Rates are subject to change at any time upon a 30 day written notice via Kid's Korner Educare.**

Child Care Payment Policy

It is Kid's Korner's policy to be paid in advance for the child care service. All payments are to be set up through ACH (automatic withdrawal) due on a schedule predetermined by Kid's Korner Educare. Payments are made for the current and following week. Kid's Korner requires payment and will bill the Family for childcare on Monday of the care week. This is completed on the "Automatic Payment Authorization" Form). It is the Family's responsibility to ensure that childcare tuition payments are made to Kid's Korner, unless otherwise previously agreed to in writing by the Administration of Kid's Korner Educare. All families must provide information upon enrollment for either a checking, savings, or credit card account. This information will be used in the event the family fails to keep their childcare account current and in good standing. Kid's Korner Educare reserves the right to proceed with electronic payments in the event the account falls 2 (two) care weeks behind in order to keep the account in a current status.

In the case of families receiving assistance their co-payment along with their rate difference, is due the first day of the session. Thus, you are paying in advance for your childcare. You will be charged a \$10.00 late fee for any checks not received by the following Monday or first day of the session whichever applies. On the back of your child's admission application is a "Child Care Payment Agreement." You will also be given a separate "Enrollment/Admission & Payment Agreement." Both of these agreements must be filled out in its entirety prior to enrolling your child. Any deviations from these policies and/or agreements must be approved by the Director, in writing, prior to acceptance.

Absences

Kid's Korner Educare is a professionally staffed facility and we guarantee your family a daily service. This is why we require payment regardless of absenteeism. Since Kid's Korner is financially committed on a daily basis, year round to care for your child, refunds and/or credits are not granted for absenteeism, extended leaves of absence or holidays. Kid's Korner will allow up to 6 (six) weeks of unpaid leave for a family to use as they wish in the case of a significant life event, the addition of a child, or extended leave do to change in their job status, while maintaining their current childcare reservation. At which time a 1 (one) week deposit is required to hold the child(ren)'s spot. As a reminder, per our vacation policy, families must be enrolled full time year round for a week of vacation credit to be applied. Consideration is given in the event of a child's extended hospitalization of greater than 5 consecutive care days. Other situations will be evaluated on a case by case basis upon consulting with the Director.

Vacations

Kid's Korner allows each family enrolled on a full time basis 1 week (5 consecutive days) of vacation per year. There is no vacation allowance for school age children.

The vacation days are allowed to enhance and promote family unity and to promote the strengthening of the family unit as a whole. This time cannot be used to cover costs for illness days nor can it be broken into "daily" units. Families must be enrolled for a complete year prior to using vacation days. Vacations are granted on a calendar year basis and not on the anniversary date. The family requesting to use the vacation time must be enrolled on a full time basis (all 52 weeks of the year) and have their child care account up to date prior to utilizing the vacation days. Families enrolled using the part time rate, are not eligible for a week of vacation. Vacation days cannot be "banked" nor can it be used to give notice of termination.

In order to be eligible for vacation, you must be enrolled for one (1) year, must be enrolled Full Time (52 Weeks), have your account current and Vacation cannot be used in conjunction with Maternity Leave.

Returned Checks

Upon signing your child's admission application, you are acknowledging that you understand you are responsible for a \$30.00 returned check fee should you present a check with Non-Sufficient Funds.

Payment and Collection Policy

Since Kid's Korner is financially committed on a monthly basis to care for children, we have implemented the following payment and collection policy. All childcare Tuition will be posted on a separate rate sheet clearly explaining the Tuition for children and any discounts should they apply. All payments are to be set up through ACH (automatic withdrawal) due on a schedule predetermined by Kid's Korner Educare. Payments are made for the current and following week. NSF Payments are assessed a \$30.00 fee as permissible by law. If your ACH account payment is returned NSF or if your account should fall 10 days (or 2 child care weeks) behind, your account will be determined delinquent and you will be notified of the status. At this time, you will be required to bring your childcare account up to date immediately and you will be required to complete an "Automatic Payment Authorization" allowing Kid's Korner to automatically debit your bank account for your child care tuition. Failure to do so will result in immediate suspension of your child care privileges until your account is current.

If you fail to bring your account current within 3 business days your child care privileges will be terminated. At this time you will be required to make financial arrangements with Kid's Korner for the payment of your debt. Understand that a two week notice is still required and it is your responsibility to pay for this time regardless if childcare is provided or not. These arrangements will include a minimum billing charge of \$2.50 or 1.5% per month service fee on past due accounts. Failure to set up an agreement or abide by the terms of an agreement will result in legal action on behalf of Kid's Korner for collection of your debt and be placed with the collection agency of our choice to be reported on your credit report.

In the event that any unpaid balance is placed for collections, with the Credit Collections Agency of our choice and placed with an attorney at their discretion to obtain judgment or otherwise satisfy payment of this account, a fee of no less than 33% of the unpaid balance will be added to the total amount due. This amount shall be in addition to any other costs incurred directly or indirectly by Kid's Korner Educare to collect amounts owed under this agreement such as court costs, sheriff's fee, service charges, interest, late fees, etc.

The authorized fees and the additional costs and charges listed above reflect the actual costs incurred by Kid's Korner Educare to collect accounts owed under this agreement and a corresponding decrease in expected revenue resulting from the parents' failure to pay as specified in this agreement. Placing a deposit with Kid's Korner Educare indicates that the above mentioned terms have been explained to the family and the family agrees on their own accord to the above terms and takes full responsibility for payment of costs incurred by Kid's Korner Educare.

Late Pickup Fees

Kid's Korner is closed at 5:30 p.m. sharp. Any children picked up after this time will be assessed a late pickup fee. Late pickup fees are due and payable at the time you pick your children up. For the first ten (10) minutes you are late you will be charged a thirty dollar fee (\$30.00) per child, for every portion of five (5) minutes after that you will be charged an additional twenty dollar fee (\$20.00) per child. In the event a family is late more than twice in a 6-month period, the late fees will increase to \$50.00/\$30.00 for the 2nd tardy, to \$75.00/\$40.00 for the 3rd tardy and \$100.00/\$50.00 for any subsequent tardy' s. Fees will be billed directly to your account. Please inform the Center if you know you are going to be late. These fees will be considered and waived on an individual basis upon consulting with administration.

Billing

It is the family's responsibility to make sure of your account status with Kid's Korner. With the previously stated policy in mind (see Childcare Payment Agreement) you are aware we require payment in advance for services. All accounts are closed on the last day of the month and delinquent accounts will be assessed a minimum billing charge of \$2.50 or 1.5% per month service fee on past due accounts. You will be notified with a payment reminder should your account begin to lapse, (See Payment and Collection Policy) or if your account should require reporting to the collection agency. Year-end statements in the form of a W-10 (or similar form) will be issued no later than January 31st the following year.

Insurance

Kid's Korner purchases workers compensation for all employees, liability and accident coverage for all staff and children through the Insurance Agency of our choice. General Liability coverage is \$1,000,000/\$2,000,000 and Auto Liability for uninsured and underinsured motorists is also in force.

Holidays

Kid's Korner is closed the following Holidays: New Year's Day, Memorial Day, 4th of July, Labor Day, Thanksgiving Thursday and Friday, Christmas Eve Day, and Christmas Day. In the event the holiday should fall on a weekend we will observe a day conducive to the community. Kid's Korner Educare is paid for these holiday observances. Additionally, beginning in 2020, our Board has elected to designate a Staff Training Day, Annually. The Staff Training Day will be a closed day, for Professional Training and will be held in respect to the Owatonna Public School District's calendar. We will coordinate a day the District is closed, with the intention of utilizing Martin Luther King, Jr. Day in January or President's Day in February of the year, as preferred days. It will be announced annually, as it is determined.

GENERAL POLICIES & PROCEDURES

Arrival & Departure

Transportation to and from the facility is provided by the parents with the exception of bus transportation for the school aged children who are transported from Kid's Korner to their respective schools via the Owatonna Bus Co. Parents must accompany their child into the building and to their classroom where our staff will assume responsibility for care. Please allow adequate time in the morning to visit with your child's teacher and provide any needed instructions. When a child leaves for the day, please remember to inform your child's teacher that your child is leaving. If your child will not be in attendance for the day we ask that you notify the center by 8:00 a.m.

Hours of Operation

Kid's Korner is open Monday through Friday from 6:30 am to 5:30 p.m. These hours of operation are firm and non-negotiable. Our program is not licensed to care for children outside of our licensed hours without special written permission from our licenser. With the closing hours at 5:30 p.m., this means our staff is also off the clock at that time.

We have implemented the following closing policy for our staff and children:

A. At 5:20 p.m. staff will gather the children and their belongings. At 5:25 p.m. staff will bring the children to the front door with their belongings and have them greet the parent at the door when they arrive.

B. Staff will physically lock the front door and begin to turn off the lights at 5:30 p.m. This is consistent with our morning arrival, in not being allowed in the building until 6:30 a.m.

Arrival after 5:30 will be assessed the traditional \$10.00 per child for any portion of the first 10 minutes a parent is late. For every portion of 5 minutes after that, parents will be charged an additional \$5.00. (Please refer to the Late Pick Up Fees)

Meals and Snacks

Breakfast, lunch and snacks are served on a daily basis. Breakfast is between 7:00 a.m. to 8:00 a.m., lunch is served between 11:00 a.m. to 12:00 p.m. and mid-morning and midafternoon snacks are served at the classrooms' respective schedules.

Kid's Korner provides family style meals that meet or exceed nutritional requirements established by the United States Department of Agriculture, Food and Nutrition Service. We have an onsite kitchen to prepare all of our meals, and children are discouraged from bringing food to the Center. Exceptions will be made for medical reasons, religious reasons, and commercially prepared food used for treats and/or birthday parties. Please consult your child's teacher if you will be bringing treats for the classroom to determine the number you will need to bring for the children. All meals and snacks are supervised by staff, who encourage conversation and teach proper table manners. Food is not used for punishment and/or reward reasons and drinking water is available to children throughout the day and will be offered to children at frequent intervals.

Personal Items/Supplies

In our effort to better serve you, Kid's Korner provides most of the supplies needed to care for your child on a daily basis. Please speak with the office with any special concerns you may have with regards to supplies for your child.

Personal items such as books, toys and puzzles should not be brought to the center unless designated by your child's teacher. If your child has a special toy or blanket, they would prefer to use during naptime you may bring this in with the understanding that it is kept in your child's cubby during non-nap hours. An extra set of clothing is appreciated and will be kept in your child's cubby. This extra set should be labeled and change with the seasons. Seasonal and outdoor clothing is a must and should be brought daily. In addition, each classroom may ask that you provide personal care items such as a tooth brush, tooth paste and hair brush for your child.

