



Parent Handbook

**CAPS Care Director
Gretchen Juan
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507-408-0060**

Licensing

CAPS Care is licensed by the Minnesota Department of Human Services to provide full-and/or part-time childcare. License # 1113937

Organization

CAPS Care is a nonprofit agency that is part of the Caledonia Area Public School District #299. The center operates under the guidance of a committee of community members, school employees and parents.

Caledonia Area Public Schools Superintendent	Craig Ihrke
Caledonia Area Public Schools Community Ed Director	Gretchen Juan

Daycare Center Hours and Calendar

CAPS Care will be open Monday through Friday from 6:00am-6:00pm.

CAPS Care will be closed on:

- Labor Day
- Thanksgiving
- Christmas Eve
- Christmas Day
- New Year's Day
- Good Friday OR Easter Monday
- Memorial Day
- Juneteenth (June 19th)
- Independence Day (July 4th)

***Other holiday breaks will depend on the number of children attending**

***We will be closed one day per year in August for staff development**

Capacity

Capacity in daycare is determined by state mandated teacher/child ratios.

Room	Age of Children	Current Capacity	Child:Staff Ratios
Infants	6 weeks-16 months	12	4:1
Toddlers	16-33 months	21	7:1

Eligibility

CAPS Care is open to all children regardless of race, color, religion, sex, nationality, ethnic origin, or disability.

Enrollment Procedure

To ensure enrollment, the following must be completed:

1. A non-refundable fee of \$38 and one week's tuition is required. The \$38 fee does not apply to tuition, but the one week of tuition will be used for the child's first full week.
2. Once a child is enrolled in the child care center, tuition is due on the first day the child attends for that current week.
3. On or before the first day of attendance, the following forms are required to be completed in their entirety:
 - a. Child Care Enrollment
 - b. Immunization Records
 - c. Intake for Child Under 2 Years
 - d. Child Care Schedule
 - e. Health Care Summary form needs to be completed within 30 days of enrollment.

Tuition

Tuition is paid weekly on the first day of attendance for that week. Methods of payment include check, money order, or cash. A \$35 fee will be charged for checks that are returned due to insufficient funds. Checks or money orders should be made payable to "CAPS Care." Tuition should be placed in the payment box and the sheet next to it should be signed. When paying with cash, use an envelope provided on the front of the tuition box. Please write your name on the front of the envelope before placing it in the tuition box.

Tuition:

Infants- \$220/week

Toddlers- \$210/week

Staff Discount

Caledonia Area Public School District Full-Time Employees- 20% discount

Tuition Late Fees:

Tuition is due the first day of each week. You are welcome to pay more than one week at a time.

- 2 Days Late- Email Reminder
- 3 Days Late- \$10 Late Fee Applied
- 1 Week Late- Phone Call Reminder
- 2 Weeks Late- Amount overdue needs to be paid before child can continue to attend or a payment plan needs to be set up

Overtime Fees

The center closes at 6:00 p.m. There will be a \$1.00 per minute charge after 6:00 p.m. with a minimum of \$5.00. If you are more than fifteen minutes past your pick up time you will be charged for the whole hour. In case of emergency, please notify the center if you will be late or arrange for someone on your pick-up list to pick up your child. Our closing time will be abided by unless there is an emergency. An exception may be made at the discretion of the Director. Continued late pick-ups may result in enrollment dismissal.

Absences

Please let us know if your child will be absent for the day. Parents can call the daycare before 6:00am and leave a message or can call after this time and speak to a staff member. If a child does not arrive when expected and the CAPS Care staff have not been informed of an absence, parents will be contacted to be sure the child is accounted for. **Daycare Number- 507-408-0060**

Each year, every child is given 8 free days to use when they are absent for illness and/or vacation. Free days renew each year on July 1st. Free days cannot be used as a discount on tuition when a child is in attendance.

Schedule Changes

CAPS Care requires 24 hours notice if there will be a change in the daily schedule submitted at the time of enrollment.

Emergency Closing

In the event that CAPS Care would need to close midday due to an emergency, the Director and staff will send an email and call parents individually to notify them of our closing so that the children can be picked up as quickly as possible. The staff will maintain all state regulated ratios and group sizes until all of the children in our care have been safely picked up from the center.

No tuition credit will be given for days that CAPS Care is open for at least half of the day (until 12:00pm). Half day tuition will be charged for any day that CAPS Care closes prior to 12:00pm.

Inclement Weather

CAPS Care does not follow the school district's closing schedule. We do our very best to stay open no matter what. However, there are rare times when the daycare will close due to inclement weather. If this does happen, the Director will notify parents through email by 5:30am. No tuition will be charged when CAPS Care is closed due to weather.

Withdrawal

CAPS Care requires a 2 week notice if you plan to withdraw your child from the center.

Health Policies and Procedures

The CAPS Care Health Care Summary forms must be completed and signed within 30 days of enrollment. Immunization records must be completed at the time of enrollment and prior to attendance at CAPS Care. If immunizations are not up to date a plan must be completed with the Health Consultant. Every new immunization given requires an updated immunization form. All health guidelines and the handbook will be reviewed and approved by the CAPS Care Health Consultant, annually.

