



PARENT HANDBOOK | ENROLLMENT FORMS

CHILD(S) NAME:
FIRST DAY OF ENROLLMENT
PARENT/GUARDIAN NAMES
EMAIL ADDRESS

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WELCOME

We are pleased you are considering Golden Days & Little Rays Daycare Center (GDALRDC)! We offer full-time and part-time childcare. **Our mission is to nourish young minds and bodies through the wonder of play.** We aim to develop a partnership with you to create the best environment for the overall growth of your child.

This handbook is a large piece of open and honest communication we strive to have with you. Please read this entire document and be sure to ask questions prior to enrollment. Your signature on the last page of the handbook serves as your acknowledgment that you have read, understand, and agree to adhere to the policies and procedures included in this parent handbook.

OPEN DOOR POLICY

GDALRDC At Golden Days & Little Rays, we believe in building strong relationships with families and maintaining open communication. We have an *open-door policy*, meaning parents and guardians are always welcome to visit, ask questions, or observe their child's environment.

That said, we also work hard to maintain smooth, predictable routines for the children. Frequent or unplanned visits can sometimes disrupt the flow of the classroom or make transitions harder for little ones.

We kindly ask that families:

- Keep drop-ins short and scheduled when possible.
- Avoid entering the classroom during nap time or major transitions.
- Communicate ahead of time if they'd like to visit or volunteer during special activities.
- Everyone will enter through Door#1

This balance allows us to uphold both transparency and consistency — ensuring your child feels secure, focused, and comfortable in their daily routine.

DROP OFF/PICK UP TIMES

GDALRDC families may enter door #4 using their individual family code to open Door#4 during both drop off and pick up. Doors will remain locked during childcare hours.

Drop off after 5:45 am, Pick up before 6:15 pm.

AGES SERVED

	Capacity
Infants 6 weeks to 16 months old	16
Toddlers 16 months to 33 months old	28
Preschoolers 33 months up to First Day of Kindergarten	36
School-agers First Day of Kindergarten up to 11 years old	23
Total Capacity	103

HOW TO ENROLL, FEE AND DEPOSIT EXPECTATIONS

To enroll in GDALRDC, parents must complete this handbook for each child, including parent signatures at the bottom of the handbook. A completed parent handbook also includes a completed Admission and Arrangements Information Form and Heath Care Summary. Once all documents are complete and delivered to GDALRDC, you will be immediately charged via PROcare, a non-refundable registration, and a non-refundable deposit for your child's last 2 weeks of care.

Infant Spot Enrollment & Gap-Time Policy

At Golden Days & Little Rays Daycare, we carefully manage our infant classroom to ensure safe ratios, consistent care, and stable staffing. Because infant spots are extremely limited, the following policy applies to all families enrolling an infant in our program.

Holding an Infant Spot

To secure an infant spot—whether your child will begin immediately or at a future start date—families are required to pay the *full weekly infant rate* starting from the date the spot becomes available.

Gap-Time Payments

If there is a gap between when the spot opens and when your infant is ready to start, you must continue to pay the weekly rate during this time in order to hold and reserve the spot. These payments are nonrefundable.

This ensures:

- Your child's space is guaranteed.
- We maintain proper staffing for your future start date.
- We do not fill your child's spot with another family during the gap.

Non-Payment

If payments are not made for the gap period, the infant spot will be offered to the next family on our waitlist.

Start Date Changes

If your anticipated start date changes, we ask that you notify us as soon as possible. Payment requirements will still remain in place unless a different arrangement is approved by management in writing.

Why This Policy Matters

Infant spots are the most limited in childcare due to strict teacher-to-child ratios. Holding a spot requires guaranteed staffing and commitments from our center. This policy ensures fairness, consistency, and stability for all families.

Clarification on Non-Refundable Deposit Policy

Your deposit paid at time of enrollment secures care for your child for specific days and cannot be altered or transferred to other dates or schedules.

This policy ensures that we can accurately reserve space in our classrooms, properly staff for expected attendance, and fairly manage scheduling for all families. When a deposit is made, it guarantees that space is held for your child on the agreed-upon days, and those days cannot be swapped, split, or modified. By submitting your deposit, you agree to the set schedule you selected at the time of enrollment. If you need to adjust your child's schedule, please speak with management.

Weekly & Daily Hour Allotment Policy

Golden Days & Little Rays Daycare & Activities Center enrollment options are based on both a *daily maximum of 10 hours per day* and a *weekly hour allotment*, depending on the enrollment plan selected.

- **Full-Time Enrollment (5 days per week):**
Up to **50 total hours per week**, not to exceed **10 hours per day**
- **Three-Day Enrollment:**
Up to **30 total hours per week**, not to exceed **10 hours per day**
- **Two-Day Enrollment:**
Up to **20 total hours per week**, not to exceed **10 hours per day**

Hours must be used within the enrolled days and daily limits. Any care used beyond the 10-hour *daily limit* or the *allotted weekly hours* may result in extended care fees and must be approved in advance, subject to licensing and staffing availability.

Weekly schedules must be submitted ahead of time to allow for proper staffing and compliance with state licensing requirements. Schedule changes are not guaranteed and may require approval.

ADJUSTMENT PERIOD

Initially, your child will be enrolled on a four-week trial basis. Both staff and parents will use this time to determine if your child fits comfortably into our childcare center. You may use this time to ensure you are pleased with our services. If this arrangement is not mutually satisfactory, either parent or Golden Days & Little Rays Daycare Center management may terminate the admission during this trial period.

TERMINATION OF SERVICES VIA PARENT DECISION

To end your services with Golden Days & Little Rays Daycare Center we require a full two-week PROcare message & verbal notice of termination. Your initial 2- week deposit will be used for payment for the final 2 weeks of childcare.

TERMINATION OF SERVICES VIA GDALRDC DECISION

In the event GDALRDC needs to terminate your childcare services, we will communicate with a verbal and written notice regarding termination. While we will make every effort to give adequate notice, **GDALRDC is not required to give advance notice of termination**. Some situations may deem necessary to immediately terminate a child's care. Some common reasons GDALRDC would terminate services might include but are not limited to:

- non-payment
- non-compliance with policies
- failure to meet immunization policies
- continual disruptive behavior that is harmful to the other children or staff
- violence, threatening behavior or language from a child or family member
- mental instability that is threatening or causing concern to our group
- flight risks, inability for GDALRDC staff to adequately care for a child's medical or other needs
- any child whose individual needs take away from GDALRDC staff's ability to care for the rest of the group
- any other reason GDALRDC staff feel a family or child is not a positive or healthy fit for our group.

- Documented observation of pier-to-pier sexual abuse.

In addition, should classroom graduation cause a conflict with center capacity, we reserve the right to terminate service, with priority to full-time enrollments and children with siblings in the program.

LEAVES OF ABSENCE

Maternity leave Expecting another "Little Ray"? Congratulations! We understand that welcoming a new baby is such a special time for your family! During maternity leave, your older child's enrolled spot will continue to be held so they can return to the same classroom, teachers, and friends.

Because our staffing and classroom operations remain the same, regular tuition is still required during this time to maintain your child's spot.

We also encourage families to continue bringing their older child during maternity leave when possible. Keeping their normal routine helps them feel secure and supported during the transition of welcoming a new sibling.

Job layoff We are always sorry to hear that one of our GDALRDC families is experiencing permanent or temporary loss of a job. If you'd like to reduce or end your care during this challenging time, please be aware of our policies and what to expect as follows:

- You must give a full two-week notice that you were laid off/furloughed or lost your job and wish to end or reduce care.
- If you wish to terminate your childcare, please see "TERMINATION OF SERVICES VIA PARENT DECISION" above.
- If you wish to reduce care, you will be required to pay your full standard weekly tuition for a full two weeks after notice of layoff is given. If space allows, we will gladly adjust your child's schedule to meet your needs. However, please note that a part-time spot may not always be available immediately,
- This notice must be given through the PROcare App and verbally to GDALRDC management.

Child medical leave

If your child is absent due to surgery or major illness, please contact GDALRDC management to facilitate a care plan. GDALRDC reserves the right to unenroll any child if we do not feel we can adequately meet the medical needs of a child or if a child's medical needs would take away from the quality of group care.

MN PAID LEAVE updates effective Jan 1, 2026

If you are utilizing MN Paid leave for childcare for Maternity or Paternity leave for your infant, you can refer to HOW TO ENROLL, FEE AND DEPOSIT EXPECTATIONS.

GENERAL POLICIES

1. GDALRDC Hours of operation: 5:45 am-6:15 pm. We cannot accommodate early drop-offs or late pick-ups. Parents are required to sign their children in and out each day on our PROcare app. GDALRDC is committed to providing a safe, nurturing and enriching environment where children can learn, grow & thrive.
2. Your non-toilet-trained child must arrive in a clean diaper or training pants. Please utilize the GDALRDC Mother & Child room for diapering. If your child is wet or soiled, please ensure that you change them before you depart the center.
3. If your child will not be attending on a scheduled day or if you will not arrive at your scheduled drop-off time, please notify us as soon as possible via our PROcare App. Parents are expected to download and use this App.
4. Be sure to let us know if someone else will be picking up your child by adding a message on our PROcare App with the person's first and last name. Make sure the person knows that GDALRDC staff will ask for identification. Your child will not be released without proper authorization from you. We cannot assist with car seat installation.
5. Medication: We do not administer pain medication for fever. We may administer pain medication for more severe cases such as surgery or a broken bone. This will be determined on a case-by-case basis. If medication is approved, please supply us with a fever reducer or pain medication that is age appropriate for your child. Parents must clearly label medications with the child's first and last name. Additionally, parents must label syringes or measure caps with the child's first/last name and place all items in a plastic bag.
6. Please leave treats/candy/toys at home.
7. Our educational methods are simple. We believe children learn through PLAY. We believe learning should be fun and that it does not always take the shape and form of a classroom. We teach taking turns, sharing, and being kind to others. We also teach traditional items such as letters, numbers, colors, and much more; but we do so at each child's pace and developmental stage. We aim to foster a joyful learning experience. Additionally, nutrition and physical exercise are cornerstones of our program.
8. We ask that parents are always with their children at pick-up and drop-off times and that parents hold their child's hand during those times to ensure safety in the parking lot and while entering or exiting our building. Parents of multiple children must bring all children inside/outside

together. Do not leave an unattended child in a car while you bring another child inside. Do not leave one child inside the center unsupervised while you buckle another in their car seat.

9. It is our policy to apply sunscreen to exposed skin during the summer months unless we have a signed parental waiver opposing the application of sunscreen.

10. Our Child Care Program Plan is always available for review.

11. Our staff will conduct parent conferences twice annually, which include a written assessment of the child's intellectual, physical, social, and emotional development. We welcome the input and helpful suggestions of parents

12. We have adequate developmentally appropriate toys for all the children. Please refrain from bringing toys from home except on designated days. Your child will be expected to help pick up and put away toys and games and will be praised for his or her efforts.

13. Occasionally parents will use GDALRDC staff for "babysitting" services outside of GDALRDC. GDALRDC claims no responsibility for the staff or their actions outside of their position within our center. Parents are to use their own judgment and discretion while choosing babysitters. Golden Days & Little Rays will not share opinions or information concerning employees with families.

14. Our staff members often build wonderful relationships with the children and families they care for, and we understand that families may wish to hire them for private babysitting outside of regular daycare hours.

While this is allowed, please note that any care provided outside of Golden Days & Little Rays is considered a private arrangement between the staff member and the family. During this time, the staff member:

- Is not acting as an employee, agent, or representative of Golden Days & Little Rays
- Is not covered under the center's insurance, licensing, or liability policies
- Assumes full responsibility for the care provided

We encourage families and staff to communicate clearly about expectations and to make arrangements independently of the center. Golden Days & Little Rays is not responsible for any incidents, scheduling, or payment agreements that occur outside of regular program hours.

Please note the following policy regarding visitation:

- Our childcare center is not an appropriate setting for parental/guardian visitations during times of family conflict, legal disputes, or custody transitions.
- Visitation exchanges, monitored visits, or emotionally charged meetings should take place in a neutral, agreed-upon location outside of the childcare setting and not during pick-up, drop-off, or care hours.
- Children deserve to experience care in a peaceful, joyful and supportive environment, free from tension or stress that may arise from adult conflict.

- We reserve the right to limit access to our facility to maintain safety, minimize disruption, and protect the emotional well-being of all children and staff.
- At Golden Days & Little Rays, we value open, respectful communication between families and our team. If a disagreement or concern arises between parents or guardians, please do not involve Golden Days staff members as a middle person or messenger.

Our employees' role is to focus on caring for and supporting the children, not to mediate or relay messages between adults. If there is a situation that affects your child's care or requires clarification, we ask that both parents or guardians communicate directly with management so we can address the matter appropriately and professionally.

This helps ensure that all discussions remain clear, respectful, and centered on the best interests of the child.