Nap Times

Since Kid's Korner has a structured and active day, nap or quiet times are imperative to the health of the children, thus scheduled into the program. This provides your child with the opportunity to spend time alone to get the needed rest they require. A thirty (30) minute quiet time is required.

Children have their own individual cot. We encourage parents to bring a child's favorite blanket from home that can be used on a daily basis for nap times and be left at the Center for their use. The blankets will be sent home weekly to be washed. Quiet activities are planned for those children who have rested quietly for the required time of thirty minutes.

Parents will be informed of this policy at the time the child is enrolled and any deviation of the policy must be recorded in the child's record.

Infants are allowed to nap throughout the day as needed and are required to sleep on their backs. This is in accordance with the SIDS (Sudden Infant Death Syndrome) recommendations. If a parent requests their child be put to sleep other than on their back, the child's physician, or the parent/guardian must sign a permission slip allowing the child to be an exception to this policy.

Smoking Policy

In compliance with the Minnesota Clean Indoor Air Act, Kid's Korner has a No Smoking policy in the building, on the campus (with the exception of designated areas), and while on field trips. This policy pertains to all Kid's Korner events when the staff is responsible for supervising children.

Supervision

Kid's Korner Educare Center mandates that children are fully supervised by qualified staff at all times while the children are in our care.

Staff & Personnel

All of Kid's Korner Educare's teachers, assistant teachers, aides, volunteers and substitutes meet or exceed the State of Minnesota Department of Human Services, Division of Licensing requirements listed under Rule #3 Chapter 9503. In addition to the educational requirements stated, it is also required that all staff members either meet or exceed additional in-service hours annually and a criminal history check at the time of hire.

Kid's Korner also requires that all staff members renew their Adult CPR, Infant Child CPR, First Aid, and Blood borne Pathogens according to the recommendations of the American Red Cross and Public Health.

Termination

In the event you should terminate your childcare position with Kid's Korner, we do require the minimum of a two-week written notice of which you are required to pay all applicable tuition costs. Costs are still incurred regardless of the reason for termination and whether the children attend or not. (Please see ChildCare Payment Agreement and Collection Policy) Vacation time cannot be used for the last two weeks of care.

Mandated Reporting

It is a State of Minnesota law that we report all suspected abuse, neglect, endangerment or maltreatment of children enrolled. All allegations will be reported to Steele County Child Protection at 507-444-7500 or Law Enforcement at 911. In addition, parents or guardians suspected to be under the influence of drugs, alcohol, or other illegal chemicals when they arrive to pick up their child will be discouraged from picking up their child and the Law Enforcement Center will be notified immediately (911).

Abuse and Neglect of Kid's Korner Property

From time to time we experience the abuse and neglect of Kid's Korner property on behalf of children. In the event this would occur, parents will be notified of the action and the neglect taking place. Under most circumstances, this corrects the problem or issue if there is one. But, in the extreme case we are not able stop the abuse and or neglect of property and the child does indeed break, destroy, ruin, or deface property or equipment, we will bill the family for the cost for replacement or correction. We understand that accidents will happen but this policy is in the event of destruction or damage we have determined to be deliberate.

Confidential Nature of Work

Our clients and the Center have the right to expect that any information about a child, personal life, family life, or events at the Center be held in the strictest confidence. Betraying this confidence could create a problem for the family as well as the Center. Likewise, when talking to a parent about an incident, staff cannot give out any other children's/parent's names that are involved. If you have any questions feel free to go directly to the Executive Director and/or Director.

Regarding your child's records and application, the information requested on these forms are necessary for proper care of your child. You are not legally required to supply this information; however, failure to do so will make you ineligible to receive child care services from a licensed provider (MN Rule, Parts 9502-0300 to 9502-0445, formerly Rule 2). All forms and information contained in your child's file will be kept in a secured file and viewed only by Kid's Korner's administration and staff (at administrative discretion). These exceptions are the State of Minnesota, Department of Human Services licensor who periodically inspects files to ensure licensing standards are met, Accreditation to ensure accreditation standards are met, Steele County Public Health to ensure immunizations and health care policies are met, and if your child receives funding through a county or state agency. Under all other circumstances, written permission will be obtained before giving any information to any other person or agency.

Alternative Pick-Up/ Emergency Card

Emergency Cards are to be completed by the parent/guardian prior to enrollment, as part of the Childcare Enrollment Packet. Individuals whom you have placed on the Emergency Card may pick-up your child at any time, with or without prior notification.

Further clarification between "father and mother" pick-ups is as follows:

When two parents have a child TOGETHER after marriage, they each have access for pick-up unless there is a court order (following divorce) prohibiting the other parent from pick-ups. There are two exceptions: if the parents never married, the father has absolutely NO rights to the child until he is adjudicated as the father. The second exception is where the father is married to the mother, but he isn't the biological father. The child may call him 'dad,' but if there is not an adoption, then he has no rights—even if he has been with the child since birth.

The Emergency Card does not supersede parent's ability to pick-up when it comes to parent rights. It is simply a consent document and even if a "real father" isn't on the Emergency Card, he can/may pick the child up. Emergency Cards are just for that—emergency pick-ups, and they are considered for that purpose.

A copy of any divorce decree regarding custody/visitation rights, or the paternity adjudication for a father, or adoption decree will be required upon enrollment if deemed necessary.

HEALTH POLICIES

Upon admission or within thirty (30) days, a medical record including a Health Care Summary of each child must be submitted to the Director. It must include a current physical examination and be signed by the family's health care source or provider. A record of a physical examination is again required whenever the child advances to an older age group, or for a child under 24 months of age, done yearly. Immunization Records must be submitted upon enrollment. Documentation of up-dated immunizations must be submitted as each child has a change in their immunization record.

III Children

A child with any of the following conditions, symptoms, behaviors, or illness must be kept at home. We must exclude children for a minimal 24 hour period:

- A. With a reportable illness or condition as specified in part 4605.7040 that the Commissioner of Health determines to be contagious and a physician determines has not had sufficient treatment to reduce the health risk to others;
- B. With chicken pox until the child is no longer infectious or until the lesions are crusted over;
- C. Who have vomited two or more times since admission that day;
- D. Who have had three abnormally loose stools since admission that day;
- E. Who have a bacterial infection, such as streptococcal or impetigo and has not completed 24 hours of antimicrobial therapy;
- F. Who have an unexplained lethargy;
- G. Who have lice, ringworm, or scabies that is untreated and contagious to others;
- H. Who have a 100-degree axillary or higher temperature of undiagnosed origin before fever-reducing medication is given;
- I. Who have an undiagnosed rash or a rash attributable to a contagious illness or condition;
- J. Who have a significant respiratory distress;
- K. Who are not able to participate in the childcare program activities with reasonable comfort;
- L. Who require more care that the program staff can provide without compromising the health and safety of other children in care.

Children must be excluded from Kid's Korner until 24 hours after the child has been administered appropriate antibiotics for contagious illnesses, or been fever-free without fever reducing medication, and been vomit/loose stools free for a 24 hour period.

If a child should become ill during the day they will be placed in the office in order to be isolated from the other children and allowed to rest quietly until their parents are able to come and pick them up. The parents will be notified of their child's condition and asked to come and pick their child up. If the parents cannot be reached then we will notify the emergency contacts next. If no one is able to be reached then the child will remain in our care and accommodations will be made to keep the child as comfortable as possible and our staff will monitor the child's condition. If conditions warrant, the child's health care source or 911 will be notified.

Parents are asked to notify the center within 24 hours if their child contracts a communicable illness. Communicable illnesses will be reported to all parents the same day the information is received. The staff will post a notice in a prominent place stating the illness, incubation period, symptoms and exclusion recommendations. Kid's Korner will notify the Public Health Department within 24 hours should an occurrence of a "reportable disease" take place (Steele County Public Health 444-7650).

For additional information on the Department of Health's list of reportable diseases please refer to the appendix at the end of the handbook.

III Child Separation

Children who have been identified as ill and/or contagious shall be separated from the rest of the classroom and brought to the office to await the arrival of their parent or guardian.

Illness/Health Practice

Complimentary to our Health Policies, Kid's Korner Educare does not provide care for children who have been dismissed from school due to illness or are too ill to attend or participate in school.

MISCELLANEOUS HEALTH ITEMS

Non-Prescription Medications

Written permission from the parent and family physician is required for the administration of any non-prescription medication such as (but not limited to) Tylenol, Benadryl, Dimetapp, Pedi care, Robitussin, Advil, Motrin or any other over-the-counter medication to include but not be limited to cough medicine, fever reducers, decongestants. Over-the-counter and Non-prescription medications CANNOT be administered to a child unless the child has doctor/physician orders. Kid's Korner Educare will strictly adhere to all label instructions. **Kid's Korner does not administer the initial dosage of a medication, except with physician's written permission for life-threatening situations.** The Physician/Doctor must approve the medication and the dosage, in writing, for the duration allowed in the instructions. If the container does not have how long a medication can be given at a time, Kid's Korner will only keep the non-prescription medication on site for a two week period. After that, the medication must be sent home with the family. The parent must complete a "Medication Administration Form" prior to administration. Medications must be in the original container and only be administered according to the Physician's recommendations and/or instructions. **Any deviation from this must be accompanied in writing by a licensed physician.** Staff will record the date, time and dosage on the Medication Request and Authorization form. Once the form has been completed or the prescription has been finished this documentation will be maintained in the child's file and is available to the child's parents at their request. Additionally, all physician permission forms must be updated annually, as well as if the child changes age-groups.

Insect repellents, sunscreen lotion, diapering products and the like, must have a parent's signature on our Permission for Use of Sun Screen, Insect Repellent, Lotion and Diapering Products. Please provide the insect repellents and sunscreen as lotion or foam, vs spray. Also, all medications both prescription and non-prescription will be checked for expiration. All expired medications will not be allowed for a child.

Prescription Medications

For prescription medications to be administered, Kid's Korner will follow the written instructions from a healthcare provider before administering the medication. A signed permission slip from the parent must also accompany the prescription. The medication information sheet must be brought in, for information regarding possible side-effects and further drug information for staff to resource. Medications must be properly labeled for the child intended and in the original container with the current prescription information clearly printed. Medications that have expired will not be given and any unused portions of medication will be returned to the child's parents or be destroyed. All medications will be kept out of reach of the children and in a locked cabinet. Medications requiring refrigeration will be stored in a separate refrigerator than the one used for food storage. Staff is instructed to read labels carefully to insure proper dispensing and storage. Staff will record the date, time and dosage on the Medication Request and Authorization form. Once the form has been completed or the prescription has been finished this documentation will be maintained in the child's file and is available to the child's parents at their request.

Medication Storage

All medications (including prescription and non-prescription), medical equipment, sunscreen, insect repellents, additional first aid supplies and the like must be stored in a secure (locked) area separate from food and free from access of children.