Parents/guardians will be notified as soon as possible if a child develops symptoms of any illness or has an emergency or injury requiring medical attention. Staff or volunteers will notify the CAPS Care Director if any child in care exhibits an illness or has an emergency or injury that requires medical attention. **Daycare**

Number- 507-408-0060

If the child is ill, the child will be removed from the class and the CAPS Care Director will supervise the child in case there is an exposure to a contagious illness or condition at CAPS Care. In the case of a medical emergency, the child's parent or legal guardian will be notified immediately following the assessment of the child's medical needs. In the event that an injury, allergic reaction, or other medical condition requires immediate medical attention by a trained medical professional, *911 will be called to contact the Caledonia EMS. The family will be immediately contacted by another staff member or the CAPS Care Director. The CAPS Care Director or Lead Teacher will accompany the injured or ill child in an ambulance to the family preferred medical facility.

In the case of an offsite emergency, the same procedures will be followed except that a staff member will accompany the child to the nearest and/or family preferred medical facility. The Center Director will be notified immediately and will send additional assistance to the offsite location and medical facility (if needed). The CAPS Care Director or Coordinator will also contact the parents immediately.

FEVER: 100.4°F or above. The child should remain home for 24 hours, without medication, after the fever has subsided. If the child is diagnosed with an ear infection, the child may return if a physician states that the child can be at the daycare, as long as they are comfortable.

CONJUNCTIVITIS (Pink Eye): Inflammation of the mucous membrane lining of the eyelids and covering the front of the eyeball, commonly called Pink Eye - The child should be seen by a doctor and treated for 24 hours before returning. The child may return to daycare if the physician states that the child does not have conjunctivitis (pink eye).

STREP: A streptococcal infection marked by fever, sore throat, headache - If a physician does a throat culture on the child, she/he may not return to CAPS Care until results of the culture are known. If the culture is positive, the child must be on antibiotics for 24 hours before returning to school.

IMPETIGO: Contagious multiple skin lesions, usually on face, around lips and nose, fingers, elbows, legs, and knees - The child needs to stay home, usually 3-5 days, until a physician authorizes the child's return.

CHICKEN POX: A viral infection of childhood, often with sudden onset, marked by fever and itchy eruptions which become small blisters in a few hours - The incubation period is usually 13-17 days. The child should be at home until the last crop has crusted and is dry.

HEAD LICE: Any of various small, wingless parasitic insects that inhabit hair - The child may not return until treated and free of nits (eggs.)

VOMITING: In the morning, a child should not be sent to daycare if he/she has vomited within the past 24 hours. The child may return to daycare when free of vomiting for 24 hours. Parents will be called to come for their child if he/she vomits at the center.

DIARRHEA: Parents will be called to come for their child if he/she has had diarrhea three times in 24 hours. While there is a lot of variation in a child's bowel movements, diarrhea will be considered anything that is abnormal for that child. The child should not return until free from diarrhea for 24 hours. A child should not be sent to daycare if he/she has diarrhea in the morning.

RASHES: Children with contagious rashes will not be allowed to attend CAPS Care. Any rash that cannot be explained or is questionable will need to be seen by the child's physician and a note will be required, verifying that the rash is not contagious before the child may return to the center.

HAND, FOOT, MOUTH (HFM): If CAPS Care suspects your child has HFM, they will be sent home. Children must be fever free for 24 hours and all blisters must be healed before they can return to care, even if they have been seen by a doctor.

TICKS: If a CAPS Care staff has found a tick on any child, they will call the Director or Coordinator. The Director or Administrator will try to brush off the tick. If it cannot be brushed off, they will cover it with a band aid and call the parent immediately. CAPS Care staff will not try to pull the tick out in case it is embedded.

Immunization Policy

All children in attendance at CAPS Care are required to be fully immunized, with immunization records available upon request. Although we respect parental choices and decisions, all children enrolled in CAPS Care must be completely up to date on all immunizations. There are no exceptions to this rule.

Injury

If a child is injured at CAPS Care or is involved in any type of accident, basic first aid procedures will be followed. Minor scrapes and scratches will be washed with soap and water and a Band-Aid applied. Cold compresses or ice will be applied on a bump. The license holder will ensure that a first aid kit is available within the center. The kit will contain sterile bandages and Band-Aids, sterile compresses, scissors, an ice bag or cold pack, an oral or surface thermometer, and adhesive tape. A current first aid manual must be included. The first aid kit and manual must be accessible to the staff in the center and taken on all field trips. The staff person responsible for the child's particular classroom or the staff person who observed the injury or incident will complete an accident report form. A management person will check the report form to ensure that the report is completed fully, signed by the person completing the form, and signed by the parent on the same day as the occurrence.

