



# WSU CHILDREN'S CENTER FAMILY HANDBOOK

Growing Hearts, Hands, and Minds since 1973

**Mission:**

The WSU Children's Center provides early childhood education and care for children and families affiliated with Winona State University and the surrounding community by:

- Providing early education and care for young children and their families
- Mentoring university students seeking licensure in education and related fields
- Creating relationships and sharing resources with practicing early childhood professionals in the Winona area

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**By Federal Law and U.S. Department of Agriculture policy, this institution prohibits discrimination.**  
(For a full civil right statement and contact information, please see the last page of this document.)

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## **Definitions:**

**Director:** Childcare managerial position.

**Lead Teacher:** The full-time licensed teacher assigned to classroom(s).

**FA:** Family Alliance – Parent/guardians coordinating support for Center projects, connections with new families, social gatherings throughout the year.

**Parent/Guardian** Legal guardian or current adult caring for a child. This person may or may not be related to the child - a parent, foster parent, grandparent, aunt or uncle, cousin, friend of the family, or any other relationship to the child.

**Student Employee:** Winona State University students working in a classroom with Lead teacher supervision.

**Teacher:** All employees working in the classroom providing direct care to children.





## Welcome and Program Philosophy

The WSU Children's Center has provided early education and care programs since 1973, centering on the healthy growth and development of children and their families. The connection between home and school is dynamic during the first years of life, a time when children acquire skills and abilities that shape learning for the rest of their lives. The WSU Children's Center's licensed teachers and trained staff update and improve the experiences and resources offered to children and families. All families are valued members of the WSU community of learners.

This Family Handbook includes program philosophy, policies, and procedures that ensure your child's education, health, and safety at the WSU Children's Center. We look forward to working with you during these formative years of your child's life.

### Our Philosophy

The WSU Children's Center's program philosophy for children and their families utilizes research and best practice in the early childhood field. Drawing from historical and emerging early childhood theories, we support each child's development by intentionally focusing on the relationships, environment, and activities that shape their lives.

### Mission Statement

The WSU Children's Center provides early childhood education and care for children and families affiliated with Winona State University and the surrounding Winona community by:

- Providing early education and care for young children and their families
- Mentoring university students seeking licensure in education and related fields
- Creating relationships and sharing resources with practicing early childhood professionals in the Winona area.

To help meet this mission, and our goals, the WSU Children's Center has developed several tools and a process which acknowledges the diverse cultures and learning styles represented by the Center families and insures positive outcomes for all children in our program. By using the Creative Curriculum, TS Gold, Conscious Discipline, Minnesota Early Learning Standards, and NAEYC's Developmentally and Culturally Appropriate Practice as a framework for planning and assessment, we assure that children have daily developmental opportunities in all domains; social, emotional, language, aesthetic, math/science, and large and fine motor skills. This integrated curriculum approach is initiated by paying attention to children's interests as well as seeking additional information about them from both children and their families. This approach helps provide endless topics for discovery and encourages positive learning outcomes for all children.

The WSU Children's Center program plan is developed and evaluated annually by Lead Teachers to ensure accuracy and up-to-date information regarding best practices in early childhood education.

The WSU Children's Center has developed a set of goals and objectives for what we intend to accomplish with the children in our care.

**Relationships:** Strong, caring relationships provide a foundation for healthy social and emotional well-being in young children. Teachers encourage parents to partner with them to observe and understand their child's emerging interests and skills in the context of home, school, and community by providing each age group with appropriate interactions to help children feel secure with other people and their surroundings. As children grow, they gain the ability to express and control their emotions, be self-reliant, and form friendships with others. The Children's Center teaching staff nurtures and guides children as they acquire these lifelong skills.

**Environment:** Each indoor and outdoor learning space is prepared to invite activity and support developmentally appropriate experiences. A variety of indoor and outdoor spaces allows for small and large group interactions essential to the ongoing cognitive, physical, and social growth of developing children. Daily schedules include routines to actively engage children in all learning environments within the Center.

**Activities:** Children's natural curiosity leads classroom learning as they explore and expand their understanding of the world. Teachers use their knowledge, observation skills, and information from parents, to create a classroom climate that encourages social, emotional, cognitive, and physical learning.

The WSU Children's Center is committed to providing an early education and care environment that engages all children and their families during these foundational years of childhood.

## General Program Information and Practices

The following agencies provide legal and comprehensive guidelines, under which the WSU Children's Center operates.

- Accredited by the National Association for the Education of Young Children (NAEYC)
- Licensed by the State of Minnesota Department of Human Services (DHS)
- MN Board of Teaching
- 4-Star rated by the Minnesota Parent Aware childcare quality rating system (Note: 4-Star is the highest available rating).
- MN Department of Health

The Minnesota Department of Health monitors the Center annually to review food service facilities and practices. By participating in the Federal Child and Adult Care Food Program (CACFP), the United States Department of Agriculture monitors all parts of our nutrition and food service activities. Classroom teachers meet all licensing requirements of the Minnesota Board of Teaching to maintain their teaching license. Rigorous training required by the MN Department of Human Services ensures that all staff is current in health, safety, sanitation, and the supervision of young children. A licensor representing the MN Department of Human services (DHS) conducts an annual license review and renewal is contingent on successfully meeting all DHS requirements for childcare licensure in the State of MN.

### Children Served

The WSU Children's Center provides care to the following age groups:

Age Group	Ages	Ratio
Infants	6 weeks – 18 months	1:4
Young Toddlers	12-28 months	1:7
Young Preschool	28-36 months	1:7
Preschool	36 months – kindergarten	1:10
School Age After School	Kindergarten – 2 <sup>nd</sup> grade	1:15
School Age Summer Care	Kindergarten – 2 <sup>nd</sup> grade	1:15

Children transition to the next age group when the teacher and parent agree they are developmentally ready and/or according to age.

### Center Staffing Practices

#### Professional Staff

Infant, Toddler, and Preschool classrooms are led by a MN licensed teacher with a B.S. in Early Childhood and Elementary Education. The School Age classroom is led by DHS Teacher Qualified student staff with support from a Pre-K licensed teacher.

#### WSU Student Involvement in the Classroom

The Center employs students as classroom assistants offering educational opportunities for observation and interaction with young children. Students pursuing degrees in early childhood and elementary education and other related fields are hired as staff or visit the classroom for one-hour observations,

thirty-hour practicums, student teaching, or internship experiences each semester. Children benefit from the enthusiasm, individual attention, and creativity the students bring to the classroom.

All WSU Children's Center staff complete a DHS background check and fingerprinting as well as MN DHS Rule 3 policy and procedure training prior to working with children. As of January 1, 2020, all staff are required to be Pediatric First Aid/CPR certified within three months of hire. All classroom volunteers and student teacher aides are supervised by a teacher qualified staff person with a current certificate in Pediatric First Aid/CPR when interacting with children.

### **Employing Student Staff for Personal Use**

Parents often hire student staff to meet their "after hours" childcare needs. University policy prohibits the WSU Children's Center from coordinating these connections; however, individually arranged childcare may occur independently between families and student staff.

### **Days and Hours of Operation**

Children's Center hours of operation are 7:00 a.m. - 5:00 p.m. Monday through Friday throughout the year except holidays and scheduled university breaks. All enrollments are full-time, and families submit a schedule each semester that reflects an arrival time between 7:00 am – 8:30 am. Pick-up times are typically anytime between 3:00 pm – 5:00 pm. The core program hours of 8:30 am – 11:30 a.m. include breakfast, circle time, and themed activities that follow a developmentally appropriate NAEYC (National Association of Young Children) approved morning program. The exception to this schedule occurs when inclement weather requires that the program either delay opening, or WSU closes campus. Closing and/or delays will be communicated via email and the WSU website as soon as a decision has been made. A WSU Children's Center calendar is distributed to families in July that includes scheduled holidays and family events for the upcoming year. Families are encouraged to participate in scheduled events sponsored by the WSU Children's Center staff and Family Alliance throughout the year. Family engagement is a vital feature of the unique partnership shared between home and school.

