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A CHILD’S WORLD

Welcome to our center!

Parents are an integral part of a successful child care and preschool program. Through parental involvement we are better able to meet the needs of children. As child care professionals, we can serve as a valuable resource for parents and their children concerning most areas of child development. Therefore, we like to think that families should work with us as a team to provide an environment that facilitates the growth of children into well-adjusted individuals with positive self-concepts.

This handbook has been developed to help facilitate the relationship between teachers and parents by providing you with specific information about our center. Our professional staff will be happy to work with you in meeting any special needs or addressing any concerns regarding your child’s care. We hope that this parent handbook will help in the communication process by explaining our policies, guidelines and procedures. It is written with the best interests of your child in mind, in addition to maintaining the integrity and quality of our program. Should you need help for language translation, please speak to the director and we’ll make a plan of support.

If you have any questions regarding this handbook, please feel free to call A Child’s World at 298-8047. We sincerely look forward to serving you and your child.

MISSION STATEMENT

Our purpose is to encourage the cognitive, social, emotional, and physical growth of young children within a developmentally appropriate setting.

Our primary goals are to:
• Provide a developmentally appropriate environment for young children.
• Support and strengthen the quality of life for young children and their families.
• Provide care in an environment that supports the needs of all families, regardless of the structure or diversity.

PHILOSOPHY

The guiding principle of A Child’s World is that children learn in an environment that allows them to succeed. The professional staff fosters development of the whole child. We will provide varied opportunities that contribute to each child’s unique learning style through play, social interaction, and discovery.

YWCA MISSION

The YWCA is dedicated to eliminating racism, empowering women and promoting peace, justice, freedom and dignity for all.
CHILD CARE REGULATIONS

1. EARLY CHILDHOOD SERVICES - CASS COUNTY SOCIAL SERVICES - A Child’s World is licensed by the State of North Dakota. We are licensed for children age’s 6 weeks to 12 years of age. The purpose of these regulations is to establish minimum standards for licensed child care centers and to assure that those standards are maintained. Should a parent suspect a licensing violation or want to report a complaint contact the local county social service office at 701-241-5765. Reports can be made in person, by telephone or in writing.

2. CHILD ABUSE AND NEGLECT LAW - A Child’s World recognizes the basic human and legal rights of each individual served. It is the policy of our center that all staff and volunteers treat individuals with dignity and respect. Physical abuse, verbal, or neglect of any individual within or outside the center is strictly prohibited. Any staff or volunteer who has knowledge of abuse or neglect of an individual or has reasonable cause to believe that an individual has been abused or neglected, MUST report this information to the Director and to the appropriate authorities. Failure to report abuse/neglect may implicate the observer and may lead to disciplinary measures. In addition, all possible abuse/neglect situations will be reported to the county of residence as required by North Dakota Century Code 50-25.1. (Criteria 6A.10)

3. HEALTH - The center will have annual health and sanitation inspections completed by an environmental health practitioner. The center follows guidelines as suggested by North Dakota Health Services.

4. FIRE - The center will have annual fire inspections completed by local or state fire authorities. Fire evacuation drills will be performed in accordance with local fire department's guidelines.

5. TRANSPORTATION - The center will abide by the North Dakota Child Passenger Safety Law which states that children under four (4) years of age must be properly secured in a federally approved car seat and children age 4-7 must be properly secured in a booster seat. Children ages 8 and above or at least 4’9’ tall need to be buckled in a safety belt. All children ages 12 and under should ride in the back seat. Field trip transportation will be provided by A Child’s World staff utilizing our van.

6. CONFIDENTIALITY - Information pertaining to the admission, developmental progress, health or transition of a child is confidential. Access shall be limited to staff, parents or legal guardians and persons who possess a written authorization form from the child's parent or legal guardian and Officers of the law or County Social Services. (Criteria 10D.6)

7. LIABILITY INSURANCE – Warner & Co. Fargo, ND, provides insurance for A Child’s World. This includes bodily injury, liability, and property damage. The YWCA van insurance coverage is by Philadelphia Insurance. This includes bodily injury and property damage liability.