Families experiencing difficult transitions are encouraged to seek the guidance of legal professionals or mediators to establish formal visitation arrangements that do not involve the childcare center.

We appreciate your cooperation in helping to foster our center as a nurturing and loving community.

Frequently Asked Questions

? WHY DO WE NEED TO PAY FOR CHILDCARE WHEN OUR CHILD IS ILL OR ABSENT FROM CHILDCARE? *Childcare tuition is calculated as an annual amount that is divided into 52 weekly payments. When calculating rates, childcare centers must account for the costs of doing business. These costs are often fixed such as rent, insurance, staffing, meals, equipment, supplies, and much more. When your child is ill or out for the day the teacher must still teach the rest of the class. Therefore, contracted families pay a fixed rate to hold their child's enrollment spot for the year.*

FINANCIAL POLICY & RATES

1. See the attached rates appendix for the most up-to-date rate information.
2. Enrolling families are charged a non-refundable registration fee of \$150.00.
3. Enrolling families must pay in advance for their child's first and last week of childcare.
4. Payments are charged electronically, weekly, and are due every Friday morning via PROcare. If you would like to modify your payment plan, please see with management.

5. Payments not received by Monday morning will be considered a Late Payment and will be assessed a \$25 late fee. Continued non-payments/late payments may result in suspension or termination of services.

6. We ask that you be respectful of our hours. Late pick-up charges are as follows:

a. 5 Min Late. = \$10

b. every 15 Min Late = \$25

These fees will immediately be charged to the payment method on file. We understand that circumstances beyond your control may occur, but please remember the overtime we likely must pay our staff for your lateness is likely greater than the charged late fee.

Let us know if you are having pick-up or drop-off issues so that we can be prepared. If parents/guardians cannot be reached at closing time we will attempt to have emergency contacts pick up the child/children. If emergency contacts cannot be reached or are unavailable to pick up the child 30 minutes after closing, authorities will be called, and the child may be taken into protective custody subject to local jurisdiction and lawful guidance. Full late fees will apply until GDALRDC can close our doors and relinquish custody.

GDALRDC is not responsible for supplying or installing car seats; or for the safe or lawful use of car seat restraints or transportation involved with the pickup of any child via parents/guardians/emergency contact or law enforcement.

7. Rates are subject to change. You should expect a rate increase annually of 3% to 5%. You will be notified one month in advance of all rate changes.

8. We receive payment for 52 weeks of the year regardless of whether your child is present or not. This includes your child's sick days, vacation days, holidays, and childcare closure days. etc.

9. Unexpected emergencies could cause GDALRDC to close with little notice.

Examples of such emergencies could include but are not limited to:

- Fire
- water damage to our building or center
- sewer or gas emergencies that make air quality or sanitation of surfaces unsafe
- power outages
- vandalism, accidental or intentional destruction of property that makes care of children or entrance into our building unsafe
- insects or pest infestation
- any other disaster/situation that makes childcare impossible and/or unsafe.

Unexpected closings of this nature are unavoidable and will not result in a refund or reimbursement for your childcare expenses. If an unexpected emergency results in our childcare center remaining closed for more than 7 business days, you will not be charged after the 7th business day.

Child Care Program Plan Policies and Procedures

Children are always within sight and sound of qualified staff. Staff complete head counts at arrival and during transitions. Attendance logs are maintained throughout the day.

Children Served

GDALRDC is licensed to serve children ages:

6 weeks – 12 years old

Infants:	6 weeks to 16 months	16
Toddlers:	16 months – 33 months	28
Pre School:	33 months – 1 st day of kindergarten	36
School Age:	kindergarten – age 12	23
Maximum capacity:		103 children

Age groupings and staff/child ratios are maintained according to Minnesota Rule 3.

Hours of Operation

GDALRDC is open:

Monday – Friday: 5:45 AM – 6:15 PM

Closed on major holidays and during severe weather emergencies

(notification procedures apply)

General Education Methods

Golden Days & Little Rays Childcare Center provides a nurturing, developmentally appropriate environment where children learn through play, exploration, and guided activities. Our teaching methods emphasize:

- **Play-Based Learning** – Children develop social, emotional, cognitive, and motor skills through structured and unstructured play experiences.
- **Individualized Support** – Teachers recognize each child's unique learning style, abilities, and pace, adapting activities to meet individual needs.
- **Hands-On Exploration** – Children engage in activities that promote curiosity, creativity, and problem-solving, such as art, music, movement, storytelling, and sensory play.
- **Social and Emotional Development** – Educators foster kindness, cooperation, self-control, and respect for others through positive guidance and modeling.
- **School Readiness** – Activities support early literacy, language development, and foundational math concepts in ways that are engaging and age-appropriate.
- **Family Partnership** – Parents and caregivers are valued partners in the educational process, and ongoing communication supports children's growth and well-being.

Religious, Political, Philosophical Bases

Golden Days & Little Rays Childcare Center is a non-sectarian and non-political program. Our curriculum and daily practices are not based on any religious, political, or philosophical doctrine. Instead, we emphasize:

- Honoring everyone regardless of background or circumstances.
- Teaching children to value kindness, compassion, and friendliness.
- Promoting a safe, welcoming environment where all families feel supported.

While our program does not provide religious instruction, we may acknowledge and celebrate a variety of cultural traditions and holidays in ways that celebrate and are educational.

Program Evaluation

The program plan will be developed and evaluated in writing annually by the manager under Minnesota Rules, part 9503.0032.

Program Goals & Objectives

- Provide a safe, nurturing environment where children can learn and grow.
- Promote physical, cognitive, linguistic, and social development. Children's progress will be documented in the child's record and conveyed to the parent(s) during the conferences specified in Minnesota Rules, part 9503.0090, subpart 2.
- A daily schedule will be provided for both indoor and outdoor activities for each age category served by the program.
- Activities that are both quiet and active, teacher-directed, and child-initiated will be offered.
- A variety of activities require the use of varied equipment and materials.
- Support family engagement and communication.
- Ensure all children are included, with adaptations for those with special needs.

Daily Program and Activities

- Infants (Birth – 16 months): Individualized feeding, sleep schedules, sensory play, tummy time, one-on-one interaction.
- Toddlers (16 – 33 months): Small group activities, sensory exploration, language development, motor skill development, free play, music, art.
- Preschool (33 months – Start of Kindergarten): Circle time, early literacy and numeracy activities, dramatic play, science exploration, outdoor play, music, art, gym
- School Age (Kindergarten – 12 years): Homework help, group projects, games, arts, novel reading, leadership-building activities.

Parent Communication and Involvement

- Daily updates provided through PROcare App, or verbal check-in/out.
- Parent conferences are offered twice annually.
- Families are encouraged to participate in special activities.

DAILY SCHEDULE

Our daily schedule will be somewhat structured but flexible enough to allow for choice and spontaneity. Our routine will also vary from winter to summer.

INFANT SCHEDULE

5:45AM Arrival Begins

Quiet and active engagement will be offered based on the child's needs upon arrival.

7-9AM Curriculum Language & Physical

Both quiet and active, teacher directed curriculum will be initiated utilizing Frogstreet curriculum cards. Curriculum utilizes music, gestures, facial expression and verbal modeling through a variety of new daily experiences. The curriculum includes various types of toys and manipulatives to engage a child's overall development and learning.

Developmentally Appropriate Play

Child initiated play will be offered utilizing the classroom's designated toys*.

Feeding & Diapering

Teacher directed nurture is offered as they meet the needs of the children through secure attachment and consistent caregiving practices.

9-11AM Morning Nap

Children are given the affection needed to prepare for a restful naptime. Room is quieted as needed through dimmed lights and closed blinds.

11:30-12:30 Feeding & Diapering

Teacher directed nurture is offered as they meet the needs of the children through secure attachment and consistent caregiving practices.

12:30-1PM Curriculum Cognitive Development

Teacher directed learning and child-initiated responses work together as caregivers lead with intention through developmentally appropriate sensory exploration activities and language experiences guided by Frogstreet Curriculum. Children may go outside, weather permitting.

Developmentally Appropriate Play

Child initiated play will be offered utilizing the classroom's designated toys*.

1-3PM Afternoon Nap

Children are given the affection needed to prepare for a restful naptime. Room is quieted as needed through dimmed lights and closed blinds.

3-5PM Feeding & Diapering

Teacher directed nurture is offered as they meet the needs of the children through secure attachment and consistent caregiving practices.

Curriculum Social Development

Sensory development is enhanced as teachers direct children through Frogstreet daily curriculum activities that utilize specific toys and materials integrated with the curriculum.

Developmentally Appropriate Play

Child initiated and teacher directed play will be offered utilizing the classroom's designated toys*.

6:15 End of Day***Classroom toys:**

hard cover & soft cover books

musical toys

manipulative toys

soft building blocks

rattles

large sensory driven toys

seating equipment (bouncy seats, small chairs, bouncers etc)

Please Note:

Diapering and feeding will be provided as needed

Babies will enjoy stroller rides throughout the day.

Gym is available for stroller rides:

10:30-NOON

1-3PM

Library Soft Playroom is available:

7AM-9AM and 10AM-4PM

TODDLER SCHEDULE**5:45-7AM LIBRARY SOFT PLAYROOM**

Arrival / Free playbooks & blankies, toys etc.

**Bless children as they arrive with Large Puppet*

Children are given freedom to choose from quiet or active learning through play that is both child initiated or teacher directed. Equipment includes large soft building toys, train sets, large and small picture books, large and small trucks and cars, stuffed animals, building blocks, shape

toys, large and small animals, and figurines. Children are encouraged toward both quiet and active play.

7:00-7:45AM CLASSROOM

Breakfast & Story

Children learn the value of patience and kindness as they are served their morning breakfast. Staff direct children to their assigned seat and a story is shared. Children learn the value of responsibility as they clean up their designated space and prepare for their next activity.

7:45-9:00AM CLASSROOM

Free play

Curriculum SOCIAL

Curriculum CENTER

1 (Monday) 2 (Tuesday)

3(Wednesday) 4(THURSDAY)

Centers are derived from our Frogstreet Curriculum and implemented Monday-Thursday. Centers range from quiet to active and offer both teacher directed and child-initiated learning experiences. Centers utilize various manipulative materials and equipment based on each week's age appropriate and unique center activities.

9:00-9:30AM INSIDE Little Rays Playroom RECESS

Large motor development is enhanced as children experience both teacher directed and child-initiated play in our large soft play gym and tricycle track.

9:30-10:10AM CLASSROOM

SNACK

Starting the Day Activities

UNITE

Peace and CALM

CONNECT

BUILD COMMUNITY

Children quietly enjoy snack at their assigned seat. After the teacher directs clean up, children enjoy a morning gathering activity as teachers implement the Frogstreet "Starting the Day Activities" that reinforce friendship and a joyful attitude of kindness and willingness to learn new things as a class. These starting activities are mostly quiet with teacher directed opportunities for activity.

10:10-10:50AM OUTSIDE RECESS

Children are encouraged to be active and play with joy and kindness. Recess is typically the highest level of activity and primarily child initiated. Children may choose to play with large motor equipment including balls, jump ropes, bean bags, swings or maneuver through the large play jungle gym.

11:00-11:50AM CLASSROOM

LUNCH BREAK

11:50-1:00PM CLASSROOM

Story

Curriculum COGNITIVE & PHYSICAL

Free play

BIG GYM (time permitting)

Teachers guide children through a Frogstreet story and daily curriculum to encourage both cognitive and physical development. These lessons are unique each day and integrate a variety of object lessons and engaging experiences that utilize manipulatives, games and toys to introduce and teach new concepts while also reinforcing older concepts. Next, children are invited to select a classroom toy bin for free play that may include initial teacher direction but will be primarily child initiated. Free play is active yet controlled and peaceful. On big gym days, teachers provide large motor games and activities utilizing stepping blocks, hula hoops, jump ropes, large group games, ball games and exercises.

1:00-3:00PM CLASSROOM NAP TIME

Quiet activities offered after 30 minutes for non-sleepers. Children are provided with their cot and invited to use stuffed animals and blankets during their nap time.

3:00-3:20PM CLASSROOM

Snack

Curriculum SOCIAL

Children enjoy a snack while their teacher directs them through a lesson in social development. This is primarily quiet with opportunity for activity as the teacher directs.

3:20-3:50PM BIG GYM PLAY or INSIDE LITTLE RAYS PLAYROOM RECESS

Teachers choose their play location depending on their classes' unique needs and interests.

BIG GYM: Teachers provide large motor games and activities utilizing stepping blocks, hula hoops, jump ropes, large group games, ball games and exercises.

Little Rays Playroom: Large motor development is enhanced as children experience both teacher directed and child-initiated play in our large soft play gym and tricycle track.

3:50-4:10PM CLASSROOM

Story & Songs

Curriculum LANGUAGE

Teachers guide children to their "sit spot" to engage in a Frogstreet Curriculum story and songs. Next, the teacher guides the class through a daily language lesson that may utilize visuals, manipulatives or toys to teach and reinforce language concepts.