### **Enrollment Procedures**

Enrollment options in each age group are full-time only. An electronic wait list maintains all enrollment requests according to age eligibility and date of initial request with the following priorities:

1. WSU student parents enrolled in a minimum of six academic credits in a WSU undergraduate or a minimum of three credits in a WSU graduate degree program.
2. Families from the Winona State University community (faculty, staff, and administrators)
3. Families with a currently enrolled child.
4. Families from the Winona area.
5. Consideration will be given to families requesting enrollment for two or more children.

Before the first day of attendance, a child must have the following forms on file at the Center and participate in a Program Orientation with the director or designated WSU Children's Center representative. The list includes:

- Enrollment form plus the photo permission and data release statements
- Immunization Record
- Health summary signed by a physician.
- Family Size and Income Data Sheet for the Federal Child and Adult Food Program (CACFP)
- Personal Information Form (PIF) with signed releases and information (address & telephone) of 2 Emergency Contacts within a 30 mile radius authorized to pick up child if parent/guardian is unavailable.

As applies:

- Current court documents stating legal and physical custody arrangements.
- Individual Education Plan (IEP) or Individual Child Care Program Plan (ICCPP)
- Medically documented allergies (food, medicine, etc.) with signed authorization from a medical professional.

**Parents are responsible for communicating changes in contact information (cell phone, email, address, place of employment) to the WSU Children’s Center office manager and their child’s teacher.**

There is a \$50.00 registration fee at the time of enrollment.. When a child transitions to an older classroom, we require updated personal information form, health, and immunization information for the child.

Please contact the office manager via email at [childrenscenter@winona.edu](mailto:childrenscenter@winona.edu) or by phone at 507-457-2300 to report changes in a cell phone, email, or home address, place of employment, custody arrangements, allergy, or medical conditions.

### **Confidentiality**

The Center maintains all confidential information relating to children in secured files in the Center office. Teachers maintain a developmental portfolio recording each child’s progress and milestones occurring throughout the year. These files are accessible only to:

- Center administrators and lead teachers
- Federal or state program staff, including the MN Department of Human Services Licensor
- Child’s parent(s)/legal guardian(s)
- Upon Child Protection Court Order
- Others as designated by written parent/guardian permission.

Families receive the child’s portfolio when the child transitions to kindergarten. The university maintains children’s files in a secure online location for a required seven years and shreds or deletes documents when this time has passed.

Parent/guardians must give written permission to share information with other agencies/persons. This form is available in the Center office. State privacy law prohibits the sharing of information to protect all families and staff. We ask that parents refrain from asking for personal data about other children and families. There may be times when the Children’s Center Family Alliance invites families to share personal contact information to contact other Center families to arrange for social or center events; however, this is optional and not a requirement.

### **Supervision and Release of a Child**

We take the security of the children seriously and enforce the following to ensure the safety of all children in our care:

- All adults picking up a child must have a face-to-face interaction with a staff member upon arrival and at pickup to establish supervision responsibility.
- Never leave children unattended in the building entryway, outside the classroom, or alone in restrooms.
- Never remove a child from the Center without notifying a staff member in the classroom or supervised play area.
- The child’s enrollment form must include two authorized adults, other than parents, listed as emergency contacts. All children must arrive and depart with an authorized adult. Parents must provide written or verified verbal permission ahead of time when a person not listed on the

registration form will pick up a child from the Center. The sharing of information must be from person to person, not through voicemail. Documentation of the non-authorized adult must include the date, child's name, parent's name, and a brief physical description of the responsible person.

- Individuals must be 13 years of age or older to be authorized to pick up a child from the Center unless prior arrangements are made with the Center director.
- Any authorized adult picking up a child may be asked to present a picture I.D.
- Families with court ordered custody schedules must provide the center with current copies of the custody schedule. Only the custodial parent may authorize a child's release. Please inform the Center Director and your child's teacher of all custodial family issues.
- Staff will not release a child to an adult appearing to be under the influence of drugs or alcohol.

## Insurance

The State of Minnesota acts as the insurer for the Center. Individual policy or medical assistance coverage information must be on file for all children. The child's individual policy or medical assistance coverage is the primary source of insurance for accidents that occur at the Center. Providing this information is a DHS requirement.

## Parking

Infant, toddler, and young pre-k families are asked to drop -off and pick-up their child at Door 2 of Helble Hall. Older pre-k and school age families are asked to drop off and pick-up their child at Door 5 of Helble Hall. Temporary parking is available in the WSU Gold lot located on Sanborn St. entrance of Helble Hall when dropping off or picking up children. ***Please be aware that parking may be limited when WSU classes are in session.*** Additional 15-minute parking spots are available on Sanborn Street in front of Helble Hall along Lafayette Street.

## Personal Possessions

Please clearly mark all clothing and personal possessions with a first name and last initial or last name. Each child must bring the following items to keep at the Center:

- A complete change of seasonal clothing. It is the parent or guardian's responsibility to rotate clothing to adjust for size changes as your child grows throughout the year.
- A small blanket, pillow, and favorite sleeping doll or stuffed animal are allowed for rest time. All items must be taken home on Fridays (or the last day of your child's attendance each week) for washing and return on Monday.
- Outerwear appropriate for the weather including waterproof gloves/ mittens, snow pants and boots in the winter; children play outside every day, weather permitting. **Reminder – please send shoes for your child if they come in rain or snow boots.**
- Licensing requires that first and last names be marked with a permanent marker on disposable diapers, baby wipes, diaper rash cream, bottles, and training cups.

NOTE: Please do not bring toys, electronic devices, or books without discussing this with classroom teachers. These items may be difficult to share with other children and may be disruptive to other classroom activities. The Center is not responsible for lost or damaged items. Teachers often schedule a special share day for children throughout the year.

## Early Childhood Screening and Early Childhood Intervention

Winona Area Public Schools (WAPS) screening and early intervention staff provide support to teachers and families when young children experience developmental challenges. Parents are asked to make an Early Childhood Screening appointment at the WAPS Community Education office by calling (507) 494-0913 or going to <https://www.winonaschools.org/communityed/early-childhood/early-childhood-screenings> for more information. All children in District #861 participate in Early Childhood Screening at three years

of age. Pre-K classroom teachers will provide parents with a “Consent to Share” form to allow district personnel to share evaluation results with WSU Children’s Center staff. This information is useful and prevents us from repeating many of the activities used by the screening staff to gain developmental details about your child. Parents of children who are not in District #861 must work with their districts to identify screening protocols.

## **Scheduling, Billing, and Payment Policies**

### **Schedule and Contract Changes**

Schedule changes occur at the beginning of Fall semester and the start of summer session. The schedule change is in effect when the parent has signed the Contracted Enrollment Schedule and submitted it to the office manager with the date the new schedule is to begin.

If a child is ill, going on vacation, etc., and will miss a regularly scheduled day at the Center, please contact the classroom teacher or the Center office. Weekly billing amount(s) for these absences is unchanged according to the enrollment contract.

### **Billing Statements and Payment Policies**

Billing statements are for the next week of care. Billing statements posted on the family account reflect weekly charges one week before the provided care. The office manager emails a weekly statement to families with account transactions (charges and payments). **The WSU accounts manager reconciles payments on Fridays with payment required by the following Monday at noon.** Additional charges for a field trip, transition, late pickup fee and registration fees are added to the next week’s bill.

Families have a two-week window of service to pay their account in full. Late payments result in an email or text message reminder with three days allowed to clear an account. Failure to keep your account in good standing may result in a suspension of care for your child. The suspension will remain in effect for up to two weeks or until the account is cleared of past due charges. Neglecting to pay the balance during the two-week suspension period will result in forfeiture of childcare services at the Children’s Center. Re-entry requires placing your child’s name on the waiting list until an opening occurs in an age-appropriate classroom.