Medication Administration

CAPS Care must have written permission from the child's parent before administering diapering products, sunscreen lotions and insect repellents. Nonprescription medicines, diapering products, sunscreen lotions and insect repellents must be administered according to the manufacturer's instructions. Permission forms are in the enrollment packet. According to state law, CAPS Care must have and follow written instructions from a licensed physician or dentist before administering each prescription medicine. A special Administration of Medication Form must be signed. Medication with the child's name and current prescription information on the label constitutes instructions. All medicines will be kept in its original container and have a legible label stating the child's name. The medicine must be given only to the child whose name is on the label. CAPS Care cannot administer medicine after an expiration date on the label and any unused portion must be returned to the parent. CAPS Care will ensure that the administration of medicine is recorded and give the name of the child, medication, date, time, dosage, and the name & signature of the person who dispensed the medicine. The record will be available to the parent and maintained in the child's file. Sunscreen lotions, insect repellents, diaper rash and commercial wipes must all be supplied by each family and labeled with the child's name. All medicines, insect repellents, sunscreen lotions and diaper rash products will be stored according to the directions on the original container and inaccessible to the children. Prescribed medication will be kept in a locked cabinet.

Clothing

Children should be dressed in clothes that are comfortable and appropriate for the weather. Especially in winter, parents should be certain that the child has appropriate outerwear (Ex. coat, cap, mittens, and boots). Each child should have two additional weather-appropriate outfits kept at school. Please note that at times children may get their clothes soiled either by playing, during art, or other activities.

Potty Training

CAPS Care will start working on potty training with your child when they turn 2 years old. If you would like your child to be working on it sooner than that, please communicate that with the staff members. Your child is not able to move on to 3K or 4K preschool without being potty trained.

Field Trips

Field trips are part of the CAPS Care experience. They are planned by the CAPS Care Coordinator in conjunction with the classroom teacher and are offered at several opportunities throughout the year. All field trips other than the Neighborhood Walking Permission Slip (which is included in the enrollment packet) will require a written permission form that will be obtained before each field trip or on a form that annually summarizes all field trips that will be taken. The parent/guardian's written permission must state that the parent/guardian has been informed of the purpose and destination of the field trip.

Permission

Parent/guardian permission is required to photograph or video children enrolled in CAPS Care. Permission will be requested to publish photographs or videos or use photographs/videos for public relations. CAPS Care will be taking photographs of the children for educational, promotional and decoration purposes (e.g. we post photos on bulletin boards, in cubbies, on the website, Facebook, etc.) Parental/guardian permission must be obtained prior to a child's participation in research or experimental procedures.

Meals/Snacks

CAPS Care's policies on the provisions of meals and snacks; Nutritious snacks, breakfasts, and lunches are provided for each child. Meal patterns, food components, and serving sizes shall all be in compliance with the USDA's Child and Adult Care Food Program (CACFP) guidelines. The Caledonia Public Schools Food Service

Director will plan the monthly menu that will comply with all state and USDA regulations in regard to nutrition. The menu and food served will meet age appropriateness guidelines as defined by the USDA. Request for special diets not required by a medical condition, such as a vegetarian or kosher diet, will be honored if the parents supply the prepackaged foods necessary to ensure compliance with the diet if the foods differ from those of the center menu(s). A copy of the menus will be posted. Any changes to the menu will be posted online and on the information board in entryway. All staff will be made aware of the change prior to meal/snack times. A list of children's allergies will be posted in the kitchen and each classroom. Allergies and special food requirements (special requests require a physician's statement) will be shared with all staff and volunteers. If a child has an acute allergy, the family will be asked to supply the proper medication (epi-pen, Benadryl) and alternative food (soy milk, gluten-free diet, egg free). CAPS Care provides iron-fortified formula for infants, if parents choose to use that option, and infant foods.

Water Bottles

During warm-weather months parents will provide a reusable water bottle for their child to use on a daily basis. Each day that the water bottles are used, the CAPS Care staff will send the water bottles home to be cleaned. Each water bottle is assigned to a specific child and will be labeled with the child's first and last name. Water bottles are stored in a manner that reduces the risk of a child using the wrong water bottle or cup, and a water bottle is used only for water.

Behavior Guidance

CAPS Care believes the purpose of child guidance is to help the child adjust to the demands of his/her present environment. Guidance is the process of helping children develop self-control and self-reliance to achieve this goal. Positive guidance techniques are the key to successful programs for all children. CAPS Care follows the Seven Steps of Comprehensive Guidance from the National Association for the Education of Young Children.

1. Children are in the process of learning acceptable behavior.
2. An effective guidance approach is preventive because it respects feelings even while it addresses the behavior.
3. Adults need to understand the reasons for children's behavior.
4. A supportive relationship between an adult and a child is the most critical component of effective guidance.
5. Adults use forms of guidance and group management that help children learn self-control and responsiveness to the needs of others.
6. Adults model appropriate expressions of their feelings.
7. Adults continue to learn even as they teach.