4:10-4:40PM LIBRARY/PLAYROOM

Children are given freedom to choose from quiet or active learning through play that is both child initiated or teacher directed. Equipment includes large soft building toys, train sets, large and small picture books, large and small trucks and cars, stuffed animals, puzzles, building blocks, shape toys, large and small animals, and figurines. Children are encouraged toward both quiet and active play.

4:40-5:00PM ART ROOM

Teachers provide a brief explanation of the day's options regarding sensory tables and art projects. Teachers actively direct and guide children as they initiate their learning. Children are invited to rotate slowly through the day's experiences. Sensory tables can be water, sand, rice, oatmeal or a variety of other materials. Art projects may include painting, marker projects, coloring, or collage/character creations.

5:00-5:30PM CLASSROOM

Story
Songs
Talk about the day/tomorrow's plans
Sharing

Teachers direct students to their circle spot and guide the class through closing activities including songs, sharing, stories and announcements. This time is primarily quiet with opportunity for activity as the teacher gives directions.

5:30PM-close *CLASSROOM*

Free Play

Teachers guide and direct children to specific classroom toy tubs. Children may play freely while teachers may give direction as needed.

6:15 END OF DAY!

After children complete their clean up and pack up assignments, they are excused to their parent/caregiver.

PLEASE NOTE:

*Transition to Library as attendance decreases

Classroom Toys:

Shape Manipulative Toys
Small, Medium and Large Trucks and Cars
Doll Figurines
Puzzles
Hard and Soft Cover Books
Soft Toys
Dramatic Play Equipment (Kitchen, Dress Up, Stroller etc)
Train Track
Large and Small Building Blocks and Toys

PRESCHOOL SCHEDULE:

5:45-7AM LIBRARY SOFT PLAYROOM

Arrival / Free playbooks & blankies, toys etc.

Bless children as they arrive with Large Puppet

Children are given freedom to choose from quiet or active learning through play that is both child initiated or teacher directed. Equipment includes large soft building toys, train sets, large and small picture books, large and small trucks and cars, stuffed animals, building blocks, shape toys, large and small animals, and figurines. Children are encouraged toward both quiet and active play.

7-7:45AM CLASSROOM

Breakfast

Children learn the value of patience and kindness as they are served their morning breakfast.

Staff direct children to their assigned seat and a story is shared. Children learn the value of responsibility as they clean up their designated space and prepare for their next lesson.

7:45-8:30AM CLASSROOM

Songs, Free play

Children enjoy special songs created by Frogstreet Curriculum. Teachers then direct children to designated toy bins that are child-initiated opportunities for learning, sharing and making friends. Children are encouraged toward both quiet and active play.

8:30-9:00AM INSIDE LITTLE ERAYS PLAYROOM RECESS

Large motor development is enhanced as children experience both teachers directed and child initiated play in our large soft play gym and tricycle track.

9:00-9:30AM CLASSROOM

Character Story & Snack

Teachers direct children in learning valuable lessons in character development including kindness, responsibility, compassion, and sharing through story and object lessons while snack is served and enjoyed.

GREETING CIRCLE

Say good morning and introduce your puppet

Children learn valuable social skills as they use imagination and creative play to introduce themselves and their puppet. Morning activities are both teacher directed and child initiated.

Take Attendance

Sing Songs

Children are invited to sing along with Frogstreet Curriculum's songs developed specifically for preschoolers.

9:30-10:00AM LIBRARY SOFT PLAYROOM

Pledge to American Flag
Calendar
Music & Movement
FREE PLAY

Teachers direct and guide children through morning activities including songs, calendar learning, pledge of allegiance, and unique learning activities guided by Frogstreet Curriculum. Activities are both quiet and active.

10-10:20AM CLASSROOM

Read Aloud #1

Teachers direct children to their assigned reading spot for a Frogstreet Curriculum daily story. Stories are primarily teacher directed with opportunity for child initiation and are primarily quiet and active only occasionally.

10:20-11:00AM CLASSROOM

Inquiry & Exploration CENTERS
6 CENTERS per week:
MATH, LITERACY, CREATIVITY, CONSTRUCTION,
FINE MOTOR, DRAMATIC PLAY
Centers are set up Montessori style (3 per day)

Centers range from quiet to active and offer both teachers directed and child-initiated learning experiences. Centers utilize various manipulative materials and equipment based on each week's unique center activities.

11:00-11:50AM CLASSROOM LUNCH BREAK

Free Play in classroom if finish early

As time permits, children choose classroom bins of toys to play with. They are free to play actively or quietly. This play can be teacher directed or child initiated based on the interests of the child and guidance of the teacher.

11:50-12:30 CLASSROOM

Math Center
(5 centers per week/1 center per day)

Children free play while teachers pull small groups of children for math driven center activities that utilize manipulatives, puzzles, math games and worksheets to develop math and cognitive skills. These centers can be teacher directed or child initiated and range from active to quiet in nature.

12:30-1:00PM OUTSIDE RECESS

Children are encouraged to be active and play with joy and kindness. Recess is typically the highest level of activity and primarily child initiated. Children may choose to play with large motor equipment including balls, jump ropes, bean bags, swings or maneuver through the large play jungle gym.

1:00-3:00PM CLASSROOM NAP TIME

Quiet activities offered after 30 minutes for non sleepers Children are provided their cot and invited to use stuffed animals and blankets during their nap time.

3-3:30PM CLASSROOM

Snack & Read Aloud #2

Teachers direct children to their assigned reading spot for a Frogstreet Curriculum daily story. Stories are primarily teacher directed with opportunity for child initiation and are primarily quiet and active only occasionally.

3:30-4PM ART ROOM ROTATION

Sensory tables and art tables

Montessori style for free choice learning

Teachers provide a brief explanation of the day's options regarding sensory tables and art projects. Children then initiate their learning as they rotate at will through the day's experiences. Sensory tables can be water, sand, rice, oatmeal or a variety of other materials. Art projects may include painting, marker projects, coloring, or collage/character creations.

4-4:40PM CLASSROOM STEAM or BIG GYM

TUE/THUR. STEAM (2 per week) or free play

Children choose classroom toy bins through child-initiated play while groups of children are pulled to experience the day's STEAM Frogstreet Lesson. These lessons can be teacher directed or child initiated and include both active and quiet experiences.

MON./WED./FRI BIG GYM

Teachers provide large motor games and activities utilizing stepping blocks, hula hoops, jump ropes, large group games, ball games and exercises.

4:40-5PM LIBRARY/PLAYROOM ROTATION

Children are given freedom to choose from quiet or active learning through play that is both child initiated or teacher directed. Equipment includes large soft building toys, train sets, large and small picture books, large and small trucks and cars, stuffed animals, building blocks, shape

toys, large and small animals, and figurines. Children are encouraged toward both quiet and active play.

5:00PM CLASSROOM

Read Aloud #3

Teachers direct children to their assigned reading spot for a Frogstreet Curriculum daily story. Stories are primarily teacher directed with opportunity for child initiation and are primarily quiet and active only occasionally.

5:10PM CLASSROOM

Closing Circle/Goodbye song

Teachers direct students to their circle spot and guide the class through closing activities including songs, sharing and announcements. This time is primarily quiet with opportunity for activity as the teacher gives direction.

5:20PM CLASSROOM OR LIBRARY SOFT PLAY

Draw and color a blessing picture

Children are invited to color a picture for someone they love or want to encourage. This time is primarily quiet and child initiated.

Books & Blankies

Children are invited to read and snuggle with their blankie. This is a child-initiated and quiet activity.

Free Play

Teachers guide children to specific classroom toy tubs. Children may play freely while teachers may give direction as needed.

5:50PM CLASSROOM Pack Up/Clean Up

Every child is given a teacher directive regarding their specific clean up and pack up assignments. Children are encouraged to clean up with a moderate tone and responsible character.

6:15PM CLASSROOM END OF DAY!

After children complete their clean up and pack up assignments, they are excused to their parent/caregiver.

PLEASE NOTE:

*Transition to Library as attendance decreases toward the end of the day.

Classroom Toys:

Large and Small Building Blocks

Large Car Racing Track
Dress Up Items
Garden Building Toy
Animal Figurines
Large and Small Trucks and Cars
Puppets
Stuffed Animals
Doll House
Large Dramatic Play items (Kitchen, Vet Hospital etc.)
Puppet Theatre
Puzzles
Stacking Toys
Misc. Games
Train Track
Musical Toys

Parent Communication and Involvement

- Daily updates provided through logs, apps, or verbal check-in/out.
- Parent conferences are offered twice yearly or upon request.
- Families are encouraged to participate in program activities.

TRANSITIONS TO A NEW CLASSROOM

Many factors are considered when deciding to transition a child to a new classroom. This includes the child's development, availability in the program, and the ages and abilities of the other children in the classroom. Teachers and a manager will communicate with the parents when it is an appropriate time to start a child's transition. We encourage parents to express any concerns or questions prior to or during the transition. If a parent feels their child is not ready, we will have a meeting to address concerns and questions.

When the staff-to-child ratio allows, your child may be able to try out their new classroom for a half or whole day. Transitions can occur throughout the year, but most occur in June and September.

From time to time, it may be necessary for the center to transition children to another classroom due to enrollment or staffing factors. Children that are either the youngest or the oldest in a classroom may be transferred to a different classroom throughout the day. If they are the oldest in their classroom, they may be moved to the next class up. If they are the youngest, they may

get moved to the class down for the day. The center decides what is best for the children and the center on any given day.

General Age Guidelines:

Infants:	6 weeks – 8 months
	8 months- 16 months
Toddlers:	16 months – 33 months
Preschool:	33 months – start of Kindergarten
School Age:	Kindergarten – Age 12

DAILY COMMUNICATIONS via PROcare

We use PROcare, an electronic version of daily communication, to keep you informed about your child's day. All parents/guardians are asked to use our PROcare application. We will send highlights of your child's day through this app. We will inform you of diaper changes, naps/rest time, supplies your child may need, meals, and best of all, photos. Staff use center issued iPads to capture photos and record this information.

All our important center notifications are shared on PROcare, so it is imperative that parents check daily for important center notices. Policy and procedure changes, government mandates, center closures, and much more important information is shared via PROcare. We ask that parents routinely check for important center information.

We request that parents keep us informed of important information such as absences, late arrivals, or early pickups, authorized non-parental pick-ups, illnesses, current medications, or other important information via the PROcare application. Please know that messages you send on PROcare can be viewed by all staff. If you have a message that is personal or of a financial matter and should be kept private, please call the main phone line #507-824-5107 or email management directly.

IDEA INDIVIDUALS WITH DISABILITIES EDUCATION ACT

As a childcare provider, we continually monitor the development of all children in our care through ongoing observation and recording. We want the best outcomes for all children. Childcare providers are considered a primary referral source for early intervention under federal IDEA special education law. We are required to refer a child in our program who has been identified as having developmental concerns or a risk factor that warrants a referral as soon as

possible but in no case more than seven days after the identification. We can assist the parents with the referral or partner with them in the referral process.

HOLIDAYS

Golden Days & Little Rays Daycare is CLOSED on the following Holidays:

New Years Eve, New Year's Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Day after Thanksgiving, Christmas Eve Day, Christmas Day.

Should one of the above-listed holidays fall on a Saturday/Sunday, we will take the preceding Friday or the following Monday as a paid holiday. In addition to the above-listed holidays, we will require **three cleaning days**. When the center is closed, enrolled childcare families continue to pay normal childcare fees.

All mandatory training for staff will take place after hours for continuing education courses required by childcare licensed DHS annually (for example CPR, First Aid, Supervision, Abusive Head Trauma, Sudden Unexpected Infant Death Syndrome Training, and many more).

NAP AND REST POLICY

Each child will nap or rest appropriate to their age and stage of development. Each child will have his or her own clean and separate crib/cot. A child who has completed a nap or rested quietly for 30 minutes is not required to remain on a cot or in a crib. After 30 minutes lapses, quiet time activities are offered for non-napping children.

Cots are placed directly on the floor and are not stacked when in use. Children in non-infant rooms are asked to bring a labeled blanket to use during rest and nap time. Blankets will be sent home each week (or more frequently as needed) to be laundered.

Each infant is provided their own crib with a firm mattress and individual fitted crib sheets. Crib bedding is washed by our staff every week. Infants are welcome to bring a small blanket from home to use during non-nap times. All blankets must be labeled with your child's name and will be sent home regularly for washing to maintain cleanliness and hygiene. Bedding or blankets are always washed if soiled or wet. Cribs are checked monthly for safety and are made of sturdy construction that conforms to the code of federal regulations.

Nothing other than a pacifier is allowed in a crib with an infant. Infants under 12 months old may not sleep with a blanket as mandated by DHS Licensing. In lieu of blankets, non-swaddling sleep sacks may be provided by parents for added warmth or comfort. We do not swaddle infants at GDALRDC. We place each infant on their back unless signed documentation has been received from the infant's physician directing an alternate sleeping position for the infant while in childcare. An infant who independently rolls onto 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 old or the license holder has a signed statement from the parent indicating that the infant regularly rolls over at home. Please avoid sending infants in outfits with hoods and avoid teething necklaces.