8. BACKGROUND CHECKS- All ACW employees will have background checks conducted prior to being hired.
HOURS OF OPERATION

The Center is open from 6:30am to 6:00pm Monday through Friday. Part time children hours will be from 6:30am to 12:30pm or 12:30pm to 6:00pm. Full time children have a maximum of **10 hours** they are allowed to be in the center for one day. We will be closed the following holidays: New Year’s Day, Martin Luther King Jr. Day, Memorial Day, Independence Day, Labor Day are staff development day (TBD) per year, Thanksgiving Day and Christmas Day. In the event a holiday falls on a weekend, the Center will close Friday and/or Monday. Closing for other Holidays (ex. Christmas Eve), will need board approval and parents will be given appropriate notice.

ADULT - CHILD RATIOS

The Center serves children ages 0-12. The Center meets or exceeds the adult/child ratios established by the North Dakota Department of Human Services. The ratios are:

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<tr>
<th>Ages</th>
<th>Adults Needed</th>
<th>Group Size</th>
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<td>6 weeks - 18 month</td>
<td>1:4</td>
<td>10</td>
</tr>
<tr>
<td>18 months - 36 months</td>
<td>1:5</td>
<td>15</td>
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<tr>
<td>3 yrs. - 4 yrs.</td>
<td>1:7</td>
<td>20</td>
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<tr>
<td>4 yrs. - 5 yrs.</td>
<td>1:10</td>
<td>25</td>
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<tr>
<td>Kindergarten</td>
<td>1:12</td>
<td>30</td>
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<tr>
<td>School Age</td>
<td>1:20</td>
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ENROLLMENT PROCEDURES

Parents may enroll their child at the center office located at 3100 12th Ave North. A **$25.00 per child non-refundable registration fee along with the first two weeks of tuition** will be due at the time of enrollment. If your child can not be immediately enrolled, they will be placed on a waiting list and the two weeks of tuition will not apply until your child can be enrolled.

Forms that need to be completed before your child starts in the center include:

- Child/Family History
- Child Emergency Information
- Certificate of Immunization (updated as new immunizations are given)
- Parent's statement on health of child (annual form)
- Parent Permission to participate & receive emergency medical care
- Aquatic Activity Waiver
- Application for Free and Reduced Priced Meals (annual form)
- Authorization for non-prescription products (annual form)
- Care plans for children with asthma, allergies or a chronic illness
- Photo release form
- Proof of Identity

All forms will be kept on file in the director’s office and inputted into the child care database. Children’s
files are confidential and will only be shared with staff, legal authorities and parents/guardians.

Before your child attends the Center, a short pre-admission conference will be scheduled with Center Director and classroom teacher. Visiting the program allows both the parent and child to become comfortable with our environment, staff and schedule.

During the year, if you wish to change your enrollment status from a full time position to a half time (only available for children in the two’s room and older) position or vice versa, you can only do so if there is a position available. To change your enrollment status, please submit a written request to the Director. Your child's name will be placed on the "waiting list" for the type of position you are requesting.

WAITING LIST

The Director will maintain a waiting list. Priority on this list will be given as follows:

1. YWCA employees.
2. As openings occur within the Center, those children already enrolled in the program will have top priority.
3. Siblings of children in the program. This policy reinforces A Child’s World commitment to family togetherness.
4. Remaining families on the list by date and center receipt of registration form.

   • If parents do not accept an opening when they are offered it, they have the option of staying on the waiting list, but will drop to the bottom.

WITHDRAWAL PROCEDURES

Written notice of intent to withdraw a child from the Center must be submitted to the Director two (2) weeks in advance of withdrawal. The withdrawal form can be found on the parent bulletin board across from the Infant room. You will be billed for two (2) weeks if a proper notice is not given. Parents are responsible for tuition for two weeks after the notice is given, whether or not your child attends A Child’s World during that time. Re-admission will be on space available and a new registration fee must be paid before re-enrollment.