Here are some of the ways we guide the children's behavior:

- Stating suggestions in a positive form
- Giving choices only when appropriate and intended
- Avoiding making comparisons or encouraging negative competition
- Avoiding shaming or labeling
- Encouraging maximum growth of independence
- Redirecting to activity areas related to child's interest
- Defining limits clearly and consistently
- Being aware of the situation and making health and safety the primary concern
- Using words and tone of voice as a model teaching tool
- Encouraging individual creativity
- Observing and recording

- Giving appropriate affection, acceptance, attention, and care
- Child will be allowed to go to their “safe place” after behavior takes place

Behavior Guidance Procedure

At CAPS Care we make every effort to provide a safe and pleasant experience for each child. Because we believe every child has a right to physical and emotional safety we have established certain behavior standards to ensure all children in our care are in safe hands.

Examples of inappropriate behaviors are:

- Recurring actions or behaviors that cause endangerment to children and/or adults, i.e. punching, kicking, non-age appropriate biting, severe hitting, slapping, use of daycare equipment as weapons, etc.
- Repeated destruction of property
- Inappropriate touching of other children
- Harassment of children or adults, i.e. threatening, severe teasing, etc.

If a child is repeatedly removed or singled out from their peers:

- An individual behavior policy will be written if a child is singled out or removed from the group 3+ times per day or 5+ times per week. DHS Separation log - Rule 9503.0055

If a child repeatedly exhibits inappropriate behaviors, the following procedures will be followed:

- Parents will be informed about behavior at pick-up and asked to review acceptable behavior with their child.
- If behavior continues, the parents must meet with the teacher. This conference will review documentation of behavior and develop a plan of action.
- If persistent unacceptable behavior continues a second conference will be scheduled. The teacher may request that the director also be in attendance. This conference will review the previous plan of action and identify additional guidance options.
- If further attempts at behavior remediation are unsuccessful and ample progress has not been made a third conference will be held. At this time the parents may be asked to withdraw from CAPS Care permanently. However, CAPS Care reserves the right to dismiss a child at any time as circumstance warrants.

Biting

Biting is a behavior that needs to be discussed specifically, as there are many reasons why a child would bite. There are several stages to development in children and unfortunately, in almost all children, biting is one of them. If a child is found to be biting excessively, our first step is to try to help all of the children involved. Studies have shown that infants and toddlers don't realize that they are inflicting pain to another individual while biting. To them, the pressure on their gums feels soothing when they are teething. Although this does not excuse the behavior, it may help us better understand it in some instances.

The first time a child bites he/she is told not to bite again or that biting hurts. The child is then redirected to a quiet activity or another toy, while staff attend to the child that was bitten. The teacher comforts the child. If necessary, the area is washed with soap and warm water, and the child is given lots of tender loving care. The staff member also completes an incident report and sends it home for both children's parents to review. If the same child bites again, the staff will compare the situations. If the staff discovers a pattern, they will do their best to avoid having the child in similar situations.

Dismissal Policy- Behaviors

Occasionally, a child will experience difficulty in adapting to the childcare environment or abiding by certain rules of behavior in the group setting. Consistency, positive reinforcement, natural consequences, and positive redirection will be used at the Center to shape appropriate behavior in the child. All staff members will follow the guidelines for discipline outlined in the Minnesota DHS Rule 3 laws & rules. Under no circumstances will corporal punishment including spanking, slapping, or shaking be used. If your child is exhibiting unacceptable behavior a conference will be scheduled with your child's caregiver. During the conference a discussion of a reasonable period of time for a solution of the situation will be established. If a child continues to exhibit unacceptable behavior, and requires a great amount of staff guidance, we will meet with parents to address the problem and work together to find a solution. The center encourages parents to share any observations or suggestions they may have in dealing with the child. If a workable solution cannot be found it may result in dismissal from our program. Sometimes a group setting is not ideal for all students

Dismissal Policy- Family Expectations

At CAPS Care we are committed to providing a safe, nurturing, and respectful environment for every child and family in our care. To ensure the best possible experience for all, we have established expectations for families that align with our center's values, policies, and operational needs.

While we strive to support families through open communication and collaboration, there may be circumstances where continued enrollment is not in the best interest of the child, the family, or the center. In such cases, dismissal may be considered.

Reasons for Dismissal:

1. Non-payment of fees by parent/caregiver or legal guardian.
2. Failure to provide the required health, immunization, enrollment, and/or emergency information.
3. Disrespectful and/or abusive behaviors and/or verbal threats toward staff, children, other parents, caregivers, or property.
4. Failure to comply with the policies in the handbook.
5. Lack of cooperation from parents/caregivers or legal guardians with the program's efforts to resolve differences and/or to meet the child's needs through parent/staff meetings or conferences.
6. Spreading shameful information about our child care center and/or staff verbally or in writing, including social media.
7. Continual lateness in picking up a child after 6:00pm.
8. The daycare center's inability to meet the needs of the child without hiring additional staff members.

Process Prior to Dismissal

Whenever possible, the center will make reasonable efforts to address concerns before proceeding with dismissal:

1. **Initial Discussion:** A meeting will be scheduled with the family to discuss concerns and explore solutions.
2. **Written Notice:** A formal written warning may be issued, outlining expectations for continued enrollment and a timeline for improvement.
3. **Follow-up Review:** The center will assess progress and determine if continued enrollment is appropriate.