Child Abuse (Mandated Reporting)

All staff are informed that the law requires them to document and report any suspected cases of child abuse or neglect. That is, anyone suspecting abuse or neglect of a child, regardless of where it occurred, must comply with the law and report. Child Protection number for Owatonna is 507-444-7500. If a staff person suspects that a child is in danger the police will be notified immediately (911). Please see enclosed form in the back of this handbook for further clarification.

Health Consultant

A health consultant will be contracted to review the health and safety policies as stipulated by Rule 3 on an annual basis, and also make monthly site visits to review policies and procedures in all of the classrooms. Additionally, if there is a proposed change in health practices or policies or if an outbreak of a contagious illness should occur, the health consultant will be contacted for review.

Food Allergy Information

Information about food allergies must be presented by the parents to the staff if a child has a known food allergy. Kid's Korner is required to post this food/medical allergy in the child's classroom and in the kitchen area where food is prepared. If it the allergy/situation is considered serious (ie. Epi-Pen, Medical Emergency) your child's picture, situation, and contact information will be posted in the child's classroom in a prominent location for your child's protection and Emergency Personal information.

Infant Diets

The diet of an infant must be determined by the parents of the child and Kid's Korner must also obtain written dietary instructions for the child. In compliance with the USDA Food and Nutrition Program, Kid's Korner does provide iron fortified formula for infants. Kid's Korner does reserve the right to decide which formula will be provided. Infant Food Intake Sheets will be completed by the parent/guardian and kept in the child's file.

Dietary Supplement

If a family wishes to restrict, change, or supplement a child's meal intake from the Kid's Korner menu, the parent must consult with their child's health care provider and obtain in writing authorization to make exceptions to their child's nutrition intake. These forms are provided to the families as requested.

WIC (Women, Infant and Children)

Families eligible for assistance meeting the nutritional and other needs of their child(ren) may seek participation in the WIC program by contacting Steele County Public Health at 507-444-7650.

Accidents & Emergencies

Staff is informed of emergency and accident policies at their employment orientation and these policies are reviewed annually. All staff is required to complete First Aid and CPR training according to Red Cross recommendations. All accidents, injuries and emergencies that occur to children are recorded on an "Accident Notification" form for the purpose of documentation and parent notification.

Information recorded includes name, age, date, place of accident/injury, action taken and whom the accident was reported too.

Because of our commitment to enforce confidentiality and protect the privacy of each family, we are unable to release the names of other individuals involved in the incident.

For a minor accident, first aid will be administered and the parents notified as mentioned above. In the event of a major accident requiring immediate medical attention, first aid will be administered by the first person on scene and 911 will be notified for emergency care. After calling 911, the child's parents and physician would be contacted. Staff will not transport children.

A report will be made to DHS (651-296-3971) within 24 hours of a death of a child or a injury requiring a physician's attention or emergency medical attention.

Prevention is the most important aspect with regards to promoting a safe environment. A daily inspection for potential hazards is done in the Center and its surroundings by all staff members including the Director. When hazardous equipment or areas are found, they are removed, repaired or disposed of. All staff members are always on the lookout for potential hazards on the premises and on field trips.

Proper staff supervision is essential with regards to accident prevention. The following is a list of additional prevention measures Kid's Korner has taken;

- ✓ All poisonous/hazardous substances are stored in the original container and out of the reach of children.
- ✓ Only non-poisonous plants are allowed in the Center.
- ✓ Lead paint will not be used on any of the equipment or walls in the center.
- ✓ Food is not stored near hazardous substances.
- ✓ Water temperature to the classrooms will not exceed 120 degrees Fahrenheit.
- ✓ All outlets will be covered with protective coverings.
- ✓ All electrical cords will be placed out of the reach of children.
- ✓ Staff will not be allowed to drink hot liquids while in the classroom.
- ✓ Staff will protect all children from over exposure to the sun with the use of protective clothing and sunscreen with parental permission.
- ✓ Plastic bags will be kept out of the reach of children and tied in a knot when discarded.
- ✓ Toys will be age appropriate and checked for safety.
- ✓ All water play in the classroom will be closely supervised.
- ✓ All food will be served so it is palatable for the child and teachers will sit with the children during meals and snacks.
- ✓ If balloons are used, they will be removed when deflated or broken.
- ✓ Children will be taught traffic safety. No child will be allowed to cross the street without a teacher or adult present.
- ✓ All "sharp" objects that are provided such as scissors will be approved for children's use.
- ✓ Spills will be cleaned up immediately.
- ✓ All area rugs will have a non-skid backing.
- ✓ Children will be educated on the proper usage of equipment and informed of their limitations.

Pets

Parents will be informed at the time of admission if a pet is present. The pet will be properly housed, cared for, inoculated and licensed

in accordance with the local health ordinance.

Kinds of pets recommended;

guinea pigs, rats, mice, hamsters, gerbils & fish

Kinds of pets NOT recommended;

turtles, rabbits, poultry, cats, dogs, birds, snakes, lizards, salamanders, toads, frogs & crabs

It is recommended that children not be allowed to participate in pet care or maintenance. Families and staff are discouraged to bring their personal pets for display or "show and tell." Our liability insurance does not cover accidents caused by pets not owned by Kid's Korner Educare.

Animal Bites

In the event a child is bitten by an animal while in the care of the Center, staff will immediately notify the Public Health Department (Owatonna 507-444-7650) and the child's parents.

The single most important factor in preventing infections or illnesses (including rabies) following animal bites or scratches is immediate and thorough cleaning of the wound. Whether this should be done in the childcare setting or at the medical care facility depends on the severity of the injuries.

Children with severe bites and/or scratches should be taken to an emergency care facility immediately. Moderate or relatively minor wounds such as hamster bites, may be first treated in the childcare setting, and the child should then be promptly referred for medical follow up.

BEHAVIOR GUIDANCE

Kid's Korner realizes that most discipline problems arise from too much excitement, over stimulation and enthusiasm, rather than direct disobedience. In our admissions tour we will provide you with the opportunity to discuss discipline methods which you would prefer to be used with your child and a chance for us to explain the methods we have available. Continual positive reinforcement will be used to encourage acceptable behavior. Harsh or threatening methods of punishment will not be allowed in the center.

Kid's Korner acts on the theory that "Setting the children up for success is a powerful strategy for preventing or controlling aggression."

We Do This By:

- Finding opportunities to "catch the child being good" and reinforce acceptable behavior with positive comments to the child.
- Recognizing the difference between deliberate misbehavior and honest mistakes.
- Ignoring misbehavior that does not have to be addressed to protect others or equipment, particularly when you sense the child's real goal is attention. Positively reinforcing, with verbal comments, modeling appropriate actions, thereby rewarding "right action" and encouraging a child to request your attention in more positive ways.
- Avoiding direct orders. This eliminates power struggles, and creates a more secure emotional climate where consequences are more directly related to issues rather than personalities.
- Teaching the whole group acceptable behavior at a conflict-free time. Rules become a natural extension of "the way we do things," and children develop a stronger sense of self control.
- Reinforcing with specific verbal comments and not just one word acknowledgments.
- Modeling respect for others, ourselves. We try to show consideration to all children equally; thus you have a message that is caught as well as taught.
- Setting them up for success. What is involved here is letting the children know what is appropriate and acceptable behavior prior to discipline being needed. Also, giving a child ample time to finish a project before it is time to move to the next item, thus, outlining ahead of time to children what the day is going to entail. This can be done verbally and/or through consistent scheduling.

Keeping in mind that the discipline techniques which we prefer to use are positive reinforcement, redirected activities and choices with use of natural and logical consequences, communication, and if necessary short "breaks" which are used in moderation. (All breaks and/or time outs will be noted and logged.)

Separations, yelling, name calling or shaming is not only not a form of discipline it is also not allowed.

Behavior Policy

In the event our traditional methods and attempts at discipline do not work, two things will happen.

- Step 1, notices will be sent home to the parents in a form we refer to as a Disciplinary Referral. This will outline the reason for the referral, previous action taken by staff, actions taken by the disciplinary personnel and space for comments. It is the goal that by holding the child accountable and keeping the parents informed of the mis-behavior we can resolve the inappropriate issues. After three of these have been sent home and corrections to the child's behavior have not been made we will go to step 2.
- Step 2 involves sitting down with the staff, parents and director and developing a specific Behavioral Plan, which will outline specific details of focus to eliminate the behavior problem. Suggestions may include incentive programs, atmosphere changes, more direct service or even professional referrals for behavior assessments.

If the issues do not correct themselves suspension and/or termination may be the final option for both the parents and the Center. If in the event Kid's Korner administration feels the parents are not cooperating with the Center's requests Kid's Korner does reserve the right to terminate care immediately. In the event suspension and/or termination is decided by parents or Kid's Korner, all applicable tuition costs still apply. A two-week notice is required if the parents decide to terminate care. *If child requires restraint by staff, Kid's Korner will follow the "Positive Support Rules" (PSR – Minnesota Rules, chapter 9544) and termination of care will be immediate.*

In the extreme event that a child may continuously endanger or inflict physical harm to another child or Kid's Korner staff member, **TERMINATION WILL BE IMMEDIATE.**

Behavioral Practice

Complimentary to our Behavioral Guidance and Behavioral Policy, Kid's Korner Educare does not provide care for children who have been expelled or suspended from school for behavioral or other reasons.

Unsafe Article Policy

Articles of weapons are not allowed to be brought into the center. A weapon is defined as: An object used with or without the intent to use for bodily harm or threat to an individual. Weapons or a simulation of a weapon can include but not be limited to items such as guns or a figure representative of a gun, swords, knives or other sharp objects, clubs, martial arts paraphernalia, razorblades, box cutters, screwdrivers, matches, lighters, needles, nails, awl, and the like. In the event a child should bring an inappropriate object to school, while simulating a weapon, the object will be immediately confiscated and turned over to the parents at the end of the day.

KID'S KORNER CURRICULUM

Curriculum Goals

Each child's self-esteem is enhanced by providing strong, positive messages about their worth and competency. We offer a balance of active and quiet play, as well as structured and unstructured time each day to encourage children to experience and express themselves in different ways.

Our teachers teach in ways that match how children develop and learn. We do this by integrating and practicing skills and prior knowledge that supports the children's academic, social, emotional, physical, cognitive, language and communication, cultural and educational process.

The role of a quality, creative planned curriculum can play in benefiting the child is crucial to their development. By creating an environment of challenge, excitement, and newness, children will explore and learn at a developmentally appropriate pace. Our Kid's Korner Curriculum consists of the implementation of different curriculums, such as *Creative Curriculum*, *Handwriting Without Tears*, *Sport Time*, *High/Scope*, and TACSEI Curriculum which is a Social and Emotional Intervention Curriculum. These are a few of the Curriculums which are integrated into our daily Lesson Plans to best meet the different milestones for development in Early Childhood. Curriculums are integrated throughout the different subject areas at Kid's Korner.