BILLING PROCEDURE

Bills for the current month will be distributed by the 1st and the 15th of the month. Payment of each bill is due by the 5th and the 20th of the month, respectively, or the next business day if the due date falls on a weekend or holiday; (Example: billing is distributed on the 1st of January, payment is due January 5th; billing is distributed on the 15th, of January payment is due January 20th.) Payments not received by the 10th and the 25th of the month will be assessed a late fee of $20.00 per child. Payment can be made by check, cash, credit card or automatic withdrawal. Payments can be placed into the lockbox in the ACW hallway. Cash payments should be made in person so a receipt may be given. Automatic withdrawal can be done monthly or semimonthly on the 5th and/or the 20th of the month. If you have any questions regarding payments please see the Finance Director. The Center will provide an itemized yearly statement of child care payments by January 31st for tax purposes.
Families receiving State Child Care Assistance are responsible for notifying the Director of your need for the forms and ensuring the center receives the program approval letter. Filing must be made in a timely manner; therefore the Director will email or fax the form to the appropriate program. It is the parent’s responsibility to sign and return forms to the Director. Families are responsible for their outstanding balance. Since child care assistance payments are received one (1) to two (2) months after child care services have been performed, you are responsible for a minimum payment of your co-pay and any tuition not covered as determined by the county approval letter.

**COLLECTIONS PROCEDURE**

**Automatic Withdrawal and Parent Discussion:** Finance Director will discuss Automatic Clearing House (ACH) payment method with parents who have past due accounts for the previous month. Finance Director will obtain an ACH form from parents. If 3 non-sufficient funds occur in 3 months child care services will be terminated. If family is does not select ACH option, payment plan and alternative funding sources (cash, check, money order, and credit card) may be accepted as payment. Set forth plan must be followed.

**Payment Plan:** Payment plan will include a minimum of current bi-weekly billing period payment plus 50% (bi-weekly billing period or 25% of monthly rate) until paid in full. Late fees will be assessed at $20 per child per month.

- For example bi-weekly rate is $397 plus 50% of $397, which is $198 for a total bi-weekly payment of $595.
- For families who receive child care assistance and/or scholarship funds, payment plan will be calculated based on the remaining portion family is responsible for. This will be calculated using the same methodology as those not receiving child care assistance.
- If parents do not comply with agreed upon payment plan, child care services will be terminated.

**Care Ends:** At the time child care services end, payment is due in full. If not received at that time account will be sent to collections.

**FEES/DISCOUNTS/ SPECIAL CHARGES**

Fees are based on the age of the child enrolled in the program.

**EARLY ARRIVAL**

Early arrival is considered any time before the Center opens at 6:30 or before 12:30pm for part time afternoon children. A fee of $1.00 for each minute will be charged. Prior approval must be obtained from the director.

**LATE HALF DAY PICKUP**

Parents whose children have a part time position (am or pm) and who remain in the Center past 12:30pm/6:00pm will be charged $1.00 for each minute past the pick up time.

**LATE FULL DAY PICK-UP**

Parents whose children remain in the Center past the 6:00pm closing time will be charged $1.00 per minute past 6:00pm on the first offense, $2.00 per minute on the second offense, $3.00 per minute on the 3rd offense and will continue to rise on each occurring offense. The correct time will be determined by the center’s atomic clocks.

**SCHOLARSHIPS**

Scholarship Dollars when available are offered in three month increments.
Notice for applications is placed in a conspicuous location. Applications are reviewed by no less than three people serving on the scholarship committee made up of the Director, the Finance Director and a third party. Awards will follow the guidelines set forth in the application.

**5/10 HOUR MAXIMUM**
Parents whose children remain in the Center past the five hour (PT) and ten hour (FT) maximum will receive one written reminder. The second and thereafter over time limits will result in a $1.00 per minute late fee per child. Late fees will apply unless extenuating circumstances have occurred which are at the discretion of the director.