Families receiving childcare-subsidies from grants, state programs, or private donors, must pay their agreed upon co-pay every two weeks. Parents will work with the director and office manager to determine the amount of their weekly co-pay. The family will be responsible for paying charges over the agreed upon co-payment amount when the subsidies, grants, or state programs reduce payment amounts due to lack of attendance or funding.

Please send all billing or third-party payment questions to the Office Manager at 507-457-2307 or [www.childrenscenter.winona.edu](http://www.childrenscenter.winona.edu).

Please direct all questions or personal situations regarding tuition bills to the Children’s Center office, 507-457-2307 or contact the university accounts office at 507-457-5057 to make a payment with a credit card. The WSU Children’s Center office manager can send instructions to set up an account to ensure that all billing is current and up to date each week. Please contact her at [www.childrenscenter@winona.edu](mailto:www.childrenscenter@winona.edu) Payment by check or cash may be made in the main office or delivered at drop off and pick up.

## Registration and Transition Fee

The WSU Children's Center charges a \$50.00 registration fee per child at the time a family accepts enrollment. Fee will appear on the family account at the time of enrollment. This fee is *non-refundable and will not apply toward tuition.*

## Tuition Structure and Enrollment Contracts

**An annual increase in tuition fees is published in May for the upcoming fiscal year beginning July 1 of that year.** Each family confirms enrollment by completing a Schedule Contract Form prior to each semester. Please note there is no reduction in price for enrollment of multiple children.

### Weekly Fees

<b>FY25 Rates</b>	<b>Families</b>
<b>INFANT</b>	<b>\$277.00</b>
<b>TODDLER</b>	<b>\$258.00</b>
<b>PRE-K</b>	<b>\$233.00</b>
<b>SCHOOL AGE</b>	
Summer Care	<b>\$198.00</b>
After School Care	<b>\$68.00</b>

### Holiday Pro-rated Fees

When the WSU Children is closed for three or more days in one (Monday through Friday) week. The Pro-rated rates are as follows:

<b>FY25 Rates</b>	
<b>INFANT</b>	<b>\$167.00</b>
<b>TODDLER</b>	<b>\$155.00</b>
<b>PRE-K</b>	<b>\$140.00</b>
<b>SCHOOL AGE</b>	
After School	<b>\$41.00</b>

## Payment Methods

Payment for weekly charges can be made using one of the following methods:



1. **Pay Online:** If you would like to pay online, please contact the office for instructions on how to set this up. Email [childrenscenter@winona.edu](mailto:childrenscenter@winona.edu) or call: 507-457-2300 to have the instructions sent to you.
2. **Pay by Credit Card:** The WSU cashier's desk receives payments by calling 507-457-5057 or by visiting in person (209 Maxwell). Visa, Master, or Discover cards are accepted.
3. **Pay in person:** The WSU cashier's desk accepts personal checks, bank checks, money, or cash orders in person (209 Maxwell) or by mail to Box 5838; Winona, MN 55987.

## Additional Billing Information

- **Sickness and Absences:** Normal contract charges apply for non-attendance days due to illness and other absences, including absence due to COVID-19 illness.
- **Holidays and Breaks:** The Center closes for all legal holidays and days as noted on the fiscal year calendar posted on July 1<sup>st</sup>. Pro-rated charges are applied to any weeks the WSU Children's Center is closed for three or more days in a (Monday through Friday) week. Weekly contract charges apply for all other days when the Center is closed due to holiday or professional development days.
- **Vacation Days:** There is no allowance for family vacation days. All weeks are charged at the weekly rate.
- **Field Trips:** The weekly account reflects occasional field trip charges such as transportation, entrance fees, additional staff costs, etc. Charges will be applied after the field trip or other event has occurred.
- **Holding Fee:** Families may request to hold a spot for their child with Center director approval for the following circumstances:
  - A child has an extended illness or family emergency requiring the absence of two or more weeks of care. Tuition rates will be determined according to the individual emergency.
  - Families enrolled during the academic year but who elect to withdraw their child for the summer months are required to pay the published weekly tuition rate, to hold their spot during the summer months. Families are encouraged to enroll their child on a reduced schedule to maintain consistency for the child as full tuition payment is required for each family. Families who elect to withdraw their child for the summer will be placed on the wait list and risk losing a childcare spot in August. The summer schedule begins the Monday following commencement in May through the third week of August.
- **Late Pick-up Fee:** The WSU Children's Center closes at 5:00 pm. A late fee of \$25.00 per time will be charged unless prior arrangements have been made with the director or your child's teacher. Pick ups after 5:05 pm will also result in a \$5.00 charge to your account each time to support the staff salary cost of late care.
- **School Age Program Variations During the School Year:** School Age tuition is based on a per week charge. Contract charges apply for non-attendance days due to sickness and other absences such as doctor or dentist appointments. *There are no substitutions for absences.* After school care is provided from 2:30 pm – 5:00 pm daily when elementary schools are in session.
- **Withdrawal from Program:** All withdrawals require a two-week written notice with the account paid in full by the final day of enrollment.

## Summer Program and Enrollment

Children enrolled in the after-school program will be given priority to enroll in summer programming. Summer only enrollments are available once current children are placed.



# Creating Relationships—Home-School Connections

## Parent/Guardian – WSU Children’s Center Communication and Family Engagement Opportunities

Intentional communication between parents and employees is a hallmark of our program. Parents know their child’s strengths, interests, and needs best. We know that parents often have questions about their child’s development or progress in the classroom. Communication is at the heart of our program to connect routines, rituals, and transitions between home and school. The primary purposes of communication are to:

- share information that builds mutually beneficial relationships between parents and teachers, and
- advocate for ideas that help guide Center decision-making, like program enhancements, and fundraising activities.

Parents and teachers commit energy toward creating and maintaining an excellent early childhood environment. Your engagement with the WSU Children’s Center community supports and enhances the success for your child. The WSU Children’s Center uses STAR Alerts as the main app for communication purposes.

### STAR Alerts

The STAR Alert is the emergency notification system for the university community.

To receive WSU Alerts via text message, text STAR WINONA to 23177.

To receive a pop-up WSU Alert banner on your personal mobile device, download the Alertus + app, available for free in the App Store and in the Google Play Store, then follow these steps:

1. Enter the Organization Code “winona”
2. Enter a valid email address
3. Allow notifications.
4. Check your email for a notification from Alertus Mobile and click on the link to verify your account

To receive WSU Alert Notifications via Twitter, follow @AlertWinona.

### Parent Visits

A strong partnership with a child’s parent/guardian assists in creating a trusting and secure experience for the child. It is our policy to follow the guidelines established by our DHS license that allows parents of enrolled children access to their child throughout the day.

If you would like to visit during the day, we ask that you communicate with the child’s teacher to ensure that the visit does not coincide with your child’s meal or nap time.

### University and Community Partnerships

The WSU Children’s Center is a non-profit program serving children and families affiliated with the Winona State University (WSU) and Winona area communities.

WSU offers opportunities for children to engage in faculty led activities with university students in degree seeking programs. Examples include faculty supervised sessions with Children’s Literature students, PESS (Physical Education and School Sport), Early Childhood and Elementary Education guided practicum and CAST (Child Advocacy Studies Training) internships, and the Counselor Education Graduate degree program. Classroom teachers and

university professors supervise the activities and destroy documents (reflection papers, photos, digital recordings) at the end of the semester.

Classroom teachers inform parents at the beginning of each semester if the daily schedule will include university or WAPS (Winona Area Public School) partnerships. Parents complete a permission waiver at the time of enrollment and may request to have their child exempt from participating or featured in photos or videotaped documents during partnership sessions.

Winona Senior High School (WSHS) students, enrolled in the Service-Learning or Child Development classes, apply for semester placements and are supervised by the licensed teacher in the classroom.