In situations involving immediate risk to staff or children, **dismissal may be immediate and without prior warning.**

Final Dismissal

If a resolution is not achieved and expectations continue to be unmet, a written notice of dismissal will be issued with a minimum of **two weeks' notice**, unless the dismissal is immediate due to safety concerns.

Presence of pets

Pets will not be housed at CAPS Care and only viewed at agreed upon times and conditions.

Parent Visitation

Center's policy that parents of enrolled children may visit the center any time during the hours of operation per Minnesota Statutes, 245A.14, subdivision 15; Parents are appreciated and have an open invitation to visit the center anytime during normal business hours from 6:00 a.m. until 6:00 pm. Keeping an open line of communication between the center and families ensures that the best interests of all children are served, both at home and at the center. All parents are encouraged to visit, telephone, and send notes. Parents are always welcome and encouraged to attend as chaperones for field trips. We also provide frequent opportunities for family and parents to participate in classroom curriculum activities such as making nutritious snacks, story time, and discovery time in the interest areas. Parents are also encouraged to volunteer time in their child's classroom as their schedule allows.

CAPS Care is licensed through the State of Minnesota. As a licensed facility, we are required to meet licensing requirements at all times. Should you have any questions or concerns, the telephone number of the Department of Human Services, Division of Licensing is 651-431-6500

Educational Philosophy

CAPS Care believes that each child is endowed with unique capabilities and talents. CAPS Care's warm and loving environment provides each child with a place that encourages learning, creativity, personal growth, and a fun environment where he/she will feel safe and secure. CAPS Care staff will help each child build trust with the staff who care for him/her, so he/she will feel secure, respected, and accepted for who they are.

Our program is designed to prepare children ages six weeks through preschool age with the social and academic skills needed for success later in life such as sharing, listening, letter and number recognition, etc. We will enrich our classes with art, games, music, center-based play, and much more. All of CAPS Care activities and equipment will be of the highest safety standards. CAPS Care activities have been planned to allow for plenty of physical movement, activities that stimulate the mind and promote sharing and playing together, along with providing healthy meals and snacks. We will provide an atmosphere that is child focused, so each child is able to develop based upon his/her individual needs. CAPS Care offers both structured and unstructured activities for the children. CAPS Care's basic philosophy is one of freedom to learn, grow, and make choices. We believe that a child learns through play and we have structured an environment to reflect that belief. Our program is carefully planned to meet each child's needs. Teachers and student teachers are encouraged to be flexible and to allow each child the freedom to learn at his/her own pace.

All activities, personnel, materials and equipment at CAPS Care are designed to promote social, emotional, cognitive and physical development in a manner consistent with the child's cultural background. CAPS Care will encourage multicultural diversity in our lesson plans as well as in our selection of books, toys, songs, events and activities. We will promote:

- Social: To help children feel comfortable in school, trust their environment, make friends and feel part of the group

- Emotional: To help children experience pride and self-confidence, develop independence and self-control and to have a positive attitude
- Cognitive: To help children become confident learners by letting them explore their own ideas and experience success, and by helping them acquire learning skills such as problem-solving, asking questions and using words to describe their ideas, observations and feelings.
- Physical: To help children increase their large and small muscle skills and feel confident about what their bodies can do.

Every child learns in different ways, using all their senses. Varied experiences and materials will be provided for multisensory and whole brain learning. Children are exposed to activities and academics that are age appropriate, and designed to help develop a positive self-image. Practice in gross and fine motor skills is encouraged. Children will also learn independence, self-help, turn-taking skills, and how to interact with others.

The best atmosphere for learning is one of acceptance, mutual respect, fairness, consistency, clear limits, expectations, and encouragement. A consistent, organized environment, with caring adults, clear expectations, and appropriate consequences supports the whole child. The outdoor play environment is an extension of the classroom, requiring the same level of adult planning, supervision, and involvement with the children.

This philosophy is implemented through the teachers and staff educating the children through one-on-one play, nurturing relations, open-ended questions, and interactive learning centers that promote play. Teachers and staff build a curriculum based on the Minnesota Early Childhood Indicators of Progress (ECIPS). Curriculum plans are developed in connection with assessments of children's development.

1. Parents/Guardians are welcome to review the CAPS Care Program Plans at any time. Parents/Guardians should contact the CAPS Care Coordinator to set up a meeting.

CAPS Care will hold parent conferences twice a year to review a child's intellectual, physical, social and emotional development. A written assessment will be provided. Teachers will also provide daily feedback to families at pick up or in the daily communication folder. In November and May of each year, each teacher conducts a conference focusing on each child's progress. This gives the teacher and the family a chance to share and discuss any needs, difficulties, or concerns. Conferences are scheduled at times that meet both the parent's and teacher's needs. Conference notice will be sent out ahead of time by the CAPS Coordinator. Additional conferences may be scheduled as needed.