**EARLY CLOSINGS**
On days we need to close early, parents will be charged $1.00 per minute past the designated closing time.

**ILLNESS**
Sick children will pay full tuition for one to three consecutive days of illness. If your child is gone for more than three consecutive days, each day beyond the third day will be a 50% tuition rate charge if accompanied by a doctor’s statement. Without a doctor’s statement 100% tuition fee will be charged.

**STORM, NATURAL DISASTER, or PANDEMIC ILLNESS**
Should the Center be closed because of local, state, federal request/recommendation, or an inability to meet mandated teacher to child ratios. Days one to three consecutively following the request or recommendation 100% tuition will be charged. Starting on the fourth consecutive day, 50% tuition will be charged until the Center reopens. If your child is unable to attend, but the Center is open 100% of tuition will be due.

**NSF CHECKS**
We will charge a $20.00 handling fee for the processing of any returned check due to insufficient funds. Upon receipt of second NSF check, all future child care tuition payments must be paid by cash, cashier’s check or money order.

**OTHER**
Absences for parent illness, maternity leave, or funeral, 100% tuition shall be charged.

**HOLIDAY CLOSINGS**
The Center will be closed on the following holiday closings: Labor Day, Thanksgiving Day, Christmas Day, New Year’s Day, Martin Luther King Jr. Day, Memorial Day, the Fourth of July and one annual training day per year. If the holiday falls on a Saturday then the Friday before the center will be closed and if it lands on a Sunday then the following Monday the center will be closed. YWCA reserves the right with board approval to close for extended holidays surrounding the above listed holiday closings (e.g. Christmas Eve or Friday after Thanksgiving). Appropriate notice will be given to families of such closings.

**NON SCHOOL DAY**
Children enrolled in our school age program will be charged a non-rate on the day’s school is scheduled to be closed (public or private).
FORMULA

Families purchasing Simply Right Formula from the center for home use will sign a sheet in the infant room stating how much they are purchasing. Payment for the formula will be added to your regular statements.

VACATIONS

Family vacations or child absent days 100% of tuition will be charged.

KEY FOBS

Families will receive two key fobs, any replacement fob(s) needed the family will be charged the replacement fee. The fee must be paid prior to receiving a replacement fob.

PARENT-TEACHER COMMUNICATION

Parent-Teacher communication is achieved through several methods including but not limited to:

NEWSLETTER- A monthly newsletter will be available for parents. Information will be made available on parent education, happenings in the rooms, community activities, and various other items of interest.

PARENT BULLETIN BOARDS- Menus, information regarding the program and parent education notices will be posted.

DAILY ACTIVITIES- Each room provides daily written information on your child regarding activities, physical care, supplies needed, meals and snacks eaten and special events. The center uses Brightwheel and Remind to keep families updated with current information. (Criteria 5B.5)

PARENT-TEACHER CONFERENCES- Scheduled conferences are held -2 times each year. Parents will be notified of dates in advance. Other conferences may be held throughout the year at either the parent or teacher's request.

PHONE CONTACTS- Classroom teachers and the Center Directors will be very happy to discuss any questions or concerns with you. You should feel free to call them; however, the teacher may need to call you back at a more convenient time so she/he can give you the attention you deserve.

EMAIL- Parent feedback and newsletters can be emailed. You may also receive emails regarding recall notices, events for the center and information from the YWCA Cass Clay agency.

DAY TIME VISITS- The center has an open door policy to all parents of registered children and to those individuals listed as "Authorized to Pick Up" on the child's emergency card. The center welcomes and encourages parent visits and involvement.