## Program Curriculum, Assessment, Inclusion, and Transition Plans

The WSU Children's Center Program and Assessment Plan are reviewed and sent to the MN DHS licensor for approval each year. The full program plan is available for review by request in the Center office or via email at [childrenscenter@winona.edu](mailto:childrenscenter@winona.edu).

### Program and Curriculum

Complimenting the diverse cultures and beliefs represented by the families in our program, we support an approach to learning that fosters understanding, celebrates differences, and the people who inhabit our world. Using Conscious Discipline, Creative Curriculum, and the Minnesota Early Childhood Indicators of Progress (ECIP) as a framework for planning and assessment, we ensure that children have social/emotional skills, language, creative, math/science, and motor skill development opportunities.

The classroom environment and a daily schedule allow for active investigation and experimentation using a variety of interesting materials and equipment. Typical learning centers include blocks, creative art, dramatic play, library/writing, math/science, sensory, and outdoor play. Children have both free choice and teacher-directed opportunities to practice life skills that include hand washing, dressing, eating, and social etiquette with others.

The following is a list of activities that occur in every classroom throughout the day in a format that matches the developmental capabilities of the children:

- **Activity Time:** Children choose from learning centers--art, math manipulatives, puzzles, science, language, writing, dramatic play, reading, and block construction.
- **Circle Time:** Children gather for conversation, sharing, stories, or practice new lessons learned throughout the day.
- **Small Groups:** Children divided into groups by age, developmental abilities, and/or and interest for stories or activities.
- **Gym or Outdoors:** Children are given the opportunity for large muscle activities through organized games and supervised indoor and outdoor free play.
- **Snack Time:** Children take turns preparing and setting up snacks. A variety of healthy food is offered each day.
- **Rest Time:** Children nap or have a 30-minute rest time as required by our MN DHS license. After thirty minutes children who are not napping are offered quiet activities until the group is together again for an afternoon snack.

**Communication:** Your child's teacher is your primary contact for information related to your child's classroom experience. Teachers may share lesson plans that include descriptions of activities planned. They may also periodically send newsletters.

A Children's Center newsletter is sent quarterly (Fall, Winter, Spring, and Summer) or as needed when information related to the program needs to be shared with families and staff.

### Inclusion of Children with Special Needs

The WSU Children's Center welcomes children of all abilities in our classrooms. The teachers work closely with parents to help access available resources for children exhibiting special social and/or learning needs. New parents are asked to complete a "Consent to Share" form to allow medical and Early Childhood Special Education (ECSE) personnel from Winona Area Public Schools (WAPS) to communicate with Center staff. An Individual Education Plan (IEP) establishes instructional goals for the child in his/her classroom. At the time of referral from Early Childhood Special Education (ECSE), parents and staff receive additional information about the intervention process. We also use an Individual Child Care Program Plan (ICCPP) when a child has specialized needs not addressed in an IEP.

## Special Program Considerations

**Pets and Animals:** Classrooms may have small pets in the classrooms or friendly animals may visit the center. These visits will be announced in advance by the teacher. In the case of a child(ren) with allergies, pets would be permanently removed from the classroom. Typical classroom pets include hamsters, gerbils, or fish.

**Field Trips:** Field trips consist of neighborhood walks to nearby places.

**Swimming and Water Play:** Teachers supervise water play closely both indoors and outside. Parents are alerted when outdoor play includes the need for swimming suits, towels, or special shoes.

**Bike Day:** During summer months, preschool and school age children may bring bikes and helmets to the center for supervised riding on designated Bike Day. The Center has a designated location for bikes and procedures for securing them. Helmets are required and bikes must return home at the end of each day. Please label helmets and share bike codes/keys with your child's teacher.

**Sunscreen, Insect Repellent & Chapstick:** Parents sign a group permission form each summer to allow the application of a sunscreen to be applied before outside play an insect repellent or chapstick if requested by parents. The WSU Children's Center offers an unscented hypoallergenic sunscreen brand. Families are welcome to provide their own brand of product with a signed medical permission form on file and clearly labeled with their child's first and last name.

## Assessment Practices

Carefully observing and recording each child's developmental progression in his/her portfolio creates a rich picture of each child's development. This information is shared with parents through regular conversations and formal conferences twice a year. Student portfolios follow the child as they grow and transition between classrooms and age levels.

The individual portfolio works in tandem with the electronic assessment portfolio illustrating each child's development through a collection of anecdotal records and work samples. Teachers use these tools to help form individual goals for each child and plan meaningful curricular experiences. The electronic portfolio observations are categorized according to state standards and can be used by teachers to assess both individual and group progress. Through careful review of documents, teachers plan meaningful lessons for each group and the individual child.

In addition to the electronic and paper collections, formal instruments complement the authentic assessment documents in the portfolio. Teachers trained in the use of these tools outline proper procedures for the set-up, administration, and analysis of screening results — teachers are trained in understanding and how to use this information to inform their curriculum planning and instruction. Teachers and staff will answer questions about the information collected or interpreted with parents.

## Parent-Teacher Conferences

Carefully observed and recorded information about a child's developmental progress will be shared with parents through formal conferences twice a year. Fall and Spring conferences provide a time for communication between parents and teachers to reflect on a child's progress and brainstorm strategies that support the child's growth and success. Conferences are also a time to discuss developmental questions or concerns a parent or teacher may have about a child. Together a decision will determine if further specialists or a medical consultation would benefit the child. A conference sign-up sheet with a variety of time slots will be made available at least a week before conferences for all families.

The following is a detailed description of our conference and documentation practices:

**Before Fall conferences:** Your child's teacher(s) will distribute the Pre-Conference Questionnaire to parents to complete and bring to the conference. This tool helps the teacher learn about the child through the parent's eyes.

**Fall conferences:** This meeting forms the working relationship between home and school by listening to the child's developmental information shared by the parent and setting goals together for the rest of the school year. Together specific objectives are identified and documented for the semester.

**Spring conferences:** A spring conference serves to examine the developmental growth of the child over the school year. Teachers meet with parents and use the portfolio to illustrate each child's progress and share a copy of the age-appropriate developmental summary.

Parents will receive a written copy of the child's social, emotional, intellectual, and physical development at the end of each scheduled conference. The completed portfolio is given to the family at the end of a child's enrollment at the WSU Children's Center.

### **Classroom Transitions**

Beginning with home to childcare or school, transitions magnify each time a child moves into a new classroom or onto a new school setting. The teachers prepare the family for the uncertainties of transition through careful planning and forming relationships with new staff. The philosophy and practices surrounding transitions developed at the Center have grown from these ideas:

- Parents are involved in all discussions and provided with information that helps them work with their children in preparation for new classrooms and teachers.
- Thoughtful staff scheduling that allows children to know the staff in their classroom as well as the staff in their "neighbor classrooms."
- Staff members form teams of support between those that work with the infant and toddler classrooms and those that work with the preschool and school age classrooms. Children are familiar with all adults in the Center, thus minimizing the impact of classroom transitions.
- Children transition with their peers whenever possible.

Additionally, we have found that in the infant and toddler rooms we can fluidly transition children when specific developmental milestones are reached, like feeding themselves, walking with stability, and taking only one nap in the afternoon. As children age, the school district and state define pre-school enrollment as thirty-three months through age five.

# Guiding Behavior and Reporting Maltreatment of Minors

## Behavior Guidance Policy

WSU Children's Center staff view behavior as skills taught and learned like any other such as reading or math. Teachers guide your child's behavior by word and example and realize that it is not a developmental expectation that all children immediately understand or follow all expectations. Children need many opportunities and redirections before reaching the understanding that the following actions are not socially desirable behaviors:

- hitting, biting, or physically hurting other children or adults
- teasing, name calling, or excluding children from play
- destroying other children's work or property
- running from the group creating an unsafe condition

As children grow, our classrooms nurture positive behavior and the development of self-help and control skills. Staff maintain daily routines, set clear limits, redirect classroom activities as needed, and help children develop problem solving strategies. Teachers often involve the children in discussions about respecting other people and property. Teachers help children balance the need for individual expression with the needs and safety of the group.