Infants are welcome to bring a small blanket from home to use during non-nap times. All blankets must be labeled with your child's name and will be sent home regularly for washing to maintain cleanliness and hygiene.

INFANT FEEDING

GDALRDC follows USDA nutritional guidelines. Infants will be fed formula, breast milk, milk, or nutritionally adequate solid food in prescribed quantities at specific time intervals. Each child's feeding schedule will be available in the food preparation area. It is the parent's responsibility to safely prepare bottles. We cannot allow anything other than milk or formula to be added to bottles without medical instruction.

Breastmilk

We encourage breastfeeding infants! We encourage mothers to nurse infants in our nursing room and encourage parents to reach out to our staff with questions about feeding infants; and your child's unique eating preferences. Sanitation of bottles is the parent's responsibility. Please use the following safe practices when pumping, storing, and transporting milk:

- Wash hands, breast, and breast pump. Express milk only after ensuring hands are clean.
- Use a clean bottle or storage bag.
- Fresh breast milk is safe for 48 hours if refrigerated. Frozen breast milk should be thawed overnight in your refrigerator and prepared with only the appropriate amount for one feeding.
- Label each bottle with the child's first and last name and the date.
- Transport bottles in an insulated bag and be sure milk is immediately refrigerated upon arrival at GDALRDC.
- We cannot clean your bottles per health and sanitation codes. Take used bottles home daily.
- You must bring in enough (breast milk) prepared bottles for your child's meals/snacks for the duration of their childcare day.

Formula

Formula is supplied and prepared by the parent. Use best practices at home to prevent illness and disease:

- Always clean all bottle parts with hot soapy water paying careful attention to the nipple and rings to clean all small crevices. Rinse well and cap the bottle when dry to avoid dust or dirt in the air. Wash the container your bottles travel in.
- Parents must provide bottles filled with the amount of formula needed for their infant's feedings.
 - For example, if a baby consumes 4 bottles during their hours at daycare, the parents must provide 4 bottles-each filled with the amount of formula necessary.
- Transport bottles with the date and baby's first and last name.
- We cannot clean your bottles per health and sanitation codes. Take used bottles home daily.
- You may bring one extra bottle of premeasured powdered formula labeled with the number of ounces to use in the event more formula than expected is needed.

Infant Food Guidelines

All parents must provide all infant food until the child reaches the age of one year, due to unknown and potential allergy concerns. All food must be brought daily, and in an insulated cooler, marked with the meal designation ****example lunch****. Upon arrival the contents in the insulated cooler will be placed in the GDALRDC Kitchen walk-in cooler. All containers MUST be labeled with each child's first and last name. Glass bottles or containers are not allowed. Open commercial containers will not be returned as open food will be discarded. Containers from home will be returned daily.

MEALS & SNACKS

GDALRDC must follow USDA nutrition guidelines. We serve nutritionally balanced, high-quality food at no additional charge for enrolled families. We offer daily breakfast, lunch, and 2 snacks. We will encourage your child to try everything, but they will not be forced to eat. Children who choose not to eat will not be served again until the next scheduled meal or snack. No separate menus will be made except under medical circumstances. Mealtime can be a valuable learning and social experience. Pleasant conversation and table manners will be encouraged. Your child must arrive before 7:30 AM to receive breakfast and arrive by 10:30 AM to receive lunch. If your child misses a mealtime, it is your responsibility to feed him/her unless other arrangements are made.

Special treats will not be allowed out of respect for individual allergies/restrictions.

If parents choose to provide their own meals, we do not provide a discount and the meals must include the following per USDA requirements: 1 serving of fluid milk, 2 servings of vegetable/fruit, 1 serving of protein, 1 serving of grain/bread. We must prohibit the serving of peanut products. We cannot guarantee that peanuts are not in our facility. A menu will be available via the PROcare app.

WATER

Children/infants may have water to drink whenever they wish during the day. Each day you will need to provide a new clean water bottle/cup for each child/infant to use, designated and marked with the child's name and must be properly cleaned at home. GDALRDC asks that you send age-appropriate water bottles/cups for the child/infant's developmental stage.

BEHAVIORAL GUIDANCE

We believe the best way to teach children good behavior is through staff modeling and celebrating each individual child's growth. Staff members are expected to communicate with children using positive language and a respectful tone. We will tailor our behavior guidance toward overall positive character development.

If we notice children's behaviors need correction, we will first re-direct the child towards more constructive activities to reduce conflict. We teach children how to use acceptable alternatives to problems. At all times we aim to protect the safety of children and staff. If needed, our staff will provide immediate consequences for a child's unacceptable behavior which may include redirection, warnings, discussions about problem behaviors and solutions to them, or other creative methods of reminding children not to repeat problem behaviors. If the unacceptable behavior is persistent and requires an increased amount of staff guidance and time our staff will do one or more of the following:

- Separate a child and notify the parent (see Separations).
- Conference with parents
- Make a behavior plan. Behavior plans are tailored to your child and are a collaboration between the teacher, manager, parent, and possibly other specialists. Behavior plans help outline ways to best help guide a child with behaviors that present a challenge in a group setting.
 - Plan may include a shortened childcare day. No discount is offered.
 - Plan may include one-on-one staffing for a portion of the day, at the parent's cost.
 - Plan may include parents supplying supplies or toys to bring focus and peace and may include:
 - Box for nap time
 - Biting toys.
 - Ear coverings to block noise.

- Sensory bins

- Plans may include a teaching strategy that limits or increases free time.
- Plans may include a seating chart.
- Behavior plans are individual to best meet your child's needs.

If unacceptable behavior continues which is harmful to the child, the group, or staff, the child may be terminated from services.

Our staff is prohibited from the following actions by or at the direction of a staff person:

1. Subjecting a child to corporal punishment, which includes but is not limited to rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting, or spanking. This program *will NOT allow prone or contraindicated restraint under any conditions.*
2. Subjecting a child to emotional stress, which includes but is not limited to:
Name-calling, ostracism, shaming, making derogatory remarks about a child or the child's family, or using language that threatens, humiliates, or frightens a child.
3. Punishments for lapses in toileting
4. Withholding food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior
5. The use of mechanical restraints, such as tying.
6. Separation of a child from the group, except within the rule requirement. No child may be separated from the group unless the following has occurred:
 - Less intrusive methods of guiding the child's behavior have been tried and were ineffective.
 - The child's behavior threatens the well-being of the child or other children in the program.
 - A child who requires separation from the group must remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person.
 - The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation and The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.
 - Children between the ages of six weeks and 16 months must not be separated from the group as a means of behavior guidance.
 - If a child is separated from their class, it will be noted on a daily log that includes the child's name, staff person's name, time, date, and basic incident information.
 - If a child is separated from the group three or more times in one day the child's parents shall be notified and the parent notification shall be indicated on the daily log. If a child is separated five or more times in one week, eight times or more in two weeks, the procedures in MN Dept of Human Services Division of • • Licensing rule 9503.0055 subpart 2 will be followed.
 - No financial refund will be given if a child is sent home.

GDALRDC reserves the right to withdraw any child if their needs are not being met by the staff-to-child ratios or if the child poses a danger to other children or staff. This removal could be immediate depending on the severity of the behaviors being demonstrated.

BEHAVIOR GUIDELINES

Staff understand that temperaments are controlled by many factors including a child's sleep patterns, health and wellness, home environment, and of course, behaviors can be affected by the children and staff. We will make every attempt to surround your child with gentle love and support. However, there are times when we must consider what is best for the other children in the group: if a child's behavior is inhibiting the staff's ability to care for others. We may need to send a child home for the day if we feel their behaviors have infringed on another child's safety or right to learn. We rely on parents to work with our team to address a child's behavior at home to encourage them to correct their behaviors.

Examples of behaviors that would warrant a child to be sent home with a parent would include but are not limited to:

- inconsolable crying that staff is unable to soothe for a period of over one hour
- refusal of a child to walk to/from a planned outing as this could negatively affect the group and directly relates to safety of the group outside the childcare center
- a child that verbally indicates to staff they will be a flight risk or that demonstrates behaviors that indicate they will run away from a planned activity or into traffic or any dangerous spaces
- behaviors that staff are unable to correct within a one-hour time frame that may pose a danger or extreme disruption to the group. Examples include:
 - refusal to stop screaming or yelling at staff
 - continued use of profanity that is not halted after reminders
 - intentional excessive and/or deliberate destruction of property
 - any other behavior that threatens bodily harm to staff or children that is not quickly halted with staff correction.
 - biting if a child were to have 3 bites in one day.

We ask for your full support and thank you in advance for understanding the limitations we are faced with as a licensed childcare center. We look forward to working alongside you to find feasible solutions. No financial refund will be given if a child is sent home. To clarify behaviors that would immediately lead to a child being sent home are as follows:

- Attempted flight risk – The child will be sent home for the day and cannot return until a meeting with the parent has been arranged to ensure the school, parents, and student are working to rectify this dangerous behavior. When dealing with a child who exhibits repeated flight risks, it is crucial to prioritize their safety and well-being. Repeated flight risks will lead to a pause in the current care arrangement in order to allow the child to seek therapy or receive further guidance. Terminating the child from our program will be

considered a last resort when all other options for ensuring their safety have been exhausted.

- Throwing or turning over chairs, shelves, tables, or other furniture -The child will be sent home for the day and cannot return until a meeting with the parent has been arranged to ensure the school, parents, and student are working to rectify this dangerous behavior. When dealing with a child who exhibits these behaviors often, it is crucial to prioritize the safety and well-being of themselves, other children, and staff. Repeated behaviors will lead to a pause in the current childcare arrangement to allow the child to seek therapy or receive further guidance. Terminating the child from our program will be considered as a last resort when all other options for ensuring their safety have been exhausted.
- Starting or participating in a physical altercation with other students or hitting/punching/kicking or attempting to hurt a staff member – The child will be sent home for the day and cannot return until a meeting with the parent has been arranged. Repeated physical altercations will lead to a pause in the current childcare arrangement to allow the child to seek therapy or receive further guidance. Terminating the child from our program will be considered as a last resort when all other options for ensuring their safety have been exhausted.
- Spitting or swearing at teachers or friends – one warning, then we will send them home for the day if the behavior repeats. Repeated spitting or swearing will lead to a pause in the current childcare arrangement to allow the child to seek therapy or receive further guidance. Terminating the child from our program will be considered as a last resort when all other options for ensuring their safety have been exhausted.
- Inappropriately touching other children, excessively discussing private parts, showing private body parts to others, there will be one discussion with the child and the parents will be called, then we will send them home if the behavior continues. Repeated inappropriate behaviors will lead to a pause in the current childcare arrangement to allow the child to seek therapy or receive further guidance. Terminating the child from our program will be considered as a last resort when all other options for ensuring their safety have been exhausted.
- Biting – Redirection after each bite, Parents will be called after two bites. The child will be sent home for the day after 3 bites unless it breaks skin twice then they will be sent home. For very young children under the age of 2, the program and parents may use discretion on the best approach for each individual child. The program reserves the right to send any child home for biting if it is in the best interest of the group.

DIAPERING & TOILET LEARNING

Procedures for diapering are approved by our program's health consultant and are posted in the diaper changing areas. Diapering may only be done in designated areas. GDALR cannot accommodate cloth diaper changes. Parents are to supply diapers, wipes, and diapering supplies every day. In the event a child needs a disposable diaper, and it is not supplied by the parent, there is a charge of \$1 per diaper, GDALRDC will use on-hand diapers located in the classroom. In the event a child needs baby wipes, GDALRDC will use on-hand wipes located in

the classroom. A new package of unscented disposable baby wipes will be provided for your child, labeled with your child's name and a charge of \$4 will be charged to your childcare tuition.

Toilet learning may begin when the child has graduated into the Toddler program.. We believe it is important that we work together during this time until a consistent routine is established. Our staff will make every effort to work with your child during this process and celebrate successes. If your child has an accident and wets be assured, we will not scold or spank. No child shall be punished or shamed for accidents during this learning period.

You will supply enough pull-ups with re-attachable sides plus several changes of clothing to use during training. Appropriate clothing is a must. During your child's potty-training season, they must wear a pull up. GDALRDC does NOT allow children to just have pants on without underwear or a pull up during the potty-training season. Please refrain from dressing with difficult belts, onesies, tights, or snaps during the training period.

IMMUNIZATIONS

Immediately upon enrollment documentation of current immunizations must be submitted. For inadequate or unimmunized children, a signed notarized statement of parental objection to the immunization or medical exemption is required. It is a parent's responsibility to make sure that immunization records are updated as needed.

Golden Days & Little Rays follows all Minnesota Department of Health and Department of Human Services licensing guidelines regarding immunizations and communicable disease control.