PARENT INVOLVEMENT- The center welcomes parent involvement. Whether it be activity ideas, suggestions for visitors, coming to join us for a meal or snack, helping with field trip supervision, helping the room with busy work (cutting, coloring, etc…), helping to plan or run a fundraiser, helping to plan or run a staff appreciation event, inviting us on a fieldtrip to your work or coming on site to do a presentation that involves your work or hobby, etc…

ARRIVAL AND DEPARTURES- An adult must sign the child(ren) in and out daily. In case of an emergency, it is important for us to have an accurate count of children. This is also a great time to share information with teachers, other children and families in the center. Please remember that the teachers although
want to talk with you are not relieve of their responsibility for the safety and care of other children while you are there to visit. While trying not to be rude they may need to cut conversations short or move them to an area where they can still interact and supervise the children. (Criteria 10D.7)

**CHILDREN NOT IN ATTENDANCE**- Parents need to call us by 9:00am on the days your child will not be in attendance. It is also necessary to inform teachers of any extended days in which your child(ren) will be gone and when your child will be having a change in their normal drop off or pick up time. If the center is not notified the teachers will contact parents/guardian by 10:00am if more than two days passes with no contact law enforcement will be contacted to do a well check visit.

**SCHOOL AGE TRANSPORTATION POLICY**

The Center will transport to select North Fargo schools. Parents need to notify ACW if a child will not need to be picked up by 2:30pm. All drivers will follow agency rules and regulations. Drivers will pick up school age children at designated spots for each school. Children will not be left unattended in the vehicle. Should a child not show up at the designated time/spot, the driver will follow the emergency protocols listed in the van. Upon arrival to the Center, staff will sign school age children into their room. Should the public school close early for a weather related emergency, parents will need to pick up their own child as staffing will not allow an early pick up time.

**SMOKE FREE POLICY**

Smoking is prohibited in ACW and within 20’ of the building or vans to protect the health of children and employees.(Criteria 10D.2) If an employee smells like smoke during working hours they may be asked to go home and change in which they must use PTO or unpaid time to do so.

**PARKING/PEDESTRIAN SAFETY**

Please use the designated parking spaces in the front of the building for a maximum of 15 minutes when dropping off or picking up your child(ren). Unless in extreme weather conditions do not leave your vehicle running and if you need to leave it running please ensure your vehicle is locked.(Criteria 5A.25) For extremely busy times we have designated 3 spots in the parking lot to be used for parent parking as well. Please don’t let your child run ahead of you, walk in the parking lot holding hands with your child for safety.

**SECURE ENTRANCE**

ACW has a key fob system to allow entrance. Families will be given two key fobs. For the safety of the children it is my responsibility to notify ACW if someone else is picking up my child and make arrangements for key fob exchanges to authorized friends/family or explain to them how to buzz into the building. If I lose or misplace my key fob I will notify ACW director immediately so it may be deactivated. I understand that there are fees associated with receiving a new key fob and will pay those fees prior to receiving a new one. I understand the key fobs are ACW property and if child care services are ended the key fobs need to be returned or we will be billed for the replacement value. (Criteria 10B.19)

**FRONT DOOR HANDICAP ACCESSIBLE BUTTON**

Please do not let your child push the handicap button for the front door, whether you are next to your child or not. This button is for the handicapped and we need it to be always available. Letting your child push the button is also a safety concern as it teaches children a way out of the building without an adult’s help.
Encourage children to help you open the doors by using their muscles and learn respect for the disabled.

**ILLNESS POLICY** (Criteria 10B.19)

We take every precaution to protect the children’s health. The following are parental responsibilities that help us protect the health of ALL the children.

1. All health forms must be completed and on file thirty (30) days following registration. The child will be withdrawn from the program if not on file within this time period.
2. A record of immunization must be on file at the time of admission to the Center. Parents must provide updated immunizations as your child receives them.
3. Children may NOT attend the Center with symptoms of illness or a communicable disease. If a question exists as to the health of a child, a health professional’s approval for the child to attend the Center must be provided in writing but will not supersede the center’s set policies.
4. If a child becomes ill at the center, the child will be supervised and isolated from the other children and the parent called for the child to be picked up within the hour. If the child has not been picked up within an hour the emergency contacts will be called.
5. Should the children be exposed to a communicable disease, the center will notify parents of the possibility of exposure, symptoms and incubation period. This information will be shared via note posted in the rooms. Any children under immunized will then be excluded until the incubation period has passed. (Criteria 5A.14)
6. There will be no exceptions made regarding health and a child going outside. The child that is well enough to attend child care is well enough to go outside. The center does not have enough staff to monitor a child left inside while the class goes outside. Research has shown that a child that is exposed to fresh air daily has fewer colds and respiratory infections than a child that typically stays indoors.