The following are subjects incorporated into the daily curriculum:

Art

Children will develop skills in:

- ◆ Self-expression
- ◆ Organization
- ◆ Sequencing
- ◆ Use of fine motor skills
- ◆ Appreciation and awareness for art

Cooking

Children will learn to:

- ◆ Produce a product through cooperative effort by questioning, predicting results and observing changes.
- ◆ Understand the origin of food
- ◆ Increase vocabulary
- ◆ Experience cause and effect, changes in color and texture, hot and cold, liquid and solid, sweet and sour, wet and dry
- ◆ Experiment with measuring, fractions, temperature, matching and classifications

Language Development

Children will be able to:

- ◆ Enhance their vocabulary
- ◆ Increase their expression of ideas
- ◆ Accelerate their speech development

Literature

Children will develop the ability to enjoy and gain knowledge from books and will develop the ability to identify and experience:

- ◆ An awareness of people as authors and illustrators
- ◆ Characters
- ◆ Details
- ◆ Literary Forms
- ◆ Main ideas
- ◆ Sequence of events

Music/Finger-plays

Children will develop the ability to participate and enjoy:

- ◆ An awareness of composers and musicians
- ◆ Creating their own music
- ◆ Different ways to make music
- ◆ Exposure to different forms of music
- ◆ Poetry, sequence and rhythm

Numbers/Math

Children will develop skills in:

- ◆ Counting and measuring
- ◆ Needs and application of numbers
- ◆ Numeral awareness and recognition

Physical Development

Children will develop skills through the use of large and small muscles in:

- ◆ Coordination and balance
- ◆ Proper body mechanics
- ◆ Imaging and rhythm

Pre-Reading

Children will develop:

- ◆ A desire to read
- ◆ Left to right, top to bottom comprehension
- ◆ Letter recognition and sound correspondence
- ◆ Visual and auditory discrimination

Scientific Thinking

Children will develop:

- ◆ Awareness of the natural environment
- ◆ Awareness of the steps involved in scientific thinking: classification, observation, recording, predicting, questioning, describing, comparing and generalizing
- ◆ Concern and respect for the natural environment

Social Thinking

Children will develop the ability to:

- ◆ Acknowledge likeness
- ◆ Develop healthy relationships with adults and other children
- ◆ Have a healthy attitude towards self
- ◆ Recognize and utilize acceptable expressions and emotions

Special Events/Field Trips

Children will increase their ability to:

- ◆ Appreciate and respect their surroundings
- ◆ Be aware of and understand cultural differences
- ◆ Comprehend the world as a whole unit
- ◆ Recognize environmental needs
- ◆ Participate in events normally not available to them

PROGRAM OVERVIEW

A question sometimes asked by parents, which is hard to respond to is, "Do the children just play?" The difficulty lies in the fact that play can mean so many different things to different people.

When adults play, it is for the purpose of experiencing a relaxing change from work. Play to a child, is a way of gaining knowledge, developing skills and competencies, and learning how to build relationships with others. The right kind of play lays the foundation for future learning.

Each day is carefully planned with input from all teachers. With the aims of each unit clearly stated, ideas are shared as to which activities best can achieve these goals. A variety of activities are offered daily. Some of the areas this will include are art, music, group time, dramatic play, story/literature time, math/numbers, pre-reading and pre-writing, science and social science, cooking, creative movement, and manipulative play.

Dramatic play is one kind of play that is particularly suited to the developmental needs of young children. In pretending to be an adult, an animal or an object they have the opportunity to be in control of a situation and act out their feelings.

DEVELOPMENTAL OBJECTIVES

Along with the preceding developmental areas are developmental objectives which we wish to achieve. We assess each child's developmental progress, and set up opportunities that enhance and stimulate the acquisition of new skills.

Physical

- To increase strength and endurance by improving muscular coordination
- To control bodily functions
- To provide nutritious food, cleanliness and adequate sleep/relaxation time
- To promote safety rules

Cognitive

- To listen and follow directions so projects can be completed
- To increase attention spans
- To formulate information and converse intelligently
- To recall information for problem solving
- Offer play experiences that encourage children to "act out" the information they are learning through dramatic play opportunities, music, and storytelling.

Emotional

- To establish a positive self-concept
- To moderate withdrawal or aggression
- To increase self-control
- To channel emotions
- Recognize that intellectual growth and emotional well-being go hand-in-hand, and plan for group activities with each individual in mind.

Social

- To join group activities
- To learn to share and take turns
- To learn appropriate behavior as a leader and follower
- To respect the rights and property of others

Kid's Korner program goals are to:

- A. To empower the child, the families, and community we serve.
- B. To enhance each child's self-esteem by providing strong, positive messages about their worth and competency.
- C. To seek out opportunities to bring the world into the classroom to stimulate curiosity and discovery for the children.
- D. To offer children and their families educational and care opportunities they may not otherwise gain elsewhere.
- E. To assist children and their families in the development process, both through educational and community support.
- F. To carry forth the image of Kid's Korner Educare Center, Inc. to the community in order to create an awareness of and elevate the public's understanding of the value of early childhood education.
- G. To maintain constant and professional staff members and to offer these professionals stable and rewarding compensation for their services.
- H. To provide for the community a successful early childhood program that strives to develop children whose futures are more successful academically, socially, and spiritually once they complete the program.
- I. Provide a rich mix of multi-cultural and diverse ethnic experiences that celebrate each child's family and community.

CHILD CARE PROGRAM

Kid's Korner Educare Center, Inc., is a professionally staffed educare program open from 6:30 a.m. to 5:30 p.m. Monday through Friday, year round. Kid's Korner is licensed to provide unique quality care for up to 230 children in the following three age groups, 32 infants (6 weeks- 17 months)(Infant Staff to Child ratio is 1:3 State is 1:4), 42 toddlers (18 months - 33 months)(Toddler Staff to Child ratio is 1:5 State is 1:7), 156 pre-school/school age combination (34 months through 12 years) (Younger Preschool Staff to Child ratio is 1:8, State is 1:10 & Older Preschool Rooms Staff to Child ratio is 1:9, State is 1:10) (School-Age Staff to Child ratio is 1:15). Kid's Korner also offers a private, full-day kindergarten program. Please see the Kindergarten Handbook for more information. Children in our care receive full supervision **at all times** by our qualified, licensed staff, and parents have the option to enroll on a full or part time basis if they choose. We have volunteers who help in the classroom as well, who are required to complete a Criminal History Background Check, as well as go through specific training. Volunteers are never included in ratios or as qualified staff.

The mission of Kid's Korner is to provide unique quality care for all children regardless of race, creed, religious affiliations or individual needs. We promote the strengthening of the family unit by creating a safe supportive nurturing environment that offers care, education, health, nutrition, developmental services and character development.

We believe that children learn through play in all its forms: educational, developmental, self-directed, as well as group activities. The best teaching strategy for young children is the excitement generated by helping them discover something for themselves. Children learn by doing and the goals of an educational plan should encourage children to acquire skills through a broad range of activities that stimulate all their senses. To enhance this learning, we feel it is imperative to have dedicated loving caregivers that instill Christian-centered values, self-esteem, a sense of responsibility, and promote proper development. The capacity to teach a child something of real value comes when we first have taken the time to get to know him/her, and have found him/her unique in their own way.

Since we strive to promote the strengthening of the family, we encourage parental involvement and provide support services. At Kid's Korner, we have an open door policy and parents are welcome to visit their child at anytime.

In developing our curriculum, we have included various aspects to challenge and inform our children through teacher directed activities combined with self-directed play. Our goal is to nurture and enlighten your child as we promote self-esteem, peer respect and social awareness.

A sample classroom schedule is listed below;

6:30 - 7:30 Arrival/Greeting & Individual Teacher Planned Activities
7:30 - 8:00 Group Breakfast and Daily Living Skills
8:00 - 8:30 Physical Development
8:30 - 9:00 Circle Time & Sharing Time
9:00 - 9:30 Art
9:30 - 10:00 Scientific Thinking
10:00 - 10:30 Gym Time/Playground/Walk/Social Development
10:30 - 11:00 Music & Rhythm
11:00 - 11:30 Literature/Story Time
11:30 - 12:00 Lunch & Daily Living Skills
12:00 - 12:30 Individual Planned Activities
12:30 - 2:30 Nap & Quiet Self Directed Activities
2:30 - 3:00 Snack & Daily Living Skills
3:00 - 3:30 Pre-Writing & Pre-Reading Skills
3:30 - 4:00 Learning Circle Activities & Finger Plays
4:00 - 4:30 Small Group Classification & Cooking
4:30 - 5:00 Gym Time/ Playground/Walk/Social Development
5:00 - 5:15 Math/Numbers
5:15 - 5:30 Departure & Structured Learning Centers

Kindergarten Program Highlights:

Kid's Korner offers an enriching, hands-on all-day kindergarten curriculum as a seamless transition from our Preschool classrooms, to preparation for first grade. The Kindergarten Program is also open to the public, once Kid's Korner families have had the opportunity to

enroll. Our program aligns with the Owatonna School District and meets or exceeds the State of Minnesota's Kindergarten standards. Teachers are licensed through the State of Minnesota Department of Education.

Your child's core curriculum revolves around meeting the standards in Math, Science, and Language Arts. Special additions to the program include Art, Music, Spanish, Visual Phonics, Character Education, Cooking, Community Projects, Physical Education and Outdoor Recreation. Families will receive an in-depth report card and parent teacher conferences are held quarterly. Our program ensures that your child will enter First Grade feeling confident and prepared.

PARENT CONFERENCES

Pre-Enrollment Interview

This is our time to "get acquainted." We invite you to visit the program, meet the staff and discuss our program services with the Director and your child's teacher.

At your visit you will receive paperwork and information on the following subjects:

- ❖ A Child Care Enrollment Application along with the appropriate forms for enrolling your child.
- ❖ A tour of the facility so you may see the program as a whole and have an opportunity to ask questions.
- ❖ Your method of payment and or funding source is verified at this time and you are made aware of the payment requirements.
- ❖ You are informed of our policies and procedures, our licensing status and our Mission and Philosophies.

Twice each year we offer Parent/Teacher conferences for all children enrolled in the program. You will receive a notice to sign up for a convenient time during the Spring and Fall. Though teachers generally know what activities are age appropriate for and interesting to young children, they plan curriculum accordingly, it is our belief that teachers should know very specifically where each child is in their overall developmental progress. Activities can then be planned to help the individual child increase their skills where needed.