## General Requirements

Our approach to behavior helps to set goals, guide, model, and teach socially accepted behaviors. We accomplish this by using guidance and discipline techniques that match the age and developmental understandings of the children. Examples of this are:

- Offering multiple sets of the same toy as children begin to understand the concept of sharing.
- Setting clear and enforceable limits that match the age of the child.
- Modeling acceptable/desirable behavior
- Helping identify emotions and desired emotional responses to classmates and staff.
- Recognizing each child's individual needs
- Structuring the environment and schedules to maximize self-regulation.
- Recognizing the positive efforts of children
- Anticipating and eliminating potential problems
- Redirecting or questioning behavior before an intervention is needed.
- Using proactive timing of staff intervention
- Teaching children acceptable problem-solving strategies
- Planning the daily schedule in a way that allows the children a successful mixture of choice and structure.
- Using natural and logical consequences
- Restoring order without damaging self-esteem
- Encouraging children to verbalize their feelings, rather than demonstrate them physically.
- Encouraging and providing the children with helpful and appropriate words to use for solving problems.

## Persistent Unacceptable Behavior

When behavior management techniques are not adequate, and persistent unacceptable behaviors occur, teachers will proceed by documenting the behaviors through dated and signed observations and anecdotal records. While working with the child in the classroom, if the behaviors persist, the child will be invited to choose a separate place in the classroom or play area to redirect the child to a more appropriate activity. If necessary, the child may need to be separated from the group, following the regulations defined in the following section.



If behaviors persist across several days, the Lead Teacher may choose to meet with the child's parent(s) and other involved employees to have an open discussion about the behavior. This meeting will also be used to develop and implement a behavior management plan that meets the individual needs of the child while adhering to WSU Children's Center behavior expectations.

If a child is displaying dangerous behaviors that put themselves, other children, or the teachers at risk for personal safety, parents may be called to immediately pick up their child for the remainder of the day. Behaviors that may result in immediate removal of the child for the remainder of the day include, but are not limited to, the unacceptable behaviors listed in the Behavior Guidance Policy section of this handbook. Behaviors can include physical harm to self or others, name calling, destroying property, running from the group/teacher, or any other unsafe condition.

A child is removed from the center for unacceptable behaviors that jeopardize the safety of the child or staff. Return to care requires a behavior plan created with a parent or guardian, classroom teacher, other support person, and the director. Permanent termination from care occurs only after all efforts to provide for the child's needs are exhausted and removal from care is recommended by a team consisting of the center director, classroom teacher, other support persons and parents or guardian.

### **Separation from a Group**

Separation from the group is used only after less intrusive guidance measures have been tried and 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 teachers will work with children to provide alternate options to continue participation prior to separation from the group.

After separation from the group, the child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation. The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops. All separations are recorded per DHS Licensing requirement.

Children between the ages of six weeks and 16-months must not be separated from the group as a means of behavior guidance.

### **Separation of Children with Disabilities**

Children with developmental disabilities or related conditions or children under the age of five will be subject to all rules under Minnesota Statutes that govern the use of aversive and deprivation procedures (Mn Rules Part 9525.0004 to 9529.0036 and 9525.2700 to 9525.2810) Generally speaking, guidance practices for children with identified disabilities will be followed according to their IEP goals and practices.

### **Biting**

Biting is generally seen as an unfortunate but not unexpected behavior that is impacted both by developmental and emotional factors. Biting can provide clues as to how children are feeling, their stage of development, and what they need from their environment to be successful. At times, young children may lack strategies to communicate their feelings and needs effectively. Biting then becomes a child's way of expressing frustration or feelings to other children and adults.

Biting is commonly categorized into three areas which are typically related to children's age and development. The areas are:

- Exploration: Children explore the uses of their new teeth and are unaware that biting will cause pain or an undesirable response from a caregiver.
- Cause and Effect: Children begin to realize that they have the power to do something that will impact their environment. The children are testing their independence and are not planning their actions in advance.
- Power: Children find they do not have the language to express their emotions and use aggression to gain the attention or item they desire.

The WSU Children's Center teaching staff will assist with this developmental concern in partnership with the parents and caregivers.

Once a child begins to bite other children the parents/guardian will be notified immediately and together the teacher and parent/caregiver will design strategies to implement both at home and in the classroom. The following steps will be followed in the classroom following a biting incident:

- The child will be immediately removed from the group and if appropriate will assist with administering first aid (wipe with damp cloth, ice pack, bandage if necessary). The biting incident will be documented, and a three-bite rule may result in the parent/caregiver being asked to remove the child from the Center for the remainder of the day. If biting persists the teacher, parent, and director will discuss a behavior plan. Options may include an alternate schedule or change in classroom. Biting that continues for a month after interventions at home and school will require the parent/guardian to seek alternate childcare setting.

### **Prohibited Behavioral Actions and Interventions**

The following actions by staff or among children are not permitted:

- Corporal punishment including rough handling, shoving, hair pulling, ear pulling, shaking, slapping, biting, punching, hitting, and spanking.
- Emotional abuse such as name calling, ostracism, shaming, making derogatory remarks about the child or the child's family, or language that threatens, shames, or frightens the child.
- Separation of the child from the group except as outlined above.
- Punishment for lapses in toilet habits.
- Withholding food, light, warm clothing, or medical care as a punishment for unacceptable behavior.
- The use of physical restraint other than to physically hold a child when safe containment is necessary to protect a child or others from harm.
- The use of mechanical or physical restraints.

Refer to Appendix A: Maltreatment of Minors Mandated Reporting for instructions to report any suspected or known us of prohibited actions and interventions.

### **Family and Program Staff Differences/Grievance Procedure for Parents**

Parents/guardians are asked to speak with their child's Lead Teacher when differences arise to resolve disputes and restore communication with one another. Please use email, voicemail, notes, or individual appointments to discuss classroom or personal issues with the Lead Teacher or Director. The WSU Children's Center uses the NAEYC Code of Ethical Conduct ([NAEYC Code of Ethical Conduct and Statement of Commitment PDF](#)) as a tool to help resolve conflicts that do arise.

When a parent disagrees with the decision made by the Lead Teacher, the parent and their authorized representatives may grieve the decision by contacting the director of the WSU Children's Center. If unsatisfied with the response of both the Lead teacher and Director the parent and their authorized representatives may contact the Dean of the College of Education, 507-457-5570 or the campus legal office, 507-457-2766, or DHS (Development of Human Services), 651-431-6500.

## Promoting Wellness—Health, Emergency, Safety, Napping, and Nutrition Policies

### Health Policies

Health policies maintain, protect, and improve the health of children in our care, and seek to reduce the risk of spreading childhood disease and illness. Center practices include close observation of the children, regular hand washing, and requiring children to remain at home when they are ill. A child must feel well enough to participate in all classroom activities which include going outside, eating regular meals, and interacting with other children and adults.

If your child is ill, please call your child's Lead Teacher directly (contact information is provided at the end of this handbook), or contact the Center via phone at 507-457-2300 or via email at [childrenscenter@winona.edu](mailto:childrenscenter@winona.edu) to report the absence and the nature of the illness. This information assists in monitoring the classroom for similar symptoms, activity planning, and staff scheduling. The following policies meet Minnesota childcare licensing regulations in conjunction with our health care consultant who reviews all health and safety practices monthly, and all policies annually.

### Required Paperwork: Health Care Summary and Immunization Record

Admission to the WSU Children's Center requires a current physical examination summary signed by the child's physician and record of up-to-date immunizations to be filed in a secure location at the Center. Parents with objections to required immunizations or medical exemptions must submit a notarized statement at the time of enrollment. Each time children change age groups; a new health care summary and updated immunization record are required. (e.g., when infants move to the toddler room).