Parents should exercise every caution to keep their child home should other unusual symptoms occur. Children must remain home; fever free (without the use of fever reducing medication) for 24 hours after an illness. The child will not be allowed to attend if any of the following conditions exist:

A. The illness prevents the child from participating comfortably in activities as determined by the child care provider.
B. The illness results in a greater need of care than the child care staff can provide; therefore, compromising the health and the safety of the other children as determined by the child care provider.
C. The child has any of the following conditions:
   - Fever with behavior changes or other symptoms. Fever classification:
     - **Auxiliary** (Under the arm): 100°F (not adding a degree)
     - **Oral or Ear** temperature: 101°F
   - Symptoms and signs of possible severe illness such as lethargy, uncontrolled coughing, inexplicable irritability or persistent crying, difficulty breathing, wheezing, or other unusual signs for the child.
   - Diarrhea
     - Stool is not contained in the diaper, 2 episodes within an hour or two within three hours.
     - Is causing “accidents” for toilet trained children
     - Stool Frequency exceeds 2 or more stools above normal for the child
• Children are allowed to return to the center once the diarrhea resolves, with the exception of:
  ▪ Salmonella, until 3 negative stool cultures
  ▪ Shigella, until 2 negative stool cultures
  ▪ E.Coli, until 2 negative stool cultures
• ACW definition of resolved means 24 hours have passed since the last watery stool or a solid stool (one that does not fall apart in toilet water or is not absorbed into the diaper material). If a child has a loose formed stool and is otherwise acting normal may return.
• Blood in stools, not explained by dietary change, medication or hard stools
• Vomiting Illness
  ▪ Two or more episodes in the previous 24 hours, unless caused by non-infections condition (ex. reflux) and child remains hydrated.
  ▪ One episode if other symptoms are present or if child has recent history of a head injury
• Abdominal pain
  ▪ Continues more than 2 hours
  ▪ Intermittent pain associated with fever or other signs or symptoms.
• Mouth sores with drooling (except for hand foot and mouth disease, canker sores, thrush)
  ▪ Unless a health care provider or health dept. official determines that the child is non infectious
• Rash with fever or behavior change
  ▪ until a health care provider determines that these symptoms do not indicate a communicable disease
• Head lice
  ▪ from the end of the day until after the first treatment.
• Scabies
  ▪ until after treatment has been completed.
• Active Tuberculosis
  ▪ until a health care provider or health official states that the child is on appropriate therapy and can attend child care.
• Impetigo
  ▪ Until after 24 hours after treatment or treatment has started and lesions can be covered
• Strep throat
  ▪ until child has been treated for 24 hours and no longer has a fever.
• Chickenpox
  ▪ until all sores have dried and crusted over.
• Pertussis (whooping cough)
  ▪ until 5 days of antibiotic treatment.
• Mumps
  ▪ until 5 days after the onset of parotid gland swelling.
• Hepatitis A virus
  ▪ until 1 week after onset of illness, jaundice, or as directed by the health department when immune globulin has been given to appropriate children and staff members.
• Measles
  ▪ until 4 days after onset of rash.
• Rubella
  ▪ until 7 days after onset of rash.
• Methicillin- resistant Staphylococcus (MRSA)
  ▪ If lesions can not be covered
  ▪ If child is running a fever
  ▪ If child cannot participate in activities
• Unspecified respiratory illness (including the common cold, sore throat, croup, bronchitis, runny nose, or ear infection), only exclude a child if their illness is characterized by one or more of the following conditions:
  ▪ The illness has a specified cause that requires exclusion, as determined by other specific standards listed above.
  ▪ The illness limits the child’s comfortable participation in child care activities
  ▪ The illness results in a need for more care than the staff can provide; therefore, compromising the health and safety of other children.