Based on this we evaluate each child in the following areas:

1. Cognitive Development
2. Motor Development
3. Personal/Social Development
4. Adaptive Development
5. Communication Development
6. Fundamental Development

From these assessments, we gain insight into each child's needs. We are able to establish educational goals, alert ourselves to areas which may need closer observation and plan curriculum accordingly. We are not trying to determine whether a child is "above or below average" in order to bring them to a "certain level". Rather, we want to help them move as far and as fast as they are comfortably ready to go. The results will be kept in the child's file for future reference. It is our goal to re-evaluate each child every six months (Spring & Fall), covering the general areas listed above. The results will be available to the given parents at a scheduled conference. After the conference all results will be kept in the child's file.

Daily reports are completed for our children in the Infant, Toddler, and Preschool Program. Weekly Classroom Newsletters also written for families. The Latchkey and Kindergarten Program have daily classroom activities posted on boards and in the Classroom's Weekly Newsletters. They include the child's food intake, elimination, sleeping patterns, special interests and general behavior. We encourage you as parents to voice your concerns to our staff or the Director. It is our belief that your parental input is invaluable. We truly believe that the children must come first and that each child is an individual, has individual needs and wants that we strive to meet.

Parent Involvement:

Parents are the primary care providers for their child. As a Kid's Korner community, it is our goal to include our families in as much activities and communications as possible. Each room will provide Weekly Newsletters about the happenings of the classroom, with information about the classrooms age developments, goal, and curriculum.

By including parents, we can build a strong foundation for the child's future by giving everyone a vested interest in every step of the child's growth. A parent's involvement gives the child support and knowledge that the child is important. Parent Involvement at Kid's Korner includes, but is not limited to:

Weekly Newsletters

Daily Reports

The opportunities to participate in Progress Report Conferences a minimum of two times a year, or more

Parent Readers

Parent lunches

Parent Snacks

Parent Volunteers for joining classroom activities (centers, field trips, special events)

Family Breakfast

Family pictures posted in rooms

Parent trainings (yoga, scrapbooking, behavior issues, etc.)

Include community happenings in our classrooms and center communications

Bring in their talents, careers of our families to share with the center

Offer parents the opportunity to review, critique, assess the program

Offer parents the opportunity to celebrate special events, classroom parties, etc.

Parenting Sessions

Parent/Grandparent Committee (helps with various activities, feedback/insight with curriculum, Room

Parents, assists Board of Directors in fundraising, etc.)

Individual conferences are available whenever children need additional support from parents and teachers alike. You may request a conference at any time by calling the Center to set up a time with your child's teacher and/or the Director. Occasionally we may need to request that you participate in a conference if we see an area of concern developing with your child. This may include referrals for additional intervention such as speech therapy, hearing or vision screening, family counseling, etc. Obviously your willingness to get your child assistance in areas of concern is a key to a strong working relationship for everyone. Help us - Help you - Help your child.

EMERGENCIES, SAFETY & SECURITY

To ensure the safety of your child, Kid's Korner takes many precautions. Our staff is in-house trained in preventative areas as well as rules and regulations by the State and Kid's Korner. Our curriculum includes many safety and community awareness features as well as fire drills and tornado drills.

Arrival and departure at Kid's Korner will also be monitored. Each child will be taken by their parent or guardian to their classroom. Upon completion of registration each parent or guardian will have signed a form stating who will be allowed to pick up their child. If a person who is unknown to our staff will be given permission to pick up your child, please have them identify themselves at the office first. They will then be escorted to the child's room. Kid's Korner will not release the child to any person who is not listed on our release form.

No unauthorized person shall take a child from the center. If an unauthorized person should attempt to take a child from the center we will firmly state to them that this is not allowed. The parents will be called immediately. If we are unable to make contact, we will then contact the names on the emergency list. If there is still a problem or sign of immediate danger, we will notify the Police (911). Picture I.D. will be required.

In the event that the person picking up a child is in any way incapacitated, we will state firmly that we do not feel it is safe for that person to transport the child. We will then ask for a name and number of someone who can safely transport the child or we will call one of the emergency contacts. If there is resistance of any kind the police department will be notified (911) of the color, model, and license plate of the vehicle and destination if known. Child Protection will be notified (Owatonna 507- 444-7500) and the incident will be documented and kept on file at the center.

Missing Child or Parent

If a child is missing, the Director or staff will conduct a thorough search of the area, building and grounds. If unable to locate the child after a thorough check of the property the police will be notified and then the parents will be called. If possible a staff person will accompany the police to help identify the child.

If a parent has not picked up their child by closing time or the parents have not informed the Center of their tardiness, the staff will attempt to contact first the parents and then emergency contact next. If unable to reach any of the responsible parties within 30 minutes after closing, the police will be notified to determine further steps.

Fire Drills and Procedures

Fire drills are held every month and logged appropriately. For fire related emergencies all staff are aware of the primary and secondary exits for their respective positions within the building in the case of an actual fire emergency. The person detecting the fire will call 911.

Kid's Korner's Fire Alarms are permanently installed, therefore any detection is monitored from by and Alarm Company. Emergency Backup Lighting system is also in our Building, should the need arise. Kid's Korner also has cell phones to be utilized in an Emergency. Once the children have been evacuated the staff will assemble the children and begin to take a roll count and await further instructions. Any missing children will be reported to the Fire Chief. No one is allowed to re-enter the building until the all clear is given.

All staff are trained as to the location, operation and use of a fire extinguisher. Fire extinguishers are checked on an annual basis.

A full report will be made to DHS (651-296-3971) within 48 hours of a fire that requires the fire department. For additional information related to fire please see the Fire Evacuation Procedure in the appendix at the end of the handbook. Please feel free to call the center or listen to AM 1390 KRFO or KOWZ 100.9 FM for announcements and updates.

Tornado Drills and Procedures

Tornado drills are practiced and documented every month, April - September. In the event of a tornado, all staff are trained as to the location of the building they are to take their children. Teachers will obtain the attendance sheets and take attendance once the children reach their respective designation. The Director will take a battery operated flashlight and radio and will monitor, give direction and assess the situation for further action. Kid's Korner also has cell phones to be utilized in an Emergency.

Please feel free to call the center or listen to AM 1390 KRFO or KOWZ 100.9 FM for announcements and updates.

For additional tornado related information please refer to the TORNADO DISASTER PROCEDURE in the appendix at the end of the handbook.

Fuse Box

The main fuse box is located in the utilities room. Circumstances for cutting the power would include flooding, smoking outlet, flying sparks or electrocution.

Utility Failure

In the event of a prolonged power failure the Center will be closed and the parents would be notified to come and pick up their children.

Blizzard

In the event of the surrounding area public and/or private schools being closed, Kid's Korner will remain open and operate as close to normal hours as possible (This is not to say that there may be very rare circumstances that Kid's Korner may close due to very serious inclement weather). In the event of a blizzard occurring during childcare hours, parents will be called and asked to pick their children up early. Children will be kept inside until parents arrive. Kid's Korner practices the following policy: We will accept children as staff are able to arrive safely. For compliance, we will need to continue to be within all our child-to-staff ratios, and will accept children as long as our staff arrive safely. We do have staff who live in rural areas and surrounding communities, and our first priority is, and always will be, everyone's safety! Additionally, we will also follow the local/rural Emergency Personnel, Steele County Sheriff, and Minnesota State Patrol in making decisions for closing/delay in regards to any inclement weather/road conditions. Since many families and Kid's Korner employees live outside of the city limits, we like to take every step possible to ensure everyone's safety. If you are unsure regarding weather and staffing, please feel free to call the center or listen to AM 1390 KRFO or KOWZ 100.9 FM for announcements and updates.

Relocation Plan

In the event that Kid Korner must evacuate the facility for any reason we have an agreement with the Southern Minnesota Initiative Foundation at 525 Florence Avenue (across the street) to relocate the children until the Center is safe to re-enter or the child's parents pick them up. Kid's Korner also has cell phones to be utilized in an Emergency.

PROGRAM HIGHLIGHTS

Annual Christmas Program

Kid's Korner's annual Christmas Program has been a tradition since the first year. This event is usually held the first week of December and includes a short program for the parents, grandparents and guests. For many this has always been a highlight to the year for parents, children and staff alike, and we hope it always will be.

Birthday Parties

Kid's Korner offers parents the opportunity to have your child's Birthday Party on site. This allows you the opportunity to have the party without the hassle of preparations or transportation. When planning your party we ask that you take special consideration to the content of gifts and or entertainment for the children. Some restrictions may apply so please inquire at the office for assistance in planning your child's party.

Child Care Account Statements

Upon enrolling your child, the rates are clearly explained and it is the parents responsibility to make payments on a weekly basis to assure that they keep their account current. Friendly reminders and updates are issued when the account begins to fall behind. Year-end statements are issued prior to January 31st of the respective year for your families tax information (also See BILLING INFORMATION and CHILD CARE PAYMENT AGREEMENT).

Field Trips & Special Events

Educational field trips and special events are planned year round. These are planned to coincide with significant events and at times with the monthly theme. We try to choose events and/or speakers that are not only fun and educational but also specialists in their respective fields. Many of these events are free but some may include a nominal fee. Parental permission will be obtained from each child's parents before the event is to take place, if the field trip is off site. The permission slip will include date of the event, a description of the event, departure and arrival times, associated costs and suggested items which may be brought. Staff will take emergency cards, first aid kit and first aid manual on all field trips. At least one person will be trained in First Aid and CPR during these events. Transportation will be provided by the Owatonna Bus Company or according to the Minnesota Passenger Restraint Act.

Fee Subsidy Information

Fee subsidy information and assistance is available. Please check at the office for further details.

Fund Raisers

The sole purpose for our fund raiser is to enhance your child's environment. All proceeds will be directly used for curriculum, toys, games, playground equipment and to help sponsor center activities. Kid's Korner has three fundraisers for the year: in the Winter: Family Fun Night, in the early summer: Steve's Meat Market, and in the autumn: a Raffle.

Early Intervention and Referrals

Kid's Korner works directly with the Owatonna Public Schools and other local professionals when a special needs coordinator is needed to observe, screen, or refer children for additional assessment if needed. Individual planning, remedy strategies and implementation of goals are coordinated with the provider, special needs coordinator and parents. Additionally, any child that requires services on-site by intervention or support programs, parents must complete a form allowing permission for the services to work with their child, here at Kid's Korner.

In-House Enrichment Programs

Our programs for the in-house enrichment programs would include dance, tumbling, swimming, foreign languages, rhythm/music and movement for young children. The purpose for providing these during the day is so parents and children have the ability to have more personalized interaction time at home in the evenings. We are always open to new and creative suggestions that parents may have.

Monthly Newsletter

Kid's Korner issues a monthly newsletter which is full of information. Many times an additional newsletter is written by your child's teacher and posted directly on the classroom door enabling you to keep up to date on the most recent information. This information may also be e-mailed.