### Medical Conditions Requiring Exclusion from Child Care

Children must stay home if they have any of the following symptoms within the preceding 24 hours:

- **Fever** - A fever is a warning that all is not right with the body. Anyone with a fever over 100°F is required to remain at home until fever-free for twenty-four hours without the use of medication. Based on information provided by health care professionals, teething typically does not result in a temperature exceeding 100°F
- **Stomachache, Vomiting, Diarrhea** - Consult a doctor if a stomachache is persistent or severe enough to limit activity. If vomiting occurs, stay home until eating patterns are normal. A person with diarrhea should always stay at home. A rule of thumb is 2 or more loose stools in a 24-hour period are an indication that a person should stay home.
- **Rash & Hives** - A rash may be the first sign of one of many illnesses such as measles or chicken pox, or an allergic reaction. Do not return to the WSU Children's Center until a doctor's authorization is received.
- **Heavy Colds**- Individuals with "heavy colds" and hacking coughs should not come to the center, even if there is no fever. Individuals should also stay home when profuse nasal drainage or discharge from eyes or ears exists. If the nose is wiped every 5 to 10 minutes, that is too much.
- **Sore Throats** - If a sore throat is the only symptom center attendance is okay. If white spots can be seen in the back of the throat, a fever is present, or any other symptom is present, call a doctor or proceed to health services for diagnosis.
- **Open Draining Sores** - Individuals should remain at home if there are draining sores, impetigo lesions that have not dried, or a staph infection exists.
- **Extreme Listlessness** - If a staff or child exhibits listlessness, a physician should be consulted immediately. This could be a symptom of dehydration or some other serious health concern.

## **Parent Notification of Ill or Injured Child**

Parents are immediately notified to come for their child when he/she becomes ill or injured at the Center. Staff trained in Pediatric First Aid/CPR care for the child and an emergency contact is called to come for the child when a parent is unavailable within a reasonable period.

## **Communicable and Reportable Diseases**

Parents must inform their child's Lead Teacher of diseases or health conditions within twenty-four hours (including the weekend) exhibited by the child. This information assists in identifying food borne illnesses and other preventable health conditions.

The list of situations includes but is not limited to, lice, scabies, impetigo, ringworm, chicken pox, hand, foot and mouth disease (HFMD), or conjunctivitis (pink eye). Children are not permitted to return to the classroom until the child has received medical clearance or has completed a prescribed treatment.

The classroom staff notifies parents with a notice posted on the door and/or an email that includes symptoms and recommended treatment when exposure occurs in the classroom of the reportable contagious diseases listed above. The Director will notify the health authority within twenty-four hours of receiving a parent's report of exposure to certain types of extreme contagious illnesses listed on the DHS website.

## **Special Health Considerations**

Children with special health needs, including asthma, seizures, allergies, identified developmental needs, or alternate food plans, must complete an Individual Child Care Program Plan (ICCPP) form shared with all adults who work with the child. Special accommodation to the environment or practices will be made upon the recommendation of recognized health care professionals.

## **Administration of Medicine**

We strongly urge medication to be given during non-school hours.

If a dose is needed during the hours of care, a parent must complete a Medication Authorization Form permitting professional staff to administer medication to the child. A Medication Authorization Form must be completed for any prescription, non-prescription, diapering product, sunscreen lotion, insect repellent, lotion, and/or lip moisturizer. This includes any over-the-counter medication.

All medications must be in an original container with the child's first and last name and the required dose will be recorded on a Medication Authorization Form.

Medication Authorization Forms are available in the Center office or from a classroom teacher.

## **Emergency, Accident, Safety, and Record Keeping Policies**

### **Administration of First Aid**

Teachers and Center staff receive training in Pediatric Infant, Child and Adult CPR and First Aid and certification with renewal every two years.

The center staff follows medical/first aid procedures that include:

- A certified person begins administering first aid.
- Other staff members assist as needed by calling emergency medical service, gathering supplies, or help to lead first aid procedures.
- A third staff person clears other children from the scene and contacts the Director, 911, and WSU Security 507-457-5000

In the event of a medical emergency requiring Emergency Medical Services (EMS), the director or designee will notify parents immediately.

### **Special Situations**

If a child has a health condition that requires medical attention, classroom staff trained to meet the child's individual needs are assigned to this child for all out of classroom activities, including field trips, water play, bike day, and other events. All staff assigned to the child's classroom are trained in the medical requirements of the child.

### **Safety and Connection Practices**

Center staff and children follow the following physical safety practices:

- Staff monitor the Center daily for potentially unsafe situations.
- Teachers and children watch for and report hazardous conditions to the Director or WSU Facilities.
- All potentially hazardous substances or objects are placed out of children's reach and stored in locked cupboards.
- The kitchen area is always off limits to children.
- Regular monitoring and sanitizing of equipment.
- Training in pediatric first aid, choking, suffocation techniques, Sudden Unexpected Infant Death (formerly SUIDS), Abusive Head Trauma (formerly Shaken Baby Syndrome) and blood borne pathogens.
- Traffic safety rules include walking on the sidewalk behind a teacher and observing traffic rules.
- Children will always be supervised by sight and sound as appropriate for the age of the child.
- Coded locked doors monitor all Center entrances. Individuals without proper clearance to enter the center must be let in by an employee.
- All visitors are required to sign-in at the Main Office.

### **Car Seat Use**

All children must arrive and depart from the Children's Center in the required car seat and/or restraint equipment. The Center follows MN State guidelines for car seat use when transporting children away from the center. Transportation in motor vehicles is limited to school age children.

### **Emergency Phone Numbers**

Each classroom posts telephone numbers for emergency medical and dental care, poison control center, fire department, campus security, Winona Health emergency room, health authority, licensing division of MN Department of Human Services, and mandated reporting.

### **Fire and Tornado Procedures and Prevention**

Fire drills occur monthly and tornado drills occur monthly from April through October. Posted evacuation procedures are in each room with designated staff, emergency phone numbers, and marked exits and evacuation routes for fires, tornadoes, and bomb threats.

### **Inclement Weather and Cancellation Policy**

The WSU Children's Center follows university protocol when deciding to close or implement a late start time due to inclement weather. All inclement weather cancellations and late start decisions are communicated to families and staff via email and posted on the WSU website. If the closing occurs during the day a phone call will accompany an email informing you of the university decision to close the Children's Center for the day.

## **Air Quality Index (AQR) Protocol**

The director and teachers will monitor the AQI using the MN EPA recommendations for safe levels when determining safe outdoor play or outside time for sensitive populations. Young children are considered to be a sensitive population because their lungs are not fully developed and breathing concerns like asthma or allergies may not yet be known. Children of all ages will be monitored for symptoms of respiratory distress that includes coughing, itchy, or watery eyes.

### **AQI (Air Quality Index Levels)**

- 0-50 Good (Green)
- 51-100 Moderate (Yellow)
- 101-150 Unhealthy for sensitive groups (Orange)
- 151-200 Unhealthy for everyone (Red)
- 201-300 Very Unhealthy (Maroon)
- 301-500 Hazardous (Black)

When the AQI is at an orange level, teachers will use discretion with children over age 3 yrs. Children under age 3 years will remain indoors until the AQI is at a yellow level or green level. All children will remain indoors should the AQI rise above the orange level.

### **Bomb Threats**

The following procedure follows the WSU policy on bomb threats. After notification of a bomb threat, the WSU security staff immediately evacuates and relocates the children to a nearby location deemed safe. Staff begins contacting families once the children are safely relocated, informing them of the bomb threat at WSU and asking them to pick up their children at the Cathedral of the Sacred Heart church basement located at 360 Main St. Winona, MN (one block west of the Center on Wabasha Street).

### **Sources of First Aid and Emergency Medical Care.**

In the event of an emergency requiring medical care, WSU Children's Center staff will call 911, WSU Security, and the child's parent. A WSU Children's Center staff will accompany the child if ambulance transport is required and stay with the child until a parent or emergency contact arrives at the hospital. Parents will be responsible for any costs of emergency medical care.