When an illness such as diarrhea, vomiting or fever requires exclusion, the child must remain home until he/she has been symptom free (without the use of fever reducing medication) for 24 hours. When a child is teething their stools may become looser, but diarrhea is not associated with teething.

MEDICATION POLICY

THE TERM “MEDICATIONS” APPLIES TO ALL PRESCRIBED AND OVER THE COUNTER (OTC) PRODUCTS, ALL SURFACE MEDICATIONS, OINTMENTS, ETC.

• When a child in the Center requires medication, parents MUST fill out a medication permission form. Once the medication time frame has expired, all forms will be kept in the child’s file.
• All medications MUST be labeled and given to a staff member so the medication may be properly stored. Refrigerated medications are kept in a covered & locked container in the kitchen/room refrigerator, away from the food.
• All prescribed medications should be kept in the original container labeled by a pharmacist with the following information:
  1- the child’s first and last name
  2- the date the prescription was filled (must be current)
  3- the name of the health care provider who wrote the prescription
  4- the medication’s expiration date
  5- the manufacturer’s instructions of prescription label with specific, legible instructions for administration, storage, and disposal
  6- the name and the strength of the medication
• The period of use of the medication will be for a limited time and not given “as needed”.
• Over the counter medications will only be given with written parental consent and written instruction from child’s health care provider. If a parent is a health care provider, permission must come from a non-related health care provider.
• Over the counter products should be kept in the original container as sold by the manufacturer and labeled with the child’s name by the parent.
• OTC products will be given according to the instructions on the container unless there is a physician’s note stating alternative instructions.
- Staff are trained in the 5 rights of medication and will measure out only one child’s medication at a time to prevent errors.
- Staff will always use the measuring device that comes with the product.
- Annually ACW will obtain new authorization forms for sunscreen, insect repellent, and over-the-counter products such as diaper ointment/cream, skin lotion, toothpaste, etc. Staff will notify parents as to when each of these items was applied to their child. Sunscreen will be applied at least 30 minutes prior to children going outside. Insect repellent will be applied according to the manufacturer’s instructions to the children outside and will not be sprayed on or around their faces and will not be applied more than twice per day. If parents have not signed a new permission slip, we do have on file an all-inclusive permission statement, and children will have sunscreen on before going outside. 
  (Criteria 5A.21, 10B.19)

**STATEMENT OF GUIDANCE/DISCIPLINE POLICY (Criteria 10B.18)**

A Child’s World uses guidance as a means of helping the child(ren) learn acceptable ways of dealing with their feelings and desires. Our primary goals are to help children develop self-control and teach life long skills. It is about teaching, not punishing children for their behavior. This sets the foundation for children as they learn to be in charge of themselves. We teach children to show respect for themselves, others, and property. The staff will not allow children to hurt themselves, others, or the environment.

**Infants:** Behavior Guidance for an infant begins with consistently and responsively meeting infants’ needs. This will build the trust needed to help children listen and follow directions as they grow. Infant cries are immediately responded to as this establishes the foundation of emotional security for later self-control. Infants are talked to as things are happening to build that foundation of understanding, “I am picking you up to change your diaper.” “You are all done eating so I am going to wash your face.” Infants are never picked up from behind as this may startle them.

**Toddlers:** Providing structured daily routines and responding with flexibility allows toddlers to have more control over their environment. We work hard to create a “yes” environment by keeping activities accessible, having duplicate toys, and have reasonable expectations of the children. Learning self control and appropriate behavior is a life long process. As adults, we model this behavior and help children begin to understand the way the world works and their place within it.

**Preschool:** Helping children acknowledge their emotions and control their reactions is our goal when guiding behavior. We help guide positive conflict resolution when a situation arises. We help children start to develop empathy and how another friend might be feeling. We look for everyday “teachable moments” to practice these skills.