INFANT PROGRAM

We will hold, cuddle, love, rock and nurture the infants attending CAPS Care. CAPS Care will follow the Creative Curriculum for Infants and Toddlers. Staff will also get on the floor and interact on the infant's level. CAPS Care encourages sitting, crawling, vocalizing, talking and walking. Staff will read books, explore textures, do art activities, play, sing, dance and take stroller walks (weather permitting). We will encourage rolling over, crawling and walking. CAPS Care will respect each child's individual schedule for eating and napping. Staff will play and offer encouragement every day. We will help transition from bottle to cup and from baby food to finger food.

TODDLER PROGRAM

Toddlers need a safe and fascinating space to run, play and excite their natural curiosity. They climb, jump, and parallel play with friends, while learning to share, color, paint, give big hugs and wash their hands. The toddler program offers your child the opportunity to explore, sing, dance, talk, and play—inside and out. We will follow

the Creative Curriculum for Infants and Toddlers. Breakfast, lunch and snack are served at tables and chairs with cups, plates and spoons and everyone clears their plate when they're done. Toddlers learn to go potty and work on dressing themselves. Each afternoon, the toddlers rest or wind down with soft music and take a nap on individual cots or mats. Your child will do all of this with encouragement, redirection and gentle reminders of how to be a good friend, helper and listener. We keep them engaged and learning and most of all safe, loved and well cared for. Your toddler's day could include:

- Songs: dance, clap and sing-along songs
- The playground: plenty of space for exploring
- Art: painting, collages, drawing, coloring and more
- Talking: practicing new words and expressing themselves
- Puzzles: developing fine motor skills and problem-solving
- Sensory play: discovering the world using all five senses
- Stories: books, rhymes, puppets and more
- Lap time: hugs, snuggles, and plenty of personal attention
- Outside time and neighborhood walks (weather permitting)
- Music and Activities: instruments, building blocks, books, game pieces, shapes and more
- Exercise: fun that emphasizes large muscle groups, motor skills, coordination, balance, flexibility and aerobic activity

CHILD ASSESSMENT

Children attending CAPS Care Center shall be observed and evaluated as part of the ongoing assessment process conducted by their teacher. CAPS Care Center will use research-based assessment tools where documentation will be entered on an ongoing basis. Teaching staff will follow a schedule which outlines what pieces of documentation are due and when they must be entered. The purpose of documentation is to give examples and evidence of a child's knowledge and skills so that an accurate assessment of a child's development can be created. The results of this assessment will allow for planning of individualized learning opportunities to further each child's development. The assessment is intended to document that the intellectual, physical, social, and emotional progress of each child is included in the child's record and reviewed and discussed with the parent/guardian during conferences. Parents/Guardians are able to view these documents at any time. This policy is an essential part of our program and is a strong focus during employee training. All staff, including part-time and assistant teachers are involved in on-going collaboration/communication education that supports effective communication between staff and families.

PARENT CONFERENCES

CAPS Care will hold parent conferences twice a year to review a child's intellectual, physical, social and emotional development. A written assessment will be provided. Teachers will also provide daily feedback to families at pick up or in the daily communication folder. In November and May of each year, each teacher conducts a conference focusing on each child's progress. This gives the teacher and the family a chance to share and discuss any needs, difficulties, or concerns. Conferences are scheduled at times that meet both the parent's and teacher's needs. Conference notice will be sent out ahead of time by the CAPS Coordinator. Additional conferences may be scheduled as needed.

CLASSROOM SCHEDULES

INFANT

6:00-7:30	Arrival/welcome, Infants participate in playtime
7:30-8:30	Breakfast
8:30-10:00	Morning Rest Period

10:00-10:15	Story Time
10:15-11:00	Child Initiated Activity
11:00-11:30	Outdoor stroller walk (weather permitting) Prep for Lunch
11:30-12:30	Lunch and Clean up
12:30-1:00	Quiet activity
1:00-2:30	Rest Period or Quiet activity
2:30-3:00	Snack
3:00-3:30	Child Development Activity
3:30-4:00	Music, Singing
4:00-5:00	Small Group Play with blocks, books, puzzles
5:00-6:00	Self- Choice Activity

TODDLER

6:00-7:30	Arrival /welcome, Toddlers participate in Self Choice activities and group play
7:30-8:30	Breakfast
8:30-9:00	Child Initiated Play, Sensory Activity
9:00-9:30	Story Time and Art
9:30- 10:15	Curriculum Programs
10:15-11:00	Outdoor Playground (weather permitting)
11:00-11:30	Small Group Activity and Creative Play
11:30-12:00	Lunch and Clean up
12:00-12:30	Story Time
12:30-2:30	Rest Period or Quiet table activity
2:30-3:00	Snack
3:00-3:30	Child Development Activity
3:30-4:00	Music, Singing
4:00-4:30	Large Group Play
4:30-5:00	Small Group Play with blocks, books, puzzles, games
5:00-6:00	Self- Choice Activity, Exercise

CAPS Care will provide for activities that are both quiet (puzzles, blocks, books) and active (song, dance, walks, exercise fun and playground). CAPS Care will provide both teacher directed (crafts, group activities and story time) and child initiated (games, exploring, building, dress up play) activities. Schedules are posted in a designated area of each classroom. The center's overall program plan and a schedule for each age group are available upon request. These schedules are subject to change.