If an outbreak of a vaccine-preventable illness occurs within the center (such as measles, pertussis, or chickenpox), children who are not fully immunized may be temporarily excluded from attendance as required by public health officials. This measure helps protect the health and safety of all children and staff.

During this exclusion period, regular tuition will still apply to hold your child's enrolled spot and to allow us to maintain staffing and classroom operations.

Whenever possible, we will communicate clear timelines and updates to affected families in coordination with public health authorities. Our goal is always to ensure a safe, healthy environment for every child while remaining compliant with state licensing and health regulations.

Preferably prior to enrollment, but no longer than 30 days after enrollment, parents must provide a Health Care Summary form signed by a physician. Parents must keep these forms up to date. Parents have the responsibility to inform GDALRDC when their child has a special medical condition, need, or allergy.

CCAP PARTICIPATION

Golden Days & Little Rays Daycare & Activities Center proudly accepts families who qualify for the Minnesota Child Care Assistance Program (CCAP). We work directly with county agencies to support eligible families and ensure compliance with all program requirements.

Authorization Requirements

Services will begin only after a valid CCAP authorization has been received from the county. Parents/guardians are responsible for contacting their CCAP caseworker to ensure that all paperwork is completed and that our center is listed as the approved provider.

Parent Fees (Co-Payments)

Families may begin care before CCAP funds are provided. In this instance the family must pay full tuitions until CCAP funds are received. Families are responsible for any co-payment assigned by their county caseworker.

Co-pays are due weekly on Fridays for the upcoming week. Failure to pay co-pays on time will result in late fees and possible termination of services.

Attendance Reporting

Daily attendance must be accurately recorded and verified by parents using the approved system (paper form, electronic sign-in, or county system as applicable). Incomplete, missing, or inaccurate attendance may result in denial of payment by the county. If this occurs, parents are responsible for any unpaid balance.

ILL CHILD

We highly recommend that you have a sick plan in place for your child/ren. Childcare is not sick care. No discount is offered if your child and/or child's sibling is excluded from care due to illness. Depending on the severity of the illness and if the center has experienced multiple other cases, siblings may or may not be excluded from care. To protect the other children, we must enforce that you make other care arrangements if your child has the following symptoms:

Illness

Level Green

Normal Childcare (Non-Heightened) Exclusion Period.

Level Red

During times of more than 5 diagnosed cases of the same illness within our center

Bacterial infection IE strep or impetigo	Non-symptomatic siblings are not excluded from care and may continue to attend for illnesses in this column. 24 hours from initial medication dose AND until symptoms improve	within 5 calendar days. Siblings may or may not be excluded, please read below. 48 hours from initial medication dose, AND until symptoms improve. Siblings also excluded from care
Chicken Pox - Diagnosed	Excluded from care until symptoms improve, and all pox are crusted over	Excluded from care until symptoms improve, and all pox are crusted over. Siblings also excluded from care
Communicable diseases - diagnosed. This covers a variety of diseases	24 hours from initial medication dose or diagnosis or until symptoms improve	A minimum exclusion of 48 hours from initial medication dose or diagnosis or until symptoms improve. Siblings not excluded if symptom free
COVID-19	24 hours fever-free without medication and symptom free	48 hours fever-free without medication. Siblings are also excluded from care.
Diarrhea	The Center will typically not exclude until 3 loose stools are observed. However, GDALRDC may exclude at first diarrhea if the stool is mostly water and foul in odor. GDALRDC may also be immediately excluded if we observe other children with similar symptoms. Diarrhea exclusion is 24 hours from the last observed diarrhea and improvement of other symptoms	The Center will typically not exclude until 3 loose stools are observed. However, GDALRDC may exclude at first diarrhea if the stool is mostly water and foul in odor. GDALRDC may also immediately exclude if we observe other children with similar symptoms. Diarrhea exclusion is 48 hours from the last observed diarrhea and improvement of other symptoms. Siblings are not excluded if symptom-free
Ear, or profuse nasal discharge	Excluded from care until medicated for 24 hours or until symptoms improve	Excluded from care until medicated for 24 hours or until symptoms improve.
Fever above 100 (orally/forehead/underarm) Hand Foot Mouth	24 hours fever-free without medication Excluded from care until fever-free and no open sores on body or mouth. Once sores have scabbed over are acceptable to return to care.	Siblings are not excluded if symptom-free 48 hours fever-free without medication. Siblings are also excluded from care. When the center has 5 or more cases of Hand Foot Mouth, children with open sores will be excluded until fever-free and no open sores on the body or mouth with a minimum of 24-hour exclusion. Siblings not excluded if symptom-free
Lethargy Unexplained	With no other symptoms, the child is excluded until symptoms improve.	With no other symptoms, the child is excluded until symptoms improve. Siblings not excluded if symptom-free
Lice or Scabies	Excluded 48 hours from when 1 st medicated AND medicated at least 2X AND no live lice present	If the center has 5 of the same diagnosis, we will move to a level red, and all diagnosed children will be excluded 72 hours from 1 st medicated AND medicated at least 2X AND no live lice present. Siblings are also excluded from care
Pink Eye (Bacterial or Viral)	Bacterial-24 hours from the initial medication dose AND until symptoms improve. Viral-24 hours from end of symptoms, even with doctors note. Blocked tear duct or allergies do not cause exclusion from care.	Bacterial-24 hours from the initial medication dose AND until symptoms improve. Viral-24 hours from end of symptoms, even with doctors note. Siblings are also excluded from care. Blocked tear duct or allergies do not cause exclusion from care.
Rash unexplained	No exclusion for diaper or simple heat rash, other rashes must be covered by clothing or bandage. If a rash has open sores on the skin or mouth child must remain out of care until the sores are scabbed and can be covered	When the center has 5 or more cases of similar rash, we will go to a level red exclusion policy. With any signs of mouth or open sores on the exposed skin, a child will be excluded for a minimum of 48 hours or until sores are healed. Rashes must be covered to return to care. Siblings are not excluded if symptom-free
Ringworm	If present in an area that is fully covered by clothing, a child can attend care. If present on the face, or hands, or are not able to be fully	If present in an area that is fully covered by clothing, the child can attend care. If present on the face, hands, or are not

	covered with clothing, the child must be excluded until symptoms improve	
RSV	48-hour exclusion minimum for children diagnosed with RSV. This is a highly contagious and potentially dangerous illness in a childcare setting.	After 3 cases of RSV center staff will carefully monitor all children, especially infants. We will do frequent temp. checks and will not hesitate to send a child home that displays signs of fever, cough, difficulty breathing, lethargy, or general discomfort. Please know that RSV is highly contagious, and a heightened monitoring response is necessary to protect vulnerable populations.
Unable to participate in activities or requiring more care that compromises other children	Excluded from care until symptoms improve	Excluded from care until symptoms improve
Vomiting	24 hours from last vomit	48 hours from the time of the last vomit Siblings are also excluded from care

If your child develops any of the above symptoms during the day or appears too ill to be in care, a parent or alternative person (specified on the enrollment form) will be contacted and asked to pick up your child as soon as possible and not more than one hour after notification. Your child will be kept as comfortable as possible and isolated from the group (when possible) and to the best of our ability within licensing guidelines. A child's doctor or emergency personnel will be contacted, and treatment sought if deemed necessary.

Siblings of ill Children

If you feel your children are displaying symptoms of illness and you have the ability to keep siblings' home to protect the childcare group of possible contagions, that is preferable. However, please review the above chart regarding policies about siblings of ill children.

Notification of Diagnosis of Contagious Illness

You are required to notify us within 24 hours of the diagnosis of a contagious illness or parasitic infestation. In cases of diagnosed influenza, pink eye, ringworm, lice, impetigo and chicken pox, a procare message will be sent to parents by management to inform of illness.

Prescription and Non-Prescription Medications

If your child requires prescribed medication, you will be asked to sign a permission slip. All medications must be in their original bottles. Pharmacists will fill two separate bottles (for home & childcare) when requested. Medications must not be expired and must be prescribed to the specific child and for the specific time frame only.

Exclusion due to illness or exposure

If your child is diagnosed with a contagious illness, they must be excluded from care based on current recommendations from MDH, CDC, and DHS guidelines or GDALRDC policy, whichever is

longer. If your child was exposed to a contagious illness and MDH, CDC, DHS, or GDALRDC policy determines they must be excluded from care (whether symptomatic or asymptomatic), they will be excluded for the period of time determined by the organizations listed. No childcare discount will be offered if your child is excluded from care due to illness or exposure to illness. Even if the child was exposed to illness at childcare, the financial policy is clear, discounts will not be offered for illness. GDALRDC will make strong efforts to ensure health and safety of our childcare group. **If you have questions regarding illness, please refer to these guidelines rather than calling our office last minute or asking teachers for guidance; or consult your physician.** **Children with minor colds can attend childcare.**

INJURY

In the event a child is injured at GDALRDC, our staff will administer first aid or CPR as deemed necessary and to the best of our ability. If emergency treatment is indicated, staff will call 911 and a parent (or other authorized adult listed on the emergency form) and explain the situation. If a child needs to be transported by emergency services, they will likely be brought to St. Mary's Hospital/Mayo Clinic in Rochester, MN or other hospital per the recommendation of emergency services. The child's health and consent forms will be sent with him/her, if possible, given the severity of the injury and the time allowed to gather necessary health records.

While GDALRDC staff is trained to be prepared for emergency situations, most of our staff are Early Child Educators by trade, not physicians or nurses or trained medical professionals. We will do our best to meet the needs of each medical situation, but only trained medical staff can diagnose or treat your child's medical needs. Our staff will also do their best to watch for symptoms that would indicate a child may need medical intervention. However, not all injuries display immediate or obvious symptoms and therefore, could potentially go undetected until symptoms surface. When management determines symptoms indicate a larger problem, parents will be notified.

In the unfortunate event that your child is severely sick or hurt, regardless of whether that injury occurred at home, at childcare, or any other location, Golden Days & Little Rays Daycare Center cannot provide additional staffing to accommodate the needs of one child, nor can we assure the child can stay indoors or be segregated from the group. Your child must be well enough to return to care within existing DHS-recommended staff-to-child ratios.

Medical expenses for minors are the responsibility of legal parents or guardians. Golden Days & Little Rays Daycare Center, GDALRDC is not responsible for costs associated with the medical care or treatment of children or parents enrolled in our programs. Accidents and injuries can occur in childcare settings just as they can occur at home or outside of care. Regardless of how or where injuries, accidents, or medical needs originated; medical and therapeutic costs are not the responsibility of this program.

We are unable to remove embedded ticks on children. If your child has a tick that is embedded, we will call you to come and remove it. Similarly, if your child has a sliver, we will be unable to remove it. Instead, we will place a band-aid over the sliver and notify you via PROcare.

FIRE PREVENTION

Your child will practice exiting the childcare center safely and learn about fire prevention and safety. Primary and secondary fire exits are noted on the floor plan, which is posted in a prominent area in each learning space. Both routes are practiced throughout the year. The person detecting a fire will call 911. Lead teacher will evacuate all children, taking with them the attendance record, first aid kids, and evacuation emergency contact information. The group will proceed outdoors, away from the building to the designated waiting area (Trinity Lutheran Church/parking lot) and await further instructions. Attendance will be taken, and any missing child reported to the fire marshal. No one is to re-enter the building until all clear is given. A report will be made to DHS (MN651431-6500) within 48 hours when fire department is called. Staff is trained in the use of and the location of the fire extinguisher. Fire extinguishers are checked annually. Written instructions on the use of the fire extinguisher, fire evacuation plans, and duties of staff are posted near all fire extinguishers.

Directions for use of the fire extinguisher:

Use the PASS Method

P – Pull the pin

- Hold the extinguisher upright and pull the safety pin to unlock the handle.

A – Aim at the base of the fire

- Point the nozzle or hose at the fire's base, not the flames.

S – Squeeze the handle

- Firmly squeeze the handles together to release the extinguishing

S – Sweep side to side

- Sweep the nozzle side-to-side at the base of the fire until it appears out.

EMERGENCY SHELTER

A battery-operated radio and flashlight are kept at the center. If emergency shelter is needed outside of this facility, staff and children will relocate to:

Trinity Lutheran Church - 301 Second Ave. Wanamingo, MN 55983

TORNADO PROTOCOL

Tornado drills are practiced monthly, April through September and are documented in a log. In the event of a tornado warning, all children will be moved to the large, green art room. Staff will bring the attendance sheets, first aid kids, and parent communication information and take attendance. The manager will carry the battery-operated radio and flashlight. A copy of GDALRDC Emergency Preparedness document is available upon request.