Open-Door Policy

Our Open Door Policy allows the parents to visit your child at any time without notice or appointment. Your initial visit to the center must be set by appointment but after this you may visit at any time. All other visitors to our center must sign-in and sign-out at the front desk.

Research & Publicity

In order to promote our Center we occasionally will do children interviews, video tapes of them at play or use photographs of them in different settings. When you enroll at Kid's Korner you will be asked to sign a consent form allowing your child to participate in these events should they arise.

Kid's Korner, during certain times of the year, also has students ask to do research projects involving the children at our Center. Only the children who have written parental permission will be able to participate for those specific projects. Parents will be informed if their child is chosen to participate in a project.

E-Mail

In our attempt to be environmentally friendly and "go green" regarding more communication with the families. We do collect email addresses. The email accounts are to be use based on the information the families give us. Please check with your employer and determine if you can receive personal information or urgent information on your company email. Email accounts may be used to report attendance, absence or alternative pick-ups, but it should not be relied on as the sole source of communication. The best way to relay information regarding your children is via a personal phone call to the center.

COMMUNITY PARENTAL INVOLVEMENT

Kid's Korner will encourage the community (parents) to actively participate in the growth process. Our two underlying reasons would be to broaden the communities understanding of the need for and the quality of care provided at Kid's Korner and to encourage public recognition of child care providers as professionals.

A center's acceptance and achievements parallel the degree of a communities input. If the populace (faculty, administration, students and parents) is to provide the support necessary for a stable, productive child care and education system, everyone must realize that their ideas are valuable in the developmental process.

To instill this eminence, Kid's Korner will utilize the following strategies;

Board of Directors

Kid's Korner Educare has an active Board of Directors made up of members of the community for policy making, consultation, support and leadership. The Board has made it their goal to ensure that the care provided for the children and families served at Kid's Korner is the best possible care available.

Written Statements

To help develop criteria for the center, Kid's Korner would invite the community to submit signed letters of positive suggestions, ideas or recommendations relating to the desired qualities and programs which they would like to see implemented.

Community Assessment

The success of Kid's Korner is dependent on meeting the needs of our community. These needs can be determined by holding meetings for the community and parents, through a parent and community survey, or any other forum which would seek public input from the community.

Teacher & Staff Meetings

Kid's Korner will give the teachers and staff ample opportunity to recommend helpful hands on ideas and ideals that should be integrated into the basic program.

Student's Input

A final consideration should come from the student's themselves. Although we realize that children are limited in an overall comprehensive view they do have valuable input.

APPENDIX

CLEANING AND SANITIZING GUIDE SHEET

(a) Non-Mouthed Items	(B) Mouthed Items
¼ cup bleach per gallon of water OR 1 Tablespoon bleach per quart of water	1 Tablespoon bleach per gallon of water OR 1 teaspoon bleach per quart of water

Cleaning Means: Scrubbing with soap and water.

Sanitizing Means: Reduce the amount of germs on a surface using a disinfectant.

Items/Area	Frequency & Bleach Solution or follow the Cleaning Solutions Directions in the Utility Rooms
Diaper Area	Clean & Sanitize after each diaper change. (A)
Diaper Pails	Clean & Sanitize daily when using a plastic liner (A)
Toilets	Clean & Sanitize daily or immediately if soiled (A)
Sinks	Clean & Sanitize daily or immediately if soiled (A)
Mouthed Toys	Clean & Sanitize between use (B)
Non-Mouthed Toys	Clean & Sanitize weekly or as needed (B)
Table Surface	Clean & Sanitize before and after meals or table activity (B)
Cots	Clean weekly & Sanitize daily (A)

DISEASE AND REPORTS

Minnesota Rules part 4605.7040

Cases, suspected cases, carriers, and deaths due to the following diseases and disease agents shall be reported to the Department of Health. The disease followed by an asterisk shall be reported immediately by telephone to the commissioner of Health.

- A. Acquired Immune Deficiency Syndrome (AIDS)
- B. Amebiasis (*Entamoeba histolytica*)
- C. Anthrax* (*Bacillus anthracis*)
- D. Babesiosis (*Babesia* sp.)
- E. Blastomycosis (*Blastomyces dermatitidis*)
- F. Botulism* (*Clostridium botulinum*)
- G. Brucellosis (*Brucella* sp.)
- H. Campylobacteriosis (*Campylobacter* sp.)
- I. Chancroid (*Hemophilus ducreyi*)
- J. Chlamydia trachomatis infections (nonspecific urethritis, cervicitis, salpingitis, neonatal conjunctivitis, pneumonia and lymphogranuloma venereum)
- K. Cholera* (*Vibrio cholera*)
- L. Diphtheria (*Corynebacterium diphtheriae*)
- M. Diphyllbothrium latum infection
- N. Encephalitis (Caused by infectious agents)
- O. Echinococcosis (*Echinococcus* sp.)
- P. Giardiasis (*Giardia lamblia*)
- Q. Gonorrhea infections (including: Gonococcal salpingitis, ophthalmia neonatorum, Penicillin resistant *Neisseria gonorrhoea* infections)
- R. Hemophilus influenzae disease (only invasive disease including epiglottitis, cellulitis, bacteremia, and meningitis)
- S. Hepatitis (viral types A, B and non-A, non-B)
- T. Herpes simplex infections (neonatal, less than 30 days of age, disease only)
- U. Histoplasmosis (*histoplasma capsulatum*)
- V. Influenza (unusual case incidence or laboratory confirmed cases)
- W. Lead (poisoning and undue absorption)
- X. Legionellosis (*Legionella* sp.)
- Y. Leprosy (*Mycobacterium lepra*)
- Z. Leptospirosis (*Leptospira interrogans*)
- AA. Lyme Disease (*Borrelia burgdorferi*)
- BB. Malaria (*Plasmodium vivax*, *P. Malariae*, or *P. falciparum*)
- CC. Measles (Rubeola)*
- DD. Meningitis (Caused by all types of bacterial, viral or fungal agents)
- EE. Meningococcaemia (*Neisseria meningitidis*)
- FF. Mumps*
- GG. Mycobacteriosis (symptomatic cases only; exclusive of tuberculous and leprosy)
- HH. Pertussis (*Bordetella pertussis*)
- II. Plague (*Yersinia pestis*)
- JJ. Poliomyelitis*
- KK. Psittacosis (*Chlamydia psittaci*)
- LL. Q Fever (*Coxiella burnetii*)
- MM. Rabies (animal and human cases and suspects)*
- NN.
- OO. Rheumatic Fever (cases meeting the Jones Criteria only)
- PP. Rubella and Congenital Rubella Syndrome
- QQ. Rocky Mountain Spotted Fever (*Rickettsia canadensis*)
- RR. Salmonellosis, including typhoid (*Salmonella* sp.)
- SS. Shigellosis (*Shigella* sp.)
- TT. Staphylococcal disease (*Staphylococcus aureus* outbreaks only)
- UU. Streptococcal disease (Only *Streptococcus agalactiae* (Group B) neonatal, less than 30 days of age, disease)
- VV. Syphilis* (*Treponema pallidum*)
- WW. Tetanus (*Clostridium tetani*)
- XX. Toxic Shock Syndrome
- YY. Trichinosis (*Trichinella spiralis*)
- ZZ. Tuberculosis (*Mycobacterium tuberculosis*)
- AAA. Tularemia (*Francisella tularensis*)
- BBB. typhus (*Rickettsia prowazekii* and *R. Typhus*)
- CCC. Yellow Fever
- DDD. Yersiniosis (*Yersinia* sp.)

Statutory Authority: MS s 144.05; 144.072; 144.12

History: 9 SR 2584

HANDWASHING

The most important thing you can do to prevent the spread of illness is to wash your hands and the children's hands thoroughly and often.

How to wash your hands:

Rub your 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 your hands well under running water.
Dry your hands with a single-use paper towel or hot air blow dryer.
Turn faucet handles off using a paper towel to avoid recontamination of clean hands.

When should you wash your hands:

When you arrive at the center
After you use the restroom or help a child use the bathroom
After changing a diaper or soiled clothes
After you clean up a mess
After handling a sick child
Before preparing or serving food
Before you eat or drink
After you handle items soiled with wastes such as blood, drool, urine, stool, or discharge from nose, eyes or ears

When should you wash a child's hands:

When they arrive at the center
After they use the toilet or have their diapers changed
After they have touched a child who may be sick
Before they eat or drink
After they may have come in contact with soiled items such as blood, drool, urine, stool, or discharge from nose, eyes or ears

Fire Evacuation and Tornado Procedures:

A procedure similar to the following along with a diagram is posted in all classrooms.

Fire Evacuation Procedure:

When the Fire Alarm sounds the following should occur:
Administration call the Fire Department (9-1-1)
The classes will immediately follow the teacher to the appropriate exit and out the building to a point of 200 feet from the building.
The classroom teachers take the classroom role book, first aid and other needed supplies and helps escort the children from the building.
The teacher immediately checks the roll to make sure that all the students are accounted for and reports to the Director.
Administration will perform a final walk through the building and report any missing children to the Fire Chief upon arrival.
A signal to return to the building will be given once the Fire Chief has determined the building is safe to enter.

Tornado Disaster Procedure

If there is sufficient warning children should be picked up by parents or guardians.

Children should remain in the building. If children are outside they must enter IMMEDIATELY. Once inside, children should be taken to their designated location in the hallway, be counted and missing children should be reported to the Director.

Children and staff should face the wall and assume a “tucked” position and remain in that position until the “all clear” is given.

During the threat, all doorways should be closed and proper care taken to stay out of the path of blowing debris.

Administration will listen to a portable, battery operated radio to keep informed of the current weather conditions and flashlight should be kept in the event of a power outage.

MALTREATMENT OF MINORS MANDATED REPORTING POLICY FOR DHS LICENSED PROGRAMS

Minnesota Department of Human Services

Division of Licensing

December 2016

Who Should Report Child Abuse and Neglect

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

Where to Report

- If you know or suspect that a child is in immediate danger, call 911.
- Reports concerning suspected abuse or neglect of children occurring in a licensed child foster care or family child care facility should be made to county child protection services
- Reports concerning suspected abuse or neglect of children occurring in all other facilities licensed by the Minnesota Department of Human Services should be made to the Department of Human Services, Licensing Division’s Maltreatment Intake line at (651) 431-6600.
- Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency at 507-431-5725 or local law enforcement at 507-451-8232 or 911.
- 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.

What to Report

- Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556) and should be attached to this policy. • A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include

any actions taken by the facility in response to the incident. • An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays. Failure to Report A mandated reporter who knows or has reason to believe a child is or has been neglected or physically or sexually abused and fails to report is guilty of a misdemeanor. In addition, a mandated reporter who fails to report maltreatment that is found to be serious or recurring maltreatment may be disqualified from employment in positions allowing direct contact with persons receiving services from programs licensed by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations.