### **Handling and Disposal of Bodily Fluids**

In accordance with the Minnesota Department of Human Services, Division of Licensing regulations, any surface that encounters a potentially infectious bodily fluid, including blood and vomit, must be cleaned and disinfected. The blood-contaminated material will be disposed of in a plastic bag with a secured tie. Sharp items used for a child with special care needs must be disposed of in a "sharps container" which is stored in the kitchen, out of the reach of children. The WSU Children's Center provides the necessary supplies for the handling and disposal of bodily fluids, including disposable gloves, disposable bags, and eye protection.

### **Written Records for Accidents, Injuries, and Incidents**

Center staff maintain written records of accidents, injuries, and incidents involving a child enrolled in the program, a staff person, or a visitor. The Accident/Incident Report contains the name and age of the person(s) involved, date and place of accident, injury, incident, type of injury, and who received a report of the event. A duplicate of the report is kept in the child's file.

In case of severe injury or accident, an official accident report is filed with WSU Legal Affairs, and the MN Department of Human Services' central office in St. Paul, MN within 24 hours if medical care is required. The Center retains copies of all written documentation in Center files for three years.

## Minnesota Department of Human Services Licensing Questions

Direct questions about state licensing practices to the MN Department of Human Services (DHS), Division of Licensing, 651-431-6500.

### Napping and Rest Policies

Naptime is an important and necessary part of a young child's daily life. Nap transitions begin after lunch at 12:30 pm with toileting or diaper changes, a story, quiet play (indoors or outdoors), and soothing music to signal the time for rest. Each child has their own cot and a blanket from home and a teacher is available throughout the rest time. A gentle wake-up begins at 3 pm with snack and afternoon play. Teachers assist the children in creating a restful environment in the classroom. A daily report is shared with parents in the infant and toddler rooms. Daily reports will be given to parents daily at pick-up time. Parents must supply a bag for transporting bedding items (blanket, pillow, and small stuffed animal) to and from the WSU Children's Center. Parents are required to launder nap items at least weekly and when soiled.

**Confinement Limitation:** A child who has completed a nap or rested quietly for thirty minutes must not be required to remain on a cot or in a crib. Alternate activities are provided by trained staff.

### Infants

Infant parents are informed about state regulations regarding sleep patterns at program orientation. The teachers encourage parents to share napping information specific to their child and are frequently asked questions by their classroom teacher, so that home and school are familiar with the child's sleeping patterns. Infants sleep on demand as needed and are monitored by staff while they sleep. No infant is left unattended while sleeping. Infants are removed from their crib when they wake up. The mandatory state policies and procedures guiding our napping practices:

- **Placement of Equipment:** Naps are provided in a quiet area, physically separated from other children who are engaged in activities that might potentially disrupt a napping child. Cribs are placed so that each child's head is a minimum of three feet from another child and with clear aisles and unimpeded access for both adults and children on at least one side of each piece of napping equipment. Infants are assigned cribs and use the same crib each day. Cribs and cots must be directly on the floor and not be stacked when in use.
- **Bedding:** The Center provides individual crib bedding for each child which is changed and laundered when soiled or wet, or at a minimum, weekly. Infant parents must wash swaddle sacks or sleepers weekly or when soiled or wet. The Center will also make these garments available as needed.
- **Crib Standards and Item Placement:** Each child receives a crib with a firm mattress and sheet that overlaps to prevent it from becoming dislodged by pulling on the corner of the sheet. All cribs are certified and meet the current Code of Federal Regulations for safety standards. Certificates are on file in the office. Crib inspections occur monthly in accordance with MN State statues for safety. All crib inspection sheets remain on file in the Center office for three years from the date of inspection. Center staff will not place anything in the crib with the infant except for the infant's pacifier, as defined in the Code of Federal Regulations, title 16, part 1511.
- **Reduction of risk of Sudden Unexpected Infant Death Syndrome (SUIDS):** Under Minnesota Statutes, all infants are placed on their back to sleep unless the parent has provided a signed form approved by the commissioner, with a directive signed by the child's physician giving an alternate sleep directive. This form remains on file in the child's cumulative record file in the office once the infant has transitioned to the toddler classroom. An infant who independently rolls onto his/her stomach after being placed to sleep on his/her back may be allowed to remain sleeping on his/her stomach if the infant is at least six months of age or the license holder has a signed statement from the parent indicating that the infant regularly rolls over at home.

- **Children who Fall Asleep Before Being Placed in a Crib:** If a child falls asleep before being placed in a crib, the teacher must move the infant to a crib as soon as it is practical and safe. When an infant falls asleep while being held, the teacher must consider the supervision needs of other children in the classroom when determining how long to hold the infant before placing the infant in a crib to sleep. The sleeping infant must not be in a position that could block the airway or with anything covering the infant's face.
- **Swaddling Infants:** A swaddled infant must remain on his/her back, and MN DHS Rule 3 prohibits swaddling for any infant who has begun to roll over independently. However, with the written consent of a parent, the Center may place the infant who has not yet begun to roll over on his/her own down to sleep in a one-piece sleeper equipped with an attached system that fastens securely only across the upper torso, with no restriction of the hips or legs, to create a swaddle.
- **Before any use of swaddling for sleep:** A written consent form provided by the MN State DHS commissioner permitting the use of swaddling from the parent is on file. Parents who provide approved swaddle sacks or sleepers must wash them when soiled or wet, or at a minimum, weekly. The Center will also make these garments available as needed.
- **Lactation Space:** nursing mothers are welcome to access the Wellness Room on the 3<sup>rd</sup> Floor of Helble Hall Across from Rm. 319. Glass bottles are not allowed for infant feedings. Please provide an alternate container for bottle feeding.

## Older Preschoolers

Toddlers and preschoolers who are in our care for more than five hours each day are required by DHS state statute to be offered the opportunity to rest for thirty minutes each day. A child who has rested quietly for 30 minutes may engage in quiet activities until snack time.

Nap transitions begin after lunch at 12:30 pm with toileting or diaper changes, a story, quiet play (indoors or outdoors), and soothing music to signal the time for rest. Each child has their own cot and a blanket from home and a teacher is available throughout the rest time. A gentle wake-up begins at 3 pm with snack and afternoon play. Children have a storage basket in their classroom for naptime comforts such as a blanket or stuffed toy. Teachers prepare room for nap by placing cots throughout the room appropriately separated from each other. Windows have shades drawn, lights dimmed, and soft music playing in the background. Teachers spread out throughout the classroom, assisting children in relaxing as they prepare for naptime.

When all children are awake, cots are sanitized with a non-toxic spray and placed in a safe storage place.

## Placement of Equipment

- Cots are placed so there are clear aisles and unimpeded access for both adults and children on at least one side of each piece of napping and resting equipment.
- Cots must be placed directly on the floor and not be stacked when in use.
- Cots should be arranged in a head-to-toe fashion so that children's heads are a minimum of three feet apart.
- Cots and cribs may not be used as storage when not in use.
- Cots are sanitized daily after each use.

## Bedding

Each child brings bedding from home: small blanket, pillow, and stuffed animal or doll. Laundering of nap items is expected of the child's parent when dirty, wet, or soiled, if your child was recently ill and stayed home, if your child was sent home due to illness, or weekly if no other requirements apply



## **Food Service—Meals, Snacks, and Treats**

### **Food Service**

All Center food services meet the federal Child and Adult Care Food Program (CACFP) and review guidelines. Breakfast, lunch, and afternoon snacks are part of the program. Chartwells, WSU dining service, caters all meals and snacks. A monthly menu of meals and snacks is posted on the WSU Children Center website or available upon request. Infants are fed on demand using the agreed upon a combination of food items.. Menus and the nutritious quality of food is routinely under review and documented food allergies are posted in the kitchen and classroom. Food substitutions are honored with a doctor's signed medical documentation.