LOCKDOWN PROTOCOL

At Golden Days & Little Rays Daycare Centers (GDALRDC), the safety of the children and staff is our highest priority. In the event of an emergency that poses a potential threat to the safety of anyone on-site, we will implement our lockdown procedures. Due to the sensitive nature of these situations, and the possibility that an enrolled family may be involved, we do not disclose specific lockdown procedures or full details of threats in order to protect all children and staff. If a lockdown becomes necessary, management will first act to notify classrooms, secure the safety of all children, and ensure all individuals are accounted for. Once immediate safety measures are in place, parents will be notified. Depending on the situation, and in consultation with local authorities, parents may be informed whether child pickup is permitted or restricted during the active lockdown. We ask for your cooperation and understanding as we follow the direction of law enforcement and prioritize the well-being of every child and staff member.

PANDEMIC PROTOCOL

We will cooperate with state and local government disaster planning agencies working to prepare for or react to emergencies presented by a pandemic outbreak. Due to the unpredictable nature of a pandemic, it is difficult to plan for each scenario. GDALRDC will make every attempt to remain open and care for your children. In the event we are forced to close, childcare tuition will continue as normal for two full weeks. In the event GDALRDC is forced to close (or certain classrooms within GDALR) are forced to close for 3-12 weeks, childcare tuition will be reduced to approx. $\frac{1}{2}$ of the days of the week you are normally enrolled. For example: Normally enrolled 5 days, reduced to 3 days; normally enrolled for 3 days, reduced to 2 days; normally enrolled 2 days, reduced to 1 day. We will hold your child's normal enrollment schedule for a period of up to 12 weeks. Parents would have the option of submitting a 2-week notice to end childcare charges at any time.

INCLIMATE WEATHER POLICY

In Minnesota, snow and severe cold can affect our ability to commute safely. We recognize that your family depends on our childcare to be open, even in poor weather. We must also consider the safety of our staff and your family during times of dangerous weather.

GDALRDC will communicate all closures or changes in hours as early as possible, but typically by 5:00 AM for morning decisions.

If inclement weather arises during the day and conditions worsen, the center may close early for the safety of staff and families. Parents will be notified immediately via the PROcare app. and are expected to pick up their child within 1 hour of notification.

Please note that tuition will not be refunded or prorated for days the center is closed due to weather or emergencies, as staffing and operational costs remain.

LICENSING

We are licensed by the State of Minnesota Human Services Department. In addition, we must meet the criteria of the State of MN Health Department. We also must meet guidelines set forth by a Health Nurse. We are governed by Minnesota Rules, parts 9503.0005 to 9503.0170 (DHS Rule 3) and Minnesota Statutes, Chapters 245A and 245C. These statutes require that we maintain certain records, pass unscheduled inspections, meet fire and other safety codes, and further our education and training in the childcare field on an ongoing basis. GDALRDC will post our license in entrance of Door #4.

PET POLICY

No animals will be granted access to the facility apart from pre-approved police canine animals for the purpose of a special event. The children may encounter animals during a field trip.

MEDIA

GDALRDC will take pictures of the children during center hours with center provided iPads for use with the PROcare app. and certain center specific FB page/website. Your permission must be obtained to do so. Please note your child's image will never be used for research or experimentation.

VIDEO SURVEILLANCE

GDALRDC premises are under video and audio surveillance. Surveillance is private and only permitted leadership within GDALRDC have access to review surveillance. Surveillance footage is not accessible to parents or non-leadership staff. Surveillance is continuously recorded and logged.

INSURANCE

GDALRDC carries a minimum of \$2,000,000 general liability coverage.

NON-DISCRIMINATION

GDALRDC shall not discriminate against any child in our care. Your child is placed here without regard to his or her race, creed, color, sex, religion, or national origin.

MALTREATMENT OF MINORS

For reports of suspected abuse or neglect of children occurring within a family or in the community, see below for a contact phone number for the local child protection agency local Law Enforcement.

[Clear Form](#)



OFFICE OF INSPECTOR GENERAL - LICENSING DIVISION



DHS-7634A-ENG

7-25

Maltreatment of Minors Mandated Reporting

This form may be used by any provider licensed by the Minnesota Department of Children, Youth, and Families, except family child care. The form for family child care providers is [DHS-7634C-ENG](#).

What to report

- Maltreatment includes egregious harm, neglect, physical abuse, sexual abuse, substantial child endangerment, threatened injury, and mental injury. For definitions refer to [Minnesota Statutes, section 260E.03](#), and pages 3-6 of this document. Maltreatment must be reported if you have witnessed or have reason to believe that a child is being or has been maltreated within the last three years.

Who must report

- If you work in a licensed facility, you are a "mandated reporter" and are legally required (mandated) to report maltreatment. You cannot shift the responsibility of reporting to your supervisor or to anyone else at your licensed facility.
- In addition, people who are not mandated reporters may voluntarily report maltreatment.

Where to report

- If you know or suspect that a child is in immediate danger, call 9-1-1.
- Reports concerning suspected maltreatment of children, or other violations of Minnesota Statutes or Rules, in facilities licensed by the Minnesota Department of Children, Youth, and Families, should be made to the DCYF Central Intake line at 651-539-8222.
- Incidents of suspected maltreatment of children occurring within a family, in the community, at a family child care program, in a child foster residence setting, or in a child foster care home, should be reported to the local county social services agency at [1-651-385-3200](#) or local law enforcement at [Goodhue County Sheriff -651-385-3155](#).
- Reports concerning suspected maltreatment of a child related to a Children's Residential Facility (CRF), Home and Community Based Services (HCBS), or a Substance Use Disorder (SUD) Treatment facility should be made to the Minnesota Department of Human Services.
- Reports concerning suspected maltreatment of a child in a Psychiatric Residential Treatment Facility (PRTF) should be made to the Minnesota Department of Health, Office of Health Facility Complaints at health.ohfc-complaints@state.mn.us.

When to report

- Mandated reporters must make a report to one of the agencies listed above immediately (as soon as possible but no longer than 24 hours).

Information to report

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

Failure to report

- A mandated reporter who knows or has reason to believe a child is or has been maltreated and fails to report is guilty of a misdemeanor.
- In addition, a mandated reporter who fails to report serious or recurring maltreatment may be disqualified from a position allowing direct contact with, or access to, persons receiving services from programs, organizations, and/or agencies that are required to have individuals complete a background study by the Department of Human Services as listed in [Minnesota Statutes, section 245C.03](#).

Retaliation prohibited

- An employer of any mandated reporter is prohibited from retaliating against (getting back at):
 - an employee for making a report in good faith; or
 - a child who is the subject of the report.
- If an employer retaliates against an employee, the employer may be liable for damages and/or penalties.

Staff training

The license holder must train all mandated reporters on their reporting responsibilities, according to the training requirements in the statutes and rules governing the licensed program. 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 142B.10, subdivision 21](#).

Provide policy to parents

For licensed child care centers, the mandated reporting policy must be provided to parents of all children at the time of enrollment and must be available upon request. The definitions section (p. 3-6) is optional to provide to parents.

The following sections do not apply to family child foster care per [Minnesota Statutes, section 142B.54, subd. 1](#).

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:
 - related policies and procedures were followed;
 - the policies and procedures were adequate;
 - there is a need for additional staff training;
 - the reported event is similar to past events with the children or the services involved; and
 - 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 reviews completed

The internal review will be completed by Heather Schuster/Pam Bakken [REDACTED]. If this individual is involved in the alleged or suspected maltreatment, Ruthie Welgemoed 507-884-9107 [REDACTED] will be responsible for completing the internal review.

Documentation of 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 to correct any current lapses and prevent future lapses in performance by individuals or the license holder.

Definitions

Found in [Minnesota Statutes, section 260E.03](#)

Egregious harm ([Minnesota Statutes, section 260E.03, subd. 5](#))

"Egregious harm" means harm under [section 260C.007, subdivision 14](#), or a similar law of another jurisdiction.

From [section 260C.007, subdivision 14](#):

"Egregious harm" means the infliction of bodily harm to a child or neglect of a child which demonstrates a grossly inadequate ability to provide minimally adequate parental care. The egregious harm need not have occurred in the state or in the county where a termination of parental rights action has proper venue. Egregious harm includes, but is not limited to:

1. conduct toward a child that constitutes a violation of sections [609.185](#) to [609.2114, 609.222, subdivision 2, 609.223](#), or any other similar law of any other state;
2. the infliction of "substantial bodily harm" to a child, as defined in section [609.02, subdivision 7a](#);
3. conduct toward a child that constitutes felony malicious punishment of a child under [section 609.377](#);
4. conduct toward a child that constitutes felony unreasonable restraint of a child under [section 609.255, subdivision 3](#);
5. conduct toward a child that constitutes felony neglect or endangerment of a child under [section 609.378](#);
6. conduct toward a child that constitutes assault under section [609.221, 609.222, or 609.223](#);
7. conduct toward a child that constitutes sex trafficking, solicitation, inducement, promotion of, or receiving profit derived from prostitution under [section 609.322](#);
8. conduct toward a child that constitutes murder or voluntary manslaughter as defined by United States Code, title 18, section 1111(a) or 1112(a);
9. conduct toward a child that constitutes aiding or abetting, attempting, conspiring, or soliciting to commit a murder or voluntary manslaughter that constitutes a violation of United States Code, title 18, section 1111(a) or 1112(a); or
10. conduct toward a child that constitutes criminal sexual conduct under [sections 609.342 to 609.345](#) or sexual extortion under [section 609.3458](#).

Maltreatment ([Minnesota Statutes, section 260E.03, subd. 12](#))

"Maltreatment" means any of the following acts or omissions:

1. egregious harm under subdivision 5;
2. neglect under subdivision 15;
3. physical abuse under subdivision 18;
4. sexual abuse under subdivision 20;
5. substantial child endangerment under subdivision 22;
6. threatened injury under subdivision 23;
7. mental injury under subdivision 13; and
8. maltreatment of a child in a facility.

Mental Injury ([Minnesota Statutes, section 260E.03, subd. 13](#))

"Mental injury" means an injury to the psychological capacity or emotional stability of a child as evidenced by an observable or substantial impairment in the child's ability to function within a normal range of performance and behavior with due regard to the child's culture.

Neglect ([Minnesota Statutes, section 260E.03, subd. 15](#))

- A. "Neglect" means the commission or omission of any of the acts specified under clauses (1) to (8), other than by accidental means:
 - 1. failure by a person responsible for a child's care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child's physical or mental health when reasonably able to do so;
 - 2. failure to protect a child from conditions or actions that seriously endanger the child's physical or mental health when reasonably able to do so, including a growth delay, which may be referred to as a failure to thrive, that has been diagnosed by a physician and is due to parental neglect;
 - 3. failure to provide for necessary supervision or child care arrangements appropriate for a child after considering factors as the child's age, mental ability, physical condition, length of absence, or environment, when the child is unable to care for the child's own basic needs or safety, or the basic needs or safety of another child in their care;
 - 4. failure to ensure that the child is educated as defined in sections [120A.22](#) and [260C.163, subdivision 11](#), which does not include a parent's refusal to provide the parent's child with sympathomimetic medications, consistent with section [125A.091, subdivision 5](#);
 - 5. prenatal exposure to a controlled substance, as defined in section [253B.02, subdivision 2](#), used by the mother for a nonmedical purpose, as evidenced by withdrawal symptoms in the child at birth, results of a toxicology test performed on the mother at delivery or the child at birth, medical effects or developmental delays during the child's first year of life that medically indicate prenatal exposure to a controlled substance, or the presence of a fetal alcohol spectrum disorder;
 - 6. medical neglect, as defined in section [260C.007, subdivision 6](#), clause (5);
 - 7. chronic and severe use of alcohol or a controlled substance by a person responsible for the child's care that adversely affects the child's basic needs and safety; or
 - 8. emotional harm from a pattern of behavior that contributes to impaired emotional functioning of the child which may be demonstrated by a substantial and observable effect in the child's behavior, emotional response, or cognition that is not within the normal range for the child's age and stage of development, with due regard to the child's culture.
- B. Nothing in this chapter shall be construed to mean that a child is neglected solely because the child's parent, guardian, or other person responsible for the child's care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care.
- C. This chapter does not impose upon persons not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care a duty to provide that care.
- D. Nothing in this chapter shall be construed to mean that a child who has a mental, physical, or emotional condition is neglected solely because the child remains in an emergency department or hospital setting because services, including residential treatment, that are deemed necessary by the child's medical or mental health care professional or county case manager are not available to the child's parent, guardian, or other person responsible for the child's care, and the child cannot be safely discharged to the child's family.