PHYSICAL ACTIVITY POLICY

Regular physical activity has important health benefits to young children. Weather permitting, outdoor play will be provided daily.

Winter:

- Toddler classrooms will utilize outside equipment if the temperature with the wind chill is 20 degrees or higher. Preschool classrooms will utilize outside equipment if the temperature with the wind chill is 0 degrees or higher.
- Please provide your child with appropriate snow gear: coat, snow pants, snow boots, hat and mittens.

Summer:

- Families are asked to supply sunscreen and insect repellent for their child. Sunscreens will be labeled and applied to children before outdoor play.
- All classrooms will utilize outdoor equipment if the heat index is 90 degrees or below.

Nondiscrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotope, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at:

<https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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.

Nap and rest policy for parents

LEGAL AUTHORITY: MINNESOTA RULES, PART 9503.0050, MINNESOTA STATUTES, SECTION 245A.1435, AND MINNESOTA STATUTES, SECTION 245A.146.

CAPS Care policy for naps and rest is consistent with the developmental level of the children enrolled in CAPS Care will include:

Confinement limitation - A child who has completed a nap or rested quietly for 30 minutes will not be required to remain on a cot or in a crib or bed;

Placement of equipment - Naps and rest will be provided in a quiet area that is physically separated from children who are engaged in an activity that will disrupt a napping or resting child. Cribs, cots, and beds will be placed so there are clear aisles and unimpeded access for both adults and children on at least one side of each

piece of napping and resting equipment. Cribs, cots, and beds will be placed directly on the floor and will not be stacked when in use;

Bedding - Separate bedding will be provided for each child in CAPS Care. Bedding must be washed weekly and when soiled or wet. Blankets will be washed or dry cleaned weekly and when soiled or wet.

The remaining requirements in this section are applicable for programs serving infants:

Reduction of risk of sudden unexpected infant death - Pursuant to Minnesota Statutes, section 245A.1435

1. CAPS Care will place each infant to sleep on the infant's back, unless CAPS Care has documentation from the infant's physician directing an alternative sleeping position for the infant. The physician directive must be on a form approved by the commissioner, Physician's Directive for Alternative Infant Sleep Position form, and must remain on file at CAPS Care. An infant who independently rolls onto its stomach after being placed to sleep on its back may be allowed to remain sleeping on its stomach if the infant is at least six months of age or CAPS Care has a signed statement from the parent indicating that the infant regularly rolls over at home. Parents must sign the Optional Form for Parent Statement: Infant Less Than Six Months of Age Regularly Rolling Over which will be kept at CAPS Care.
2. CAPS Care will place each infant in a crib on a firm mattress with a fitted sheet that is appropriate to the mattress size, fits tightly on the mattress, and overlaps the underside of the mattress so it cannot be dislodged by pulling on the corner of the sheet with reasonable effort. CAPS Care will not place anything in the crib with the infant except for the infant's pacifier, as defined in Code of Federal Regulations, title 16, part 1511;
3. If an infant falls asleep before being placed in a crib, CAPS Care staff will move the infant to a crib as soon as practicable, and will keep the infant within sight of the CAPS Care staff until the infant is placed in a crib. When an infant falls asleep while being held, the CAPS Care staff will consider the supervision needs of other children when determining how long to hold the infant before placing the infant in a crib to sleep. The sleeping infant will not be in a position where the airway may be blocked or with anything covering the infant's face; and
4. CAPS Care will not place a swaddled infant of any age down to sleep in the CAPS Care setting. However, with the written consent of a parent or guardian according to this paragraph, CAPS Care may place the infant who has not yet begun to roll over on its own down to sleep in a one-piece sleeper equipped with an attached system that fastens securely only across the upper torso, with no constriction of the hips or legs, to create a swaddle. Prior to any use of swaddling for sleep by CAPS Care under this chapter, CAPS Care will obtain informed written consent for the use of swaddling from the parent or guardian of the infant on the form approved by the commissioner, Parent Consent for Swaddling, and prepared in partnership with the Minnesota Sudden Infant Death Center.

E. Crib standard - A crib will be provided for each infant for which CAPS Care is licensed to provide care. The equipment will be of safe and sturdy construction that conforms to federal crib standards under Code of Federal Regulations, title 16, part 1219 for full-size baby cribs, or Code of Federal Regulations, title 16, part 1220 for non-full size baby cribs. See Minnesota Statutes, section 245A.146, subdivision 4, for additional crib safety standards including routine crib inspection requirements.