Retaliation Prohibited

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

When the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made, the facility must complete an internal review within 30 calendar days and take corrective action, if necessary, to protect the health and safety of children in care. The internal review must include an evaluation of whether:

(i) related policies and procedures were followed;

(ii) the policies and procedures were adequate;

(iii) there is a need for additional staff training;

(iv) the reported event is similar to past events with the children or the services involved; and

(v) there is a need for corrective action by the license holder to protect the health and safety of children in care. Primary and Secondary Person or Position to Ensure Internal Reviews are Completed

The internal review will be completed by the Executive Director (name or position). If this individual is involved in the alleged or suspected maltreatment, the Director or Administrative Assistant or Age Group Facilitators (name or position) will be responsible for completing the internal review.

Documentation of the Internal Review

The facility must document completion of the internal review and make internal reviews accessible to the commissioner immediately upon the commissioner's request.

Corrective Action Plan

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

Staff Training

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

MN Department of Human Services Division of Licensing December 2016

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

Toileting Procedure:

A child is ready to begin toilet training when they can signal that the diaper is wet or soiled, or when they say they would like to go potty. This usually occurs between 18-24 months of age. However, some child it does not occur until they are 2 and a half to 3 years of age.

To begin toilet training, allow the child to sit on the toilet for a few minutes, or just a minute to “experience” the toilet. Allow the child to flush even if they have not gone. After the child is comfortable, you place the child on the toilet at the scheduled toileting times, as well as if they indicate a need to use it.

When toileting, staff will stay by the child for support or to help with any movements or needs. A child may feel comfortable reading a book or just sitting by themselves. Be certain to talk to the child about what they would like.

When a child has tried or gone, it is documented on their Daily Reports. Parents are encouraged to play a significant role in the toilet training process by continuing it at home as well as praises upon arrival and departure. When parents and/or staff feel comfortable to switch from diapers to underpants, this will be discussed with families. All soiled clothing are handled with gloves for health and safety.

Praise the child when he or she goes to the bathroom but do not express disappointment if the child does not urinate or have a bowel movement in the potty. Be patient and encourage the child!

Toileting may take up to 3 months to master! It is staff's job to be patient and support in this time. There is never shame or punishment used in the toileting process, ever.

It is important to note that there are many other goals and developmental milestones, besides toilet training, in the Toddler Rooms. As children go through other growths and reach significant milestones, or experience other issues or life changes, the toilet training may stop or even revert.

Toilet Training:

Kid's Korner is set up so when the time is appropriate for Toilet Training, we are ready. With this being said, a child will toilet train when they are truly ready: physically and emotionally. Children will regress... this is NORMAL! A child cannot become toilet trained until they have voluntary control over their sphincter muscles: they have to be able to close and open very specific internal muscles. This usually begins when a child can distinguish the sensation that precedes a bowel movement or urination. Emotionally, this is the most crucial piece. This occurs, typically, around age two. The average child cannot be successfully toilet trained before about the age of 28 months, and girls are often trained by two...boys before three or later. Urination generally comes long before a child has a bowel movement. This is very normal. NO CHILD IS ALIKE, therefore we treat each one individually.

Signs of readiness:

- Child is “aware” of the need to go... usually by telling you or facial expressions.
- Can tell you with words, “wet, dry, potty, go...”
- Demonstrates imitative behavior
- Dislikes wet or soiled diapers
- Can stay dry for at least 2 hours or wakes up dry after naps.
- Can pull panties up and down.
- Tells you or asks to use the toilet.

How do we help?

Teach boys to urinate sitting down, pointing his penis downward. When you teach them standing, help them learn to “point” their penis into the toilet. Start with sitting, move to standing.

Teach girls to “sink” their bottoms a little low so the urine goes into the toilet.

For both genders, to begin training, remove their pants/underwear all the way to help them balance and aim.

Let the child know you expect to be told if they “need” to go.

Allow the child to be “in charge” of the training.

Overlook “failures” and “accidents”. Do not punish. Do not chastise. Only praise.

A typical child will need to “go” every 3-5 hours. Kid's Korner's schedules are set in our Toddler Rooms for toileting between 8-8:30, around 10:30, after lunch, after nap-time, and then again around 4-4:30. The rooms should not be “consumed” with toilet training.

Children should be changed as needed (ie. If they have soiled diapers/underpants, then change them as needed). If you do toileting more often than this, you stress the child and actually prolong the training. We are training the child...not the adults! ☺ It is our goal,

though, by age 34 months when the child is ready to transition to the Preschool age-group, that the children are toilet trained. This goal is very feasible and non-threatening!

When we begin sitting them on the toilet for actual training, allow them as much time as they are comfortable. For some, this may be 3 seconds, for others, this may be 5 minutes. Allow them to choose what is comfortable. Praise the child for trying to go, as well as if they actually do go.

Toilet training notes:

- Plan spending a lot of time in praise and support
- Toileting usually takes about 2 weeks, if they are actually ready
- Encourage families to dress the child in easy-on, easy-off clothing
- If the child isn't "getting-it" in two weeks, you need to back-off and try again when the child is ready
- Accidents after toilet training can and DO happen. Don't punish. Clean it up and the child can help with age-appropriate cleaning. They can help with removing their pants or putting clean ones back on them.
- If a child regresses for any reason, when it goes on and on, is total and lasts more than a week or two, start over and go back to diapers.

Just as all your Toddlers are unique, so is their Toileting Adventure. Do not get discouraged. Do not push a child into getting trained. From the older infants to you, our children will already have the experience of "sitting" on the toilets. We do this at Kid's Korner to alleviate the fear of sitting on a cool, plastic piece of "strangeness" for a Toddler ~ allowing them to get used to the new sensations so when they are truly READY for toileting, there is not the fear of the toilet.

Hand washing is vital at this stage, also. The toileting goes hand-in-hand with teaching proper hand washing techniques. We also teach by example. Sing aloud the ABC's so they learn, with you.

Diapering Procedure

Children requiring diapering for their daily sanitary needs must be diapered according to the following Diapering Procedure. This procedure must be followed at each and every diapering session and shall remain posted in all diapering areas. Diapering on site is allowed by Kid's Korner Staff only!

Diapering Procedure

Assemble all supplies needed for diapering in the changing area within reach.

Cover the entire changing pad with paper.

Place the child on the changing table. The staff shall not leave the child during the diapering process.

Remove child's clothing.

Remove soiled diaper and place on paper covering.

Wash child's bottom and genitals with a pre-moistened diapering wipe. Wipe front to back using a clean part of the wipe each time.

Use ointment or baby powder if required and provided by the parents.

Put on a clean diaper. Change the child's clothing if wet or soiled.

Wash the child's hands with soap and water and dry thoroughly.

Assist the child back to the classroom.

Return to the diapering area.

If clothes are soiled, either place in a wrapped paper, or in laundry.

Wrap dirty diaper in the changing table paper and discard in the trash.

Clean and sanitize the changing pad and tabletop.

Staff wash your hands with soap and water.

Use paper towel to turn off the faucet.

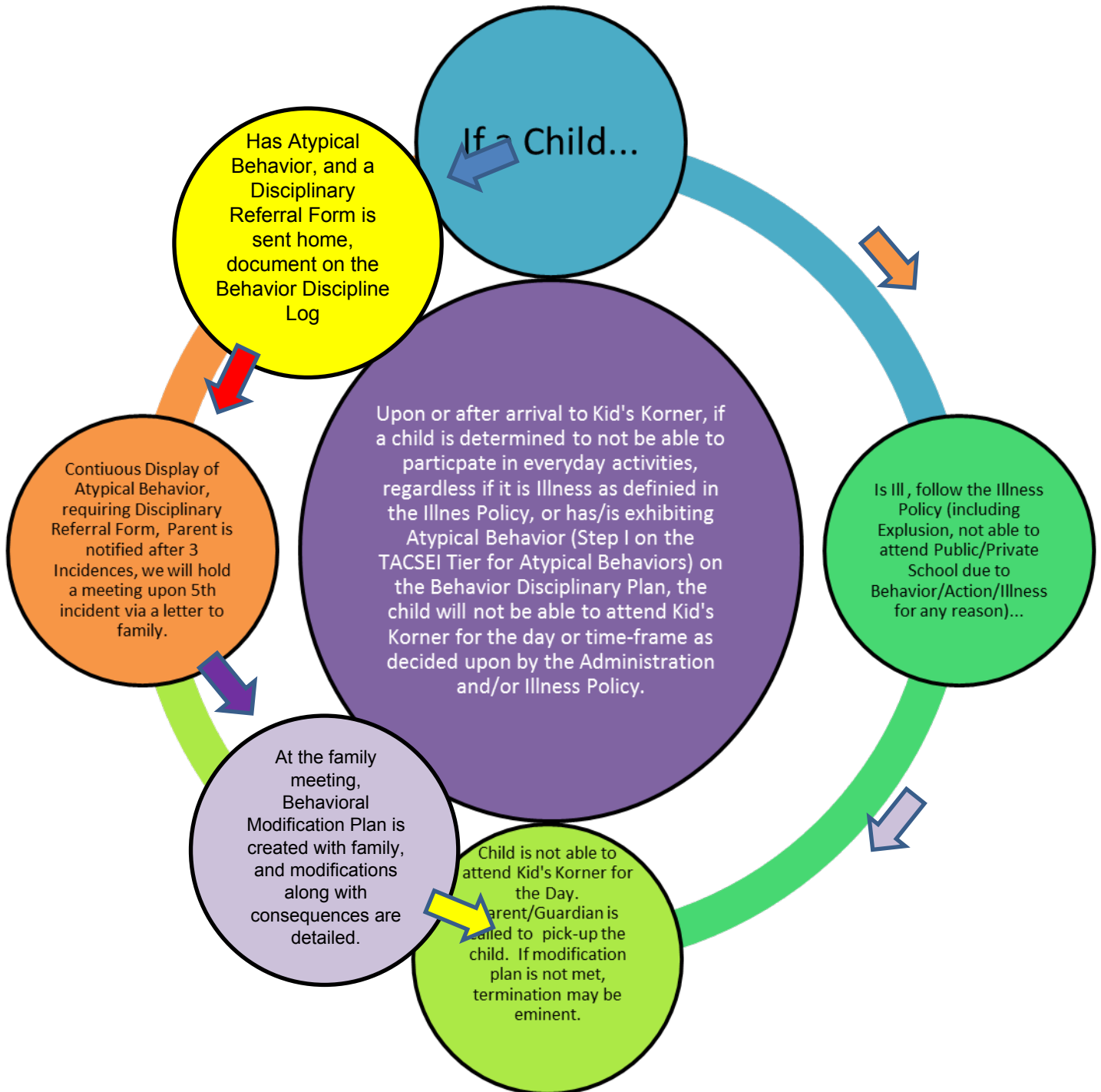
Make proper documentation, noting whether the diaper was wet or soiled and the consistency of the stool.