Physical abuse ([Minnesota Statutes, section 260E.03, subd. 18](#))

- A. "Physical abuse" means any physical injury, mental injury under subdivision 13, or threatened injury under subdivision 23, inflicted by a person responsible for the child's care on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child's history of injuries, or any aversive or deprivation procedures, or regulated interventions, that have not been authorized under section [125A.0942](#) or [245.825](#).
- B. Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or legal guardian that does not result in an injury. Abuse does not include the use of reasonable force by a teacher, principal, or school employee as allowed by section [121A.582](#).
- C. For the purposes of this subdivision, actions that are not reasonable and moderate include, but are not limited to, any of the following:
 1. throwing, kicking, burning, biting, or cutting a child;
 2. striking a child with a closed fist;
 3. shaking a child under age three;
 4. striking or other actions that result in any nonaccidental injury to a child under 18 months of age;
 5. unreasonable interference with a child's breathing;
 6. threatening a child with a weapon, as defined in [section 609.02, subdivision 6](#);
 7. striking a child under age one on the face or head;
 8. striking a child who is at least age one but under age four on the face or head, which results in an injury;
 9. purposely giving a child:
 - i. poison, alcohol, or dangerous, harmful, or controlled substances that were not prescribed for the child by a practitioner in order to control or punish the child; or
 - ii. other substances that substantially affect the child's behavior, motor coordination, or judgment; that result in sickness or internal injury; or that subject the child to medical procedures that would be unnecessary if the child were not exposed to the substances;
 10. unreasonable physical confinement or restraint not permitted under [section 609.379](#), including but not limited to tying, caging, or chaining; or
 11. in a school facility or school zone, an act by a person responsible for the child's care that is a violation under section [121A.58](#).

Sexual abuse ([Minnesota Statutes, section 260E.03, subd. 20](#))

"Sexual abuse" means the subjection of a child by a person responsible for the child's care, by a person who has a significant relationship to the child, or by a person in a current or recent position of authority, to any act that constitutes a violation of section [609.342](#) (criminal sexual conduct in the first degree), [609.343](#) (criminal sexual conduct in the second degree), [609.344](#) (criminal sexual conduct in the third degree), [609.345](#) (criminal sexual conduct in the fourth degree), [609.3451](#) (criminal sexual conduct in the fifth degree), [609.3458](#) (sexual extortion), or [609.352](#) (solicitation of children to engage in sexual conduct; communication of sexually explicit materials to children).

Sexual abuse also includes any act involving a child that constitutes a violation of prostitution offenses under sections [609.321](#) to [609.324](#) or [617.246](#). Sexual abuse includes all reports of known or suspected child sex trafficking involving a child who is identified as a victim of sex trafficking. Sexual abuse includes child sex trafficking as defined in section [609.321](#), subdivisions 7a and 7b.

Sexual abuse includes threatened sexual abuse, which includes the status of a parent or household member who has committed a violation that requires registration as an offender under section [243.166, subdivision 1b](#), paragraph (a) or (b), or required registration under section [243.166, subdivision 1b](#), paragraph (a) or (b).

Substantial child endangerment ([Minnesota Statutes, section 260E.03, subd. 22](#))

"Substantial child endangerment" means that a person responsible for a child's care, by act or omission, commits or attempts to commit an act against a child in the person's care that constitutes any of the following:

1. egregious harm under subdivision 5;
2. abandonment under section [260C.301, subdivision 2](#);
3. neglect under subdivision 15, paragraph (a), clause (2), that substantially endangers the child's physical or mental health, including a growth delay, which may be referred to as failure to thrive, that has been diagnosed by a physician and is due to parental neglect;
4. murder in the first, second, or third degree under section [609.185](#), [609.19](#), or [609.195](#);
5. manslaughter in the first or second degree under section [609.20](#) or [609.205](#);
6. assault in the first, second, or third degree under section [609.221](#), [609.222](#), or [609.223](#);
7. sex trafficking, solicitation, inducement, or promotion of prostitution under section [609.322](#);
8. criminal sexual conduct under sections [609.342](#) to [609.3451](#);
9. sexual extortion under section [609.3458](#);
10. solicitation of children to engage in sexual conduct under section [609.352](#);
11. malicious punishment or neglect or endangerment of a child under section [609.377](#) or [609.378](#);
12. use of a minor in sexual performance under section [617.246](#);
13. labor trafficking under sections [609.281](#) and [609.282](#); or
14. parental behavior, status, or condition that mandates that the county attorney file a termination of parental rights petition under section [260C.503, subdivision 2](#).

Threatened Injury ([Minnesota Statutes, section 260E.03, subd. 23](#))

- A. "Threatened injury" means a statement, overt act, condition, or status that represents a substantial risk of physical or sexual abuse or mental injury.
- B. Threatened injury includes, but is not limited to, exposing a child to a person responsible for the child's care, as defined in subdivision 17, who has:
 1. subjected a child to, or failed to protect a child from, an overt act or condition that constitutes egregious harm under subdivision 5 or a similar law of another jurisdiction;
 2. been found to be palpably unfit under section [260C.301, subdivision 1](#), paragraph (b), clause (4), or a similar law of another jurisdiction;
 3. committed an act that resulted in an involuntary termination of parental rights under section [260C.301](#), or a similar law of another jurisdiction; or
 4. committed an act that resulted in the involuntary transfer of permanent legal and physical custody of a child to a relative or parent under section [260C.515, subdivision 4](#), or a similar law of another jurisdiction.
- C. A child is the subject of a report of threatened injury when the local welfare agency receives birth match data under section [260E.14, subdivision 4](#), from the Department of Children, Youth, and Families.

CHEMICAL USE

GDALRDC is a smoke-free environment. GDALRDC prohibits smoking on our property. All caregivers at GDALRDC are prohibited from abusing prescription medication or being under the influence of a chemical that impairs the individual's ability to provide care. We will provide notification and training of said policy to all caregivers.

LOST/DAMAGED ITEMS

GDALRDC is not responsible for lost or damaged items brought from home. This includes clothing and outerwear. Please send your children in play clothing with a knowledge that we encourage creative play that may damage clothing. We will do our very best to ensure that any personal belongings find their way back to you in the same condition. ALL items brought from home must be properly labeled.

DAMAGE TO PROPERTY

We understand that items may be broken or damaged in normal playtime activity. However, if we determine the damage caused by your child is excessive or the result of intentional misuse, it is the responsibility of the child's parent/guardian to pay for the repair/replacement of the item(s) immediately. No more than two weeks after the incident. If damage occurs that requires you to replace or repair GDALRDC property; management will discuss the damage and how to proceed. Your signatures on this handbook indicate that you are aware of this policy and will pay for the damages.

COMMUNICATION AND GRIEVANCES

If you are dissatisfied with some aspects of the services we provide, please bring the concern to our attention in a timely manner. Most likely we can work together to find a meaningful solution. If your grievance is with a staff member, please attempt to resolve (the matter) directly with the staff member. Our staff are expected to be professional and willing to work out differences.

If, after speaking with staff, your grievance remains unresolved, please follow these steps:

- communicate your grievance to a manager.
- Communicate your grievance with Head of Operations.
- As a final step, you can contact the Department of Human Services, Division of Licensing at (651)-431-6015.

We must be able to work together to make your child's time at GDALRDC enriching and memorable. The basis on which we, providers, and parents, must work together is trust. It is essential that we discuss our varied opinions as well as your child's stories of success and achievements.

IN-HOUSE ACTIVITIES

Developmental activities are an important part of your child's physical and social growth. Our activities are informally scheduled to meet the needs of your child. We offer activities that vary from quiet to active; and can be teacher-directed or child-initiated. We offer thoughtful learning opportunities that include a variety of activities for your child such as story time, arts and crafts, small muscle activities (puzzles, blocks), daily outdoor play (weather permitting), gym, large muscle activities, individual quiet time, and free play.

Studies have shown that PLAY is one of the most important components of early childhood learning. We will offer learning opportunities that develop creativity, imagination, and basic numerical and alphabetical skills.

Infants will be provided with age appropriate and curriculum guided one-on-one interactions utilizing toys that stimulate muscle and brain growth.

HANDBOOK PURPOSE

GDALRDC has established guidelines included in this parent handbook to help parents understand our goals and expectations. If you have any additional questions or concerns, please feel free to contact us and we will be happy to work with you.

CONTACT US

For financial statements or billing questions:

Ruthie Welgemoed
Head of Operations & Marketing
[达尔dc@gmail.com](mailto:g达尔dc@gmail.com) OR 507-824-5107

For all other inquiries:

Manager, Pam Bakken – pam.g达尔c@gmail.com
Manager, Heather Schuster – heather.g达尔c@gmail.com

TELL US ABOUT YOUR CHILD

This page must be filled out for DHS regulations. We will send home a form with your child annually to update.

Eating Habits-

Sleeping Habits-

Toileting-

Communication-

Comforting Habits-

Birthmarks or Skin Ailments (Mongolian birthmark, Epidermolysis Bullosa, Psoriasis, etc)

Anything Else You Would Like Us to Know:

The following questions are **IMPORTANT!**

Does Your Child Have an IEP (Individualized Education Program) Through the School District?

Circle Yes or No.

If Yes, Please Describe-

TELL US ABOUT YOUR CHILDS ALLERGY!

IF THERE IS MORE THAN 1 KNOWN ALLERGY, PLEASE FILL OUT A SEPREATE FORM FOR EACH ALLERGY.

PLEASE FILL OUT A SEPARATE PAGE FOR EACH CHILD IN A FAMILY.

NAME: _____ DATE _____

Name of allergy _____

1. A description of the allergy:

2. Specific triggers:

3. Avoidance techniques:

4. Symptoms of an allergic reaction:

5. Procedures for responding to an allergic reaction, including medication:

6. Procedures for responding to an allergic reaction, including dosages:

7. Procedures for responding to an allergic reaction, including doctor's contact:

[Clear Form](#)



OFFICE OF INSPECTOR GENERAL - LICENSING DIVISION



8-25

Individual Child Care Program Plan For Licensed Child Care Centers

DATE OF ICCPP	PROGRAM NAME		LICENSE NUMBER
CHILD'S FIRST NAME	MI	LAST NAME	DATE OF BIRTH

Type of individual need

This ICCPP is being developed because (Select one, if both are true please use an additional form):

Child has a known allergy/allergies (See [Minnesota Statutes, chapter 142B.66, subdivision 1](#))
 Child has special needs requiring an ICCPP (See [Minnesota Rules, part 9503.0065, subpart 1 A](#))

Allergy information

ALLERGY 1 Describe the allergy. Allergies with similar symptoms can be listed together. Additional section(s) can be added for multiple allergies with different triggers, symptoms, and techniques.
What triggers the allergy? Allergy triggers are what cause the allergic reaction (e.g., eating the allergen, touching the allergen, inhaling the allergen, etc.).
All symptoms below may be experienced when exposed to an allergen. Please select any known symptoms the child may display: <input type="checkbox"/> No history of symptoms or unknown <input type="checkbox"/> Mouth: Itching; tingling; swelling of lips, tongue or mouth ('mouth feels funny') <input type="checkbox"/> Skin: Hives; itchy rash; swelling of the face or extremities <input type="checkbox"/> Gut: Nausea; abdominal cramps; vomiting; diarrhea <input type="checkbox"/> Throat: Difficulty swallowing; hoarseness; hacking cough <input type="checkbox"/> Lungs: Shortness of breath; repetitive coughing; wheezing <input type="checkbox"/> Heart: Weak or fast pulse; low blood pressure; fainting; pale; blueness <input type="checkbox"/> Other: IF NEEDED, PLEASE LIST ANY ADDITIONAL INFORMATION REGARDING SYMPTOMS
What techniques will be used to avoid an allergic reaction? Specifically, state how the center will prevent an allergic reaction (i.e., how the center will ensure the allergen is not present at the center, how the center will ensure the child does not come in contact with the allergen, etc.).
What procedures will be taken to respond to an allergic reaction for this child?

[Add allergy](#)

Medications for responding to an allergic reaction

Are medications required for response to an allergic reaction for this child? Yes No

Medication administration requirements (permission to administer, when and how to administer, and documentation of administration) must be followed according to [Minnesota Rules, part 9503.0140, subpart 7](#). The medication and dosage information documented here does not fulfill those requirements.

Per [Minnesota Statutes, chapter 142B.66, subdivision 1](#), the license holder must:

- Contact the child's parent or legal guardian as soon as possible in any instance of exposure or allergic reaction that requires medication or medical intervention; and
- Call emergency medical services when epinephrine is administered to a child in the license holder's care.

Doctor information - Call 911 for EMERGENCIES

DOCTOR NAME	DOCTOR PHONE NUMBER
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Allergy information available at all times

A child's allergy information must be available at all times, including on-site, when on field trips, or during transportation. Food allergy information must be readily available to a staff person in the area where food is prepared and served to the child per [Minnesota Statutes, chapter 142B.66, subdivision 1](#).

[Minnesota Rules, part 9503.0125](#) states that license holders shall not disclose a child's record without parent permission.

If the center posts child's allergy information in a location visible to others in the program, parental permission is required.

By checking "I agree" and typing my name in the "Electronic Signature" field, I understand that I am electronically signing this form. In addition, I attest and certify that I have verified the above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

I give permission for the provider to post my child's name, allergy information, and treatment information in a place visible to others at the program.

<input type="checkbox"/> I agree	PARENT ELECTRONIC SIGNATURE (type name)	DATE
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By checking "I agree" and typing my name in the "Electronic Signature" field, I understand that I am electronically signing this form. In addition, I attest and certify that I have verified the above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

I give permission for the provider to post my child's photo with the allergy information in a place visible to others at the program.