### **Reusable Water Bottles or Cups**

The WSU Children's Center follows the following policies and procedures when using reusable water bottles:

1. Each day the water bottle is used, the WSU Children's Center cleans and sanitizes the water bottle using procedures that comply with the Food Code under Minnesota Rules, chapter 4626, which include proper washing and sanitizing of each water bottle.
2. A water bottle is assigned to a specific child and labeled with the child's first and last name.
3. Water bottles are labeled and stored in a manner that reduces the risk of a child using the wrong water bottle,
4. A water bottle is used only for water.
5. Water bottles are not used during mealtimes.

### **Food as Part of Curriculum**

Meal and snack times, like all parts of the day, are learning opportunities. Children help prepare snacks, set the table, clear the table, and clean up the eating area. Staff sit at tables, eat with children to encourage social conversations, and practice using manners with each other.

### **Food Allergies and Special Request Diets**

Parents should notify their child's Lead Teacher, the Office Manager, and the Director of any food allergies or alternate food plans. An Individual Child Program Plan (ICCPP) and a signed document from a medical professional must be on file with the office describing any food allergies and appropriate diet substitutions. Allergies are posted in the food preparation areas of the Center so that all staff are aware of restrictions.

All food allergies must be documented on the ICCPP for Allergies and must include the following:

- Description of the allergy
- Specific triggers
- Avoidance techniques
- Symptoms of the allergic reaction
- Procedure for responding to the allergic reaction, including:
  - Medication name
  - Dosing instructions
  - Doctor's contact information

### **Special Celebratory Treats**

The WSU Children's Center will not accept any homemade treats for classroom consumption or distribution. All birthday or special event treats must be store bought and prepackaged.



## **Appendix A – Maltreatment of Minors Mandated Reporting**

### **Maltreatment of Minors Mandated Reporting Policy for DHS Licensed Programs**

#### **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 Human Services, should be made to the Licensing Division’s Central Intake line at 651-431-6600.
- Incidents of suspected maltreatment of children occurring within a family, in the community, at a family childcare program, or in a child foster care home, should be reported to the local county social services agency at 507-457-6200 or local law enforcement at 507-457-6302.

#### **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 245A.04, subdivision 14](#).

## 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 Internal Reviews are Completed

The internal review will be completed by Karen Sullivan, Director. If this individual is involved in the alleged or suspected maltreatment, Karen Holte, Lead Teacher, will be responsible for completing the internal review.

## Documentation of the Internal Review

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

## Corrective Action Plan

Based on the results of the internal review, the license holder must develop, document, and implement a corrective action plan 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.

[Minnesota Statutes, section 260C.007, Sub. 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 is otherwise properly venued. Egregious harm includes, but is not limited to:

1. conduct towards a child that constitutes a violation of sections [609.185](#) to [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 towards a child that constitutes felony malicious punishment of a child under section [609.377](#);
4. conduct towards a child that constitutes felony unreasonable restraint of a child under section [609.255, subdivision 3](#);
5. conduct towards a child that constitutes felony neglect or endangerment of a child under [section 609.378](#);
6. conduct towards a child that constitutes assault under section [609.221](#), [609.222](#), or [609.223](#);
7. conduct towards a child that constitutes solicitation, inducement, or promotion of, or receiving profit derived from prostitution over section [609.322](#);
8. conduct towards a child that constitutes murder or voluntary manslaughter as defined by [United States Code, title 18, section 111\(a\)](#) or [1112 \(a\)](#);
9. conduct towards 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 111\(a\)](#) or [1112 \(a\)](#); or
10. conduct toward a child that constitutes criminal sexual conduct under sections [609.342](#) to [609.345](#).

## **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 and 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.

### **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), 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 under their 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. solicitation, inducement, and promotion of prostitution under section [609.322](#);
8. criminal sexual conduct under sections [609.342](#) to [609.3451](#);
9. solicitation of children to engage in sexual conduct under section [609.352](#);
10. malicious punishment or neglect or endangerment of a child under section [609.377](#) or [609.378](#);

11. use of a minor in sexual performance under section [617.246](#); or
12. 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 under Minnesota Statutes 2010, section [260C.201](#), subdivision 11, paragraph (d), clause (1), 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 Services.

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



## Appendix B – Contact Information

<b>Contact Information</b>			
<b>Children’s Center Main Office-Helble Hall 101 E Wabasha</b>	507-457-2300	<b>WSU Mailing address</b> 108 Sanborn Street	<a href="mailto:childrenscenter@winona.edu">childrenscenter@winona.edu</a>
<b>Room</b>	<b>Room Phone</b>	<b>Name</b>	<b>Email</b>
Director	507-457-5368	Karen Sullivan	krsullivan@winona.edu
Office Manager	507-457-2300	Mechelle Cierzan	<a href="mailto:mechelle.cierzan@winona.edu">mechelle.cierzan@winona.edu</a>
			childrenscenter@winona.edu
<b>Helble Hall Classrooms</b>			
Infant I Classroom	507-457-2302	Karen Holte	<a href="mailto:kholte@winona.edu">kholte@winona.edu</a>
Infant II Classroom	507-457-2618	Jessica Merchlewitz	<a href="mailto:jrmerchlewitz@winona.edu">jrmerchlewitz@winona.edu</a>
Toddler I Classroom	507-457-2303	Jill Anderson	<a href="mailto:jianderson@winona.edu">jianderson@winona.edu</a>
Young Pre-K Transition Classroom	507-457-2306	Kayla Klee	<a href="mailto:kklee@winona.edu">kklee@winona.edu</a>
Preschool I Classroom	507-457-2305	Chrissa Mueller	cmueller@winona.edu
Preschool II Classroom	507-457-2301	Kellian Kronebusch	<a href="mailto:kkronebusch@winona.edu">kkronebusch@winona.edu</a>
School Age Classroom	507-457-2310	Staff	



# Appendix C – Nondiscrimination Statement

## Nondiscrimination Statement

### Standard/Full Civil Rights Statement

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

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

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

(1) mail: U.S. Department of Agriculture  
Office of the Assistant Secretary for Civil Rights  
Washington, D.C. 20250-9410

(2) fax: (202) 690-7442; or

(3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider.

# Appendix D – Weather Watch Chart

## Understand the Weather

# Child Care Weather Watch



### Wind-Chill

- 30° is **chilly** and generally uncomfortable
- 15° to 30° is **cold**
- 0° to 15° is **very cold**
- -20° to 0° is **bitter cold** with significant risk of **frostbite**
- -20° to -60° is **extreme cold** and **frostbite** is likely
- -60° is **frigid** and exposed **skin will freeze** in 1 minute

Wind-Chill Factor Chart (in Fahrenheit)										
Wind Speed in mph										
Air Temperature	Calm	5	10	15	20	25	30	35	40	
40	40	36	34	32	30	29	28	28	27	
30	30	25	21	19	17	16	15	14	13	
20	20	13	9	6	4	3	1	0	-1	
10	10	1	-4	-7	-9	-11	-12	-14	-15	
0	0	-11	-16	-19	-22	-24	-26	-27	-29	
-10	-10	-22	-28	-32	-35	-37	-39	-41	-43	



Comfortable for outdoor play



Caution



Danger



### Heat Index

- 80° or below is considered **comfortable**
- 90° is beginning to feel **uncomfortable**
- 100° is **uncomfortable** and may be **hazardous**
- 110° is considered **dangerous**

All temperatures are in degrees Fahrenheit

Heat Index Chart (in Fahrenheit)													
Relative Humidity (Percent)													
Air Temperature	40	45	50	55	60	65	70	75	80	85	90	95	100
80	80	81	81	82	82	83	83	84	84	85	86	86	87
84	83	84	85	86	88	89	90	92	94	96	98	100	103
90	91	93	95	97	100	103	105	109	113	117	122	127	132
94	97	100	103	106	110	114	119	124	129	135			
100	109	114	118	124	129	130							
104	119	124	131	137									

Revised June 2024