Make sure the changing area is completely dry before the next use.

Addendums

Atypical Behavior and Exclusion Policy


As stated in the Illness Exclusion Policy, after a Behavior Modification Plan has been implemented for a child, exclusion will be implemented as warranted. *If child requires restraint by staff, Kid's Korner will follow the "Positive Support Rules" (PSR – Minnesota Rules, chapter 9544) and termination of care will be immediate.*




Steps for Teachers/Parents regarding a child presenting “Atypical Behaviors”

(Atypical Behaviors are persistent, atypical behaviors or challenges which require an increase amount of individualized staff guidance and time, over and above what we can allocate individually for a child.) If child requires restraint by staff, Kid’s Korner will follow the “Positive Support Rules” (PSR – Minnesota Rules, chapter 9544) and termination of care will be immediate.


TACSEL Tier I

- 


Child displays atypical behavior

1
- 

Kid's Korner's Behavior Guidelines are implemented, and a Behavior/Disciplinary Log Utilized by the Teachers(s), as well as Disciplinary Referral Document for families.

2
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Program Reflection Checklist is completed

3
- 

Teacher implements Strategies/Changes

4

TACSEL Tier III

- 

Teacher shares concerns and Behavior/Discipline Log with Jennifer and/or Dan, when 5 Incidences are Reported within a 20 Day time-frame (or deemed necessary). Notice is sent to family for a meeting.

5
- 

Jennifer/Dan/Teacher discusses with family our Process and further intervention., as well as creating a Behavior Modification Plan. Release signed for I.S.D./Medical Doctor or any other resources. Step 2 begins with child, constituting appropriate action taken for continued behavior(s).

6
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Teacher Continues Behavior/Disciplinary Log.

7
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School District personnel completes additional observations and records. They complete functional assessment interview with family and teachers.

8
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School District creates hypothesis and shares with teachers/Jennifer and/or Dan

9
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Team meets to brainstorm Support Plan and document

10
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Team begins implementation of Behavior Support Plan

11
- 

Team monitors, plans and meets (informally) to update. Formal meeting as needed.

12

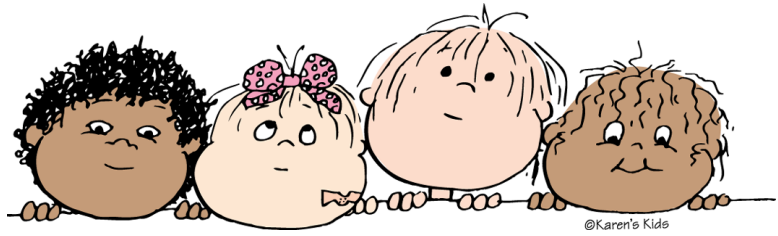
TACSEL Tier IV

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Initiate Special Education Referral

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Kid's Korner Information on: SIDS/Sudden Infant Death Syndrome SUID/Sudden Unexplained Infant Death



Kid's Korner Educare Center
600 Florence Avenue, Owatonna, MN 55060

Sudden Infant Death Syndrome (SIDS) is the sudden unexpected death of an infant under the one year of age in which an autopsy, scene investigation and review of the infant's history does not show an explainable cause of death. Almost all SIDS death occur without any warning or symptoms when the infant is thought to be sleeping. A new term, SUID, (Sudden Unexpected Infant Death) is now being used to describe any sudden and unexplained death whether explained or unexplained that occurs during infancy.

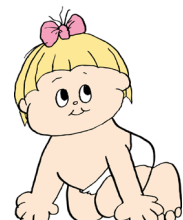
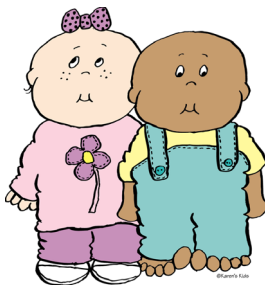
*At Kid's Korner, all staff are trained in SUID as well as Abusive Head Trauma (ABH), also known as Shaken Baby Syndrome (SBS). Kid's Korner also follows the **Back to Sleep** recommendations for infants.*

As best practice recommends, the following are Kid's Korner Policy:

- Kid's Korner staff will only place a child to sleep on their backs. Due to liability, Physician or Parent Directives are not accepted. The SUID Policy will be strictly enforced.
- Kid's Korner staff will not allow blankets, soft items, or bumpers in any crib with an infant.
- Kid's Korner staff will remove "ALL" loose bedding including blankets or top sheets for an infant.
- Kid's Korner staff follows the AAP Guidelines of "No sleeping in sitting devices (swings, car seats, infant seats, etc.) except when the infant sleeps while traveling in a vehicle." If an infant arrives at Kid's Korner sleeping in their car seat, the infant will immediately be removed and placed in their crib on the infants back, until they wake up.
- Kid's Korner staff follow the "No Swaddling Policy," (when an infant, up to 3-4 months of age, is wrapped up tightly in a blanket, much like a papoose) as swaddling may increase the risk of SUID and interfere with proper growth of the hip socket.
(*Reducing the Risk, Health Consultants for Child Care Inc.*)



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Community Services & Resources

List of services which parents of young children, may need to resource, for Steele County:

Advocates for Developmental Disabilities

507-451-9769

Provides respite care/special sitters, support, advocacy, service to children with developmental disabilities, provides speakers.

109 Rose Street, Owatonna

Associates of Psychiatry and Psychology

507- 455-0992

Provides counseling for individual, family, and child counseling for victims of abuse. Treatment of ADD and ADHD Children.

120 Landmark Drive NE, Suite 1, Owatonna

<http://www.appmn.com>

Big Brothers and Big Sisters of Southern Minnesota

(507) 451-5922

Matches a child age 3-14, usually from a one parent unit with responsible adult who will spend time with the child.

545 Dunnell Drive, Owatonna

<http://www.bbbsouthernmn.org/>

Children and Youth with Special Health Needs

(651)201-3650 or (800)728-5420

Medical evaluations, treatment, and equipment costs to those with handicapped conditions.

PO Box 64882, St. Paul

<http://www.health.state.mn.us/divs/cfh/program/cyshn/index.cfm>

Children's Remedial Fund

(507) 444-8804

A United Way Program to help with medical, dental and clothing costs not covered by other services.

325 Meadow Lane, Owatonna

Crisis Resource Center of Steele County

(507) 451-1202

Provides support and confidential services to individuals affected by domestic abuse and sexual violence

125 West Front Street, Owatonna

Owatonna Area Hospice

(507) 455-7628 or (507) 446-0936

Grief education and support program for children and adults.

2350 NW 26th Street, Owatonna

http://www.allinahealth.org/ahs/owatonna.nsf/page/home_care_hospice#overview

Owatonna Clinic

(507) 451-1120

Primary and specialty medical care.

2200 26th Street NW, Owatonna

<http://mayoclinichealthsystem.org/locations/owatonna>

Owatonna Park and Recreation

(507) 444-4321

540 West Hills Circle, Owatonna

<http://ci.owatonna.mn.us/parksrecreation>

Owatonna Public Library

(507) 444-2460

105 North Elm Avenue, Owatonna

<http://ci.owatonna.mn.us/library>

Owatonna Public Schools

(507) 444-8600

515 West Bridge Street, Owatonna

<http://www.owatonna.k12.mn.us/>

Owatonna Public Schools- Early Childhood Special Education

(507) 444-7800

115 East Rose Street, Owatonna

<http://www.owatonnarsc.portal.rschooldtoday.com/>

Parent Provider

(507) 455-2526

Childcare Resource and Referral for families needing child care. They also offer emergency subsidies for childcare.

560 Dunnell Drive, Suite 207, Owatonna

<http://www.parentprovider.org>

South Central Human Relations Center

(507) 451-2630 or (800) 722-0590

Individual and family

counseling

610 Florence Avenue, Owatonna

<http://www.schrc.com/home>

SEMCAC of Steele County

(507) 451-7134

Provides assistance programs for individuals of low income

545 Dunnell Drive, Owatonna

<http://www.semcac.org/>

Steele County Clothesline

(507) 451-2550

Provides free of charge clothing.

155 Oakdale Street, Suite B, Owatonna

<http://www.steelecountyclothesline.com/>

Steele County Food Shelf

(507) 455-2991

Emergency food products.

155 Oakdale Street, Owatonna

<http://www.steelecountyfoodshelf.org/>

Steele County Human Services

(507) 444-7500

Assistance for families who need child care assistance

630 Florence Avenue, Owatonna

http://www.co.steele.mn.us/departments/human_services/index.html

Steele County Law Enforcement

(507) 444-3800

204 East Pearl Street, Owatonna

<http://www.co.steele.mn.us/departments/sheriff/>

Steele County Public Health

(507) 444-7650

Maternal Child Health Project, Handicapped, Chronically, Ill Children. In-home care for children with special needs.

635 Florence Avenue, Owatonna

http://www.co.steele.mn.us/steele_county_public_health_and_human_services.html

MALTREATMENT OF MINORS MANDATED REPORTING POLICY FOR DHS LICENSED PROGRAMS

Who Should Report Child Abuse and Neglect

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

Where to Report :

- If you know or suspect that a child is in immediate danger, call 911.
- Reports concerning suspected abuse or neglect of children occurring in a licensed child foster care or family child care facility should be made to county child protection services
- Reports concerning suspected abuse or neglect of children occurring in all other facilities licensed by the Minnesota Department of Human Services should be made to the Department of Human Services, Licensing Division's Maltreatment Intake line at (651) 431-6600.
- Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency at 5074315725 or local law enforcement at 5074518232 or 9-1-1 for Emergency immediately.
- 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.

What to Report:

• Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556) and should be attached to this policy. • A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include any actions taken by the facility in response to the incident. • An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays. Failure to Report A mandated reporter who knows or has reason to believe a child is or has been neglected or physically or sexually abused and fails to report is guilty of a misdemeanor. In addition, a mandated reporter who fails to report maltreatment that is found to be serious or recurring maltreatment may be disqualified from employment in positions allowing direct contact with persons receiving services from programs licensed by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations.

Retaliation Prohibited:

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

When the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made, the facility must complete an internal review within 30 calendar days and take corrective action, if necessary, to protect the health and safety of children in care. The internal review must include an evaluation of whether:

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

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

The internal review will be completed by Daniel Buck, Executive Director (name or position). If this individual is involved in the alleged or suspected maltreatment, Jennifer Buck, Education Director (name or position) will be responsible for completing the internal review. Documentation of the Internal Review

The facility must document completion of the internal review and make internal reviews accessible to the commissioner immediately upon the commissioner's request.

Corrective Action Plan

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

Staff Training

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