<input type="checkbox"/> I agree	PARENT ELECTRONIC SIGNATURE (type name)	DATE
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Staff caring for the child

The following staff have reviewed the initial ICCPP and agree to follow the plan.

Print Staff Name	Signature	Date

[Add staff](#)

In [Minnesota Statutes, chapter 142B.65](#), staff training requirements for ICCPPs must be followed. Orientation must include training required by a child's individual child care program plan as required under Minnesota Rules, part 9503.0065, subpart 3, if applicable; and in-service training must include training on a child's individual child care program plan as required under Minnesota Rules, part 9503.0065, subpart 3.

Complete below for changes and yearly review only

Yearly review and changes for ICCPP – Allergy

Individual Child Care Program Plan - Allergy is to be reviewed at least once each calendar year or following any changes per [Minnesota Statutes, chapter 142B.66, subdivision 1\(c\)](#).

No changes at yearly review **Changes at yearly review or as needed**

**Does Your Child Have special needs requiring an ICCPP (Individual Child Care Program Plan)
Circle Yes or No.**

Please use the form below:

[Clear Form](#)



OFFICE OF INSPECTOR GENERAL - LICENSING DIVISION



8-25

Individual Child Care Program Plan For Licensed Child Care Centers

DATE OF ICCPP	PROGRAM NAME		LICENSE NUMBER
CHILD'S FIRST NAME	MI	LAST NAME	DATE OF BIRTH

Type of individual need

This ICCPP is being developed because (Select one, if both are true please use an additional form):

Child has a known allergy/allergies (See [Minnesota Statutes, chapter 142B.66, subdivision 1](#))
 Child has special needs requiring an ICCPP (See [Minnesota Rules, part 9503.0065, subpart 1A](#))

Check all that apply:

Child has developmental disabilities.
 Child has an IEP/IFSP/ISP/504.
 Licensed physician, psychiatrist, licensed psychologist or licensed consulting psychologist has determined the child has a special need relating to physical, social, or emotional development. Examples could include seizure disorder, asthma, diabetes, feeding tube, or child is receiving outside services/physical or occupational therapy.

Describe the special need.

What modifications, accommodations, or restrictions are needed while the child is engaged in classroom, curriculum, and routine activities (i.e. nap, toileting, mobility, meals)?

What modifications, accommodations, or restrictions are needed for outdoor play, field trips, or transportation?

What training, staffing, or materials are needed to support the above modifications, accommodations, or restrictions?

ICCPP consultation

The ICCPP must be coordinated with any ISP, IEP, IFSP, 504 plans, and reports from the licensed physician, licensed psychiatrist, licensed psychologist, or licensed consulting psychologist, per [Minnesota Rules, part 9503.0065, subpart 3](#).

By checking "I agree" and typing my name in the 'Electronic Signature' field, I understand that I am electronically signing this form. In addition, I attest and certify that I have verified the above is true and accurate. I understand that my electronic signature has the same legal effect and can be enforced in the same way as a handwritten signature. (MN Stat. §325L.07)

Additional reports/documentation from the consulting professional are attached

If the reports/documentation are current and coordinated with this ICCPP, the consulting professional signature is not required.

<input type="checkbox"/> I agree	CONSULTING PROFESSIONAL ELECTRONIC SIGNATURE (type name)	DATE
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<input type="checkbox"/> I agree	OPTIONAL PARENT ELECTRONIC SIGNATURE (type name)	DATE
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Staff caring for the child

The following staff have reviewed the initial ICCPP and agree to follow the plan.

Print Staff Name	Signature	Date
<input type="text"/>		

[Add staff](#)

Staff training requirements for ICCPP must be followed:

- In [Minnesota Statutes, chapter 142B.65](#), orientation must include training required by a child's individual child care program plan as required under Minnesota Rules, part 9503.0065, subpart 3, if applicable; and in-service training must include training on a child's individual child care program plan as required under Minnesota Rules, part 9503.0065, subpart 3.
- In [Minnesota Rules, part 9503.0065, subpart 5](#), the license holder must ensure that any additional staff, staff qualifications, or training required by the child's individual child care plan are provided.

Complete below for changes and yearly review only

Yearly review and changes for ICCPP – Special Need

Individual Child Care Program Plan - Special Need is to be reviewed at least once each calendar year or when updates are needed per [Minnesota Rules, part 9503.0065, subpart 3](#).

No changes at yearly review **Changes at yearly review or as needed**

EMERGENCIES

I hereby grant permission to the Golden days & Little Rays Daycare staff to act in a medical emergency and for appropriate medical staff to administer emergency medical treatment to my child. I agree to be responsible for any charges which may occur because of any treatments administered to my child. I give permission to the Golden Days & Little Rays Daycare staff to call 911 on behalf of my child in a medical emergency.

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

FIELD TRIPS

Walks around the neighborhood and walking fieldtrips will be offered to all ages. Additional costs may be charged to parents to cover field trip costs. During walks around the general Wanamingo area, parent and doctor phone numbers will be carried with staff, along with a first aid kit. We will provide appropriate strollers or wagons for your children as needed. Staff will also carry cellular phones in case of emergency.

I understand that GDALRDC staff may periodically choose to take my child/children for field trips or educational trips. I will be notified in advance of any upcoming field trips.

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

IMPROMPTU WALKS/ WALKING FIELD TRIPS

I hereby give my permission for my child to go on impromptu walking field trips in the neighborhood with their class and Golden Days & Little Rays Daycare Staff.

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

SPONTANEOUS GENERAL PERMISSION

I hereby give my permission for my child to participate in outdoor snacks and outdoor spontaneous learning times. Examples of spontaneous activities include but are not limited to:

Picnic lunch or snack outdoors, circle time, floor picnic indoors, walking in the rain, picking up leaves and sidewalk chalk on a walk.

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

BLANKET/COT PERMISSION (FOR 16 MONTHS+)

We do not allow blankets in the crib with infants. When children are 16 months old or older, they will be allowed to sleep with a blanket on a cot. I hereby acknowledge and give permission for my child who is at least 16 months old, to sleep with a blanket and a center-provided cot.

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date
Child's Name	Date

MEDIA DISCLOSURE AGREEMENT

I understand that the staff of GDALRDC may periodically take individual and group photographs or videos of the children enrolled in GDALRDC for the purpose of sharing special daily moments or memories directly with parents. This is done through our secure PROcare application. You will receive an invitation upon enrollment.

Also, from time-to-time GDALRDC may post pictures of special activities or field trips on the childcare social media outlets which include, the GDALRDC Facebook & website.

I give permission for GDALRDC to display photos of my child in classrooms, entryways, photo books, and cd/DVD slideshows or general GDALRDC Public Relations.

We encourage parents to be active on our social media sites.

- Facebook:
<https://www.facebook.com/p/Golden-Days-Little-Rays-Daycare-Activities-Center-61576375164724/>
- Facebook: You will not be tagged.
Golden Days & Little Rays Daycare

**Please note that your child's information or image will never be used for experimentation or research.*

**Please notify a member of GDALRDC Management Staff if you have any questions or specific preferences.*

Parent/Guardian Signature	Date
Parent/Guardian Signature	Date

ITEMS WE CANNOT USE OR ALLOW HERE

- Amber teething necklaces, jewelry of any kind excluding earrings for children 2 and under regardless of religious beliefs.
- Glass bottles or glass food containers from home
- Pacifiers with stuffed animals on them
- Hair pieces that could be choking hazards. Hair pieces need to be tight fitting. No beads.
- Essential oils or non-prescription vitamins
- Sleep-sacks that swaddle or have the capability to swaddle. Sleep sacks that resemble snow suits. Weighted Sleep-sacks (unless doctors note provided)

GDALRDC ADMISSION AND ARRANGEMENTS FORM			
Child's Full Name: (First, Middle, Last)			
Primary Address: City: State: Zip:			
Primary Parent/Guardian Name: Phone:			
Child's Date of Birth:	Child's Age:	Date enrolled in care:	
Special Concerns (Special Diet, Special Needs, Allergies)			
Medical Needs (health conditions, ongoing treatment, therapies or medication)			
Dental Information:			
I authorize GDALRDC staff to initiate First Aid/CPR if need arises			<input type="checkbox"/> Yes <input type="checkbox"/> No
I authorize GDALRDC staff to obtain EMERGENCY medical/dental care or treatment in the event of an emergency. (Cost of emergency treatment and emergency transportation is parent or guardian's responsibility)			<input type="checkbox"/> Yes <input type="checkbox"/> No
I authorize GDALRDC staff to apply sunscreen, diapering products, wipes, lotion, lip balm, bug spray (provided by parent) to my child as needed			<input type="checkbox"/> Yes <input type="checkbox"/> No
I grant permission for my child to walk to/participate in community activities geared for my child but away from the childcare center			<input type="checkbox"/> Yes <input type="checkbox"/> No
I authorize GDALRDC Health Consultant for Childcare to evaluate my child's enrollment forms during his/her routine review of Health Policies			<input type="checkbox"/> Yes <input type="checkbox"/> No
I authorize staff to administer <input type="checkbox"/> Acetaminophen and/or <input type="checkbox"/> Ibuprofen to my child for discomfort per physician's order			<input type="checkbox"/> Yes <input type="checkbox"/> No
I acknowledge that it is my responsibility as a parent/guardian to notify all new and existing allergies to GDALRDC.			<input type="checkbox"/> Yes <input type="checkbox"/> No
I will notify GDALRDC via PROcare App and verbally to the Manager on duty within 24 hours of any changes.			<input type="checkbox"/> Yes <input type="checkbox"/> No
I grant permission to GDALRDC to take appropriate emergency measures (for example first aid or disaster evacuation) deemed necessary for the care and protection of my child while under the supervision of GDALRDC. In case of a medical emergency, I understand that my child may be transported to the nearest medical facility by the local emergency unit for treatment if deemed necessary by staff or emergency responders. The child will be transported at the parents' expense. It is understood that in some medical situations, Golden Days & Little Rays Daycare Center will need to contact the local emergency resource before the parent and/or child's physician. Parent Signature _____ Date _____			
Parent/Guardian Information	PARENT/GUARDIAN	PARENT/GUARDIAN	
Name			
Home Address			

Name & Address of Place of Employment					
Cell & Home Phone	Cell	Other	Cell	Other	
Work Phone & Best Email Address	Work		Work		
Email Address, PLEASE WRITE CLEARLY	EMAIL		EMAIL		
EMERGENCY CONTACTS/PERSONS AUTHORIZED TO REMOVE CHILD FROM GOLDEN DAYS & LITTLE RAYS DAYCARE CENTER List TWO Responsible friends/relatives to call if parents cannot be reached					
Name:			Phone:		
Relationship:			Secondary phone:		
Full address including zip code:					
Name:			Phone:		
Relationship:			Secondary phone:		
Full address including zip code:					
Names of any/all persons, in addition to the above, authorized to remove child from center					
Persons not allowed authorized pickup _____ Copy of court order required if a biological parent is not allowed to pick up child					
EMERGENCY MEDICAL CONTACT INFORMATION FOR CHILD					
Physician's name:					
Physician's telephone:			Physician's fax:		
Physician's full address including zip code:					
Preferred Hospital to be used for emergencies:					
If unavailable, another licensed physician may treat my child: <input type="checkbox"/> Yes <input type="checkbox"/> No			Medical insurance company:		Contract #:
Emergency Dental Contact Information for CHILD THIS Section must be completed regardless of child's age					
If you do not have a dentist, we ask that you list Midwest Dental 320 22nd St. Zumbrota, MN 55992 507-732-5346					
Dentist's name:					
Dentist's telephone:			Dentist's fax		
Dentist's full address including zip code:					
If Unavailable, Another Licensed Dentist may treat my child: <input type="checkbox"/> Yes <input type="checkbox"/> No			Dental Insurance Company:		Contract #:
ARRANGEMENTS					
Financial Arrangements	\$	Paid weekly		\$ _____ initial Reg Fee Deposit additional	
Services Provided (including Days, Hours) (Select days & list times) <input type="checkbox"/> Mon <u> </u> <input type="checkbox"/> Tues <u> </u> <input type="checkbox"/> Wed <u> </u> <input type="checkbox"/> Thurs <u> </u> <input type="checkbox"/> Fri <u> </u>					
We, the undersigned, hereby agree to abide by the arrangements and authorizations stated above. We have discussed the information required in DHS Rule 3 parts 9503.0005 to 9503.0170					
Signature of parent/guardian		Date			
Signature of parent/guardian		Date			
Signature of Manager		Date			

HANDBOOK ACKNOWLEDGEMENT

Your signature on this page of the handbook serves as your acknowledgment that you have read, understand, and agree to adhere to the policies and procedures included in this parent handbook.

Signature of parent/guardian	Date
Signature of parent/guardian	Date