Maltreatment of Minors Mandated Reporting Policy for Parents

LEGAL AUTHORITY: MINNESOTA STATUTES, SECTION 245A.145, SUBDIVISION 1 AND MINNESOTA STATUTES, SECTION 245A.66, SUBDIVISION 1. DHS MUST DEVELOP POLICIES AND PROCEDURES FOR REPORTING SUSPECTED CHILD MALTREATMENT THAT FULFILL THE REQUIREMENTS IN MINNESOTA STATUTES, CHAPTER 260E. THE LICENSE HOLDER MUST PROVIDE THESE POLICIES AND PROCEDURES TO THE PARENTS OF ALL CHILDREN AT THE TIME OF ENROLLMENT IN THE CHILD CARE PROGRAM AND BE AVAILABLE UPON REQUEST.

Policies and procedures for reporting suspected child maltreatment are available on the DHS Licensed Child Care Center website. Centers are required to use this policy. Note there are two sections on the policy that need to be filled in with information specific to the child care program:

Required additional information is added to the policy.

For reports of suspected abuse or neglect of children occurring within a family or in the community, a contact phone number for the local child protection agency (or law enforcement, if applicable) must be entered into the policy. It must be an accurate, working number and specific to the designated reporting agency in the county or city where the center is located.

A primary and secondary person must be designated on the policy to ensure that internal reviews are completed when the facility has a reason to know that an internal or external report of alleged or suspected maltreatment has been made.

Maltreatment of Minors Mandated Reporting

This policy is for all providers licensed by the Minnesota Department of Human Services.

Who should report:

- Any person may voluntarily report abuse or neglect.
- If you work with children at CAPS Care, you are mandated (required) to report and cannot shift the responsibility of reporting to your supervisor or to anyone else at CAPS Care. 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 (Houston County Human Services).

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 at CAPS Care should be made to Houston County Human Services.
- Reports concerning suspected abuse or neglect of children occurring in CAPS Care should be made to the Department of Human Services, Licensing Division 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 Houston County Human Services and or the Caledonia Police Department.
- If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota Statutes or Rules that govern CAPS Care, 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 are included in this policy.

Abuse is any one of the following acts which seriously endanger the physical, mental, or emotional health of a child:

- The infliction, attempted infliction, or as a result of inadequate supervision, the allowance of infliction or attempted infliction of physical or mental injury upon the child by a parent or any other person.
- The exploitation or overwork of a child by a parent or any other person.
- The involvement of the child in any sexual act with a parent or any other person, or the aiding or toleration by the parent or the caretaker of the child's sexual involvement with any other involvement of a child in sexual activity constituting a crime under the laws of this state.

Neglect is the refusal or willful failure of a parent or caretaker to supply the child with necessary food, clothing, shelter, care, treatment, or counseling for any injury, illness or condition of the child, as a result of which the child's physical, mental or emotional health is substantially threatened or impaired. The following are not considered neglect:

- The inability of a parent or caregiver to provide for a child due to inadequate financial resources shall not, for that reason alone, be considered neglect.
- When, in lieu of medical care, a child is being provided treatment in accordance with the doctrine of a well-recognized religious method of healing which has a reasonable, proven record of success, the child shall not, for that reason alone, be considered neglected or maltreated. Nothing shall prohibit the court from ordering medical services for the child when there is substantial risk of harm to the child's health or welfare.
- 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 CAPS Care, the report should include any actions taken by CAPS Care 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.
- 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 REPORT

CAPS Care 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:

1. Related policies and procedures were followed;
2. The policies and procedures were adequate;
3. There is a need for additional staff training;
4. The reported event is similar to past events with the children or the services involved; and
5. There is a need for corrective action by CAPS Care to protect the health and safety of children in care.

The internal review will be completed by the CAPS Coordinator. If this individual is involved in the alleged or suspected maltreatment, the CAPS Care Director will be responsible for completing the internal review. If this individual is involved in the alleged or suspected maltreatment the Superintendent of the Caledonia Public Schools will be responsible for conducting the internal review. The Primary person or Secondary person of authority will document completion of the internal review and make internal reviews accessible to the commissioner immediately upon the commissioner's request. Based on the internal review, CAPS Care may need to develop, document and implement a corrective action plan designed to correct current violations and prevent future violations in performance by individuals or the director, if any.

STAFF TRAINING

The CAPS Care Director and/or Coordinator will 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 Director/Coordinator will 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.

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.

GRIEVANCE PROCEDURE FOR PARENTS

Step 1. Discuss the concerns with your child's teacher.

Step 2. If you feel the concern is not resolved, bring the concern to the CAPS Care Director.

Step 3: - Complete a complaint form with the CAPS Care Director.

Step 4: - The CAPS Care Director will complete an investigation and may question all parties involved and witnesses.

Step 5: - The CAPS Care Director will schedule a meeting with parents/guardians to discuss possible solutions.

Step 6: The CAPS Care Director will follow up with the parent/guardian to discuss whether the solution was effective.

Step 7: If a grievance cannot be resolved by following Steps 1-6, the CAPS Care Coordinator shall consult the Superintendent.

We are always available to talk about your concerns. In rare instances, an issue may arise that cannot be resolved to mutual satisfaction. We reserve the right to ask you to seek other childcare arrangements.