**School-Age:** Our goal is that children learn to make positive choices so that someday when adults are not there to guide them, they will know what to do. School-Agers are allowed to make as many decisions as possible within necessary limits.

Staff will direct children toward acceptable ways of behavior. The methods used include:

- Praising, encouraging and modeling positive behavior.
- Setting clear, reasonable, and consistent rules and explaining them to the children.
- Planning developmentally appropriate activities.
- Observing the environment and children for possible causes of behavior.
• Allowing flexibility within routines.
• Encouraging problem-solving skills in children.
• Maintaining developmentally appropriate expectations of children.

If and when unacceptable behavior occurs, staff will use one or a combination of the following guidance techniques:

• Ignoring minor misbehaviors.
• Verbally reminding children of the rules.
• Redirecting children to another area.
• Providing natural and logical consequences for behavior.
• Find a spot within the room for a reset.
• Counting to three to give the child a chance to correct their behavior
• Using the Nurtured Heart Approach limiting negative attention
• Working with parents in partnership to develop guidance techniques.

The following type of “discipline” will NOT be allowed at the Center:

• Use of any physical restraint, other than to hold a child when necessary to protect the child or others.
• Corporal punishment that includes but is not limited to: rough handling, shoving, hair pulling, ear pulling, shaking, kicking, biting, pinching, hitting, and spanking.
• Emotional abuse that includes but is not limited to: name calling, ostracism, shaming, making derogatory remarks about child or the child’s family, and using language that threatens, humiliates or frightens a child.
• Punishment for a lapse in toilet training.
• Withholding of food, warmth, light, clothing, or medical attention as punishment. (Criteria 1B.8, 1B.10)

The center follows all federal and state civil rights laws and has a responsibility to protect the safety of all children as well as that of volunteers and staff. Children and staff are expected to follow the model of character development that focuses on the values of respect, caring, honesty and responsibility. If children hurt others, call others names or harm another child or staff person in a degrading and vindictive manner or a child engages in persistent unacceptable behavior (e.g., violent behavior, and inappropriate language), the following procedure will be followed:

1 Staff will observe and record the behavior of the child and staff response to the behavior.
2 Family will be verbally notified and receive an incident report indicating details of the incident.
3 Staff will work with parents and other professionals (if needed) to develop a plan to address the unacceptable behavior, which should include positive support strategies and reinforcements and use of excusatory methods only after other methods have been tried and failed.
4 Removal may be necessary:
   o If another child(ren) or staff member is repeatedly injured by a child in anger.
   o If a child throws, kicks or pushes furniture, is destructive to a child, staff or center belongings.
   o If constant disruption of the classroom routines are cause by a child.
5 If the unacceptable behavior persists in spite of the use of the plan, or if a parent/guardian is unwilling to participate in the action steps of the plan the child may be suspended or terminated from the program. If a child is terminated ACW will provide assistance for finding alternative care or services to the best of the programs ability (Criteria 1E.1, 3B.2).
It is inappropriate for parents to discipline another child in the center if that child has done something inappropriate. Please refer the matter to the teacher in charge of the child at that time.

**BITING AND HITTING**

Unfortunately, biting/hitting will often occur in child care settings. This happens periodically in even the best child care programs and is an unavoidable consequence of group care. When it happens it can be scary, frustrating and very stressful for children, parents and teachers. It is not something to blame on the children, parents or teachers and unfortunately there are no quick or easy solutions. What teachers do when biting or hitting occurs:

1. Focus attention on the child who was injured and apply first aid.
2. The aggressive child will be redirected.
3. Simple language is used “Biting hurts!”
4. Explain to the child that they need to use gentle touches. Explain what our mouth is used for.
5. Accident/Injury/Incident Report will be given to parents of child who bites and the child bitten. Staff will track occurrences of biting or hitting by listing time of day, reason (if known), and staff response.
6. If the skin is broken both families will be contacted and notified that it is recommended both children be evaluated by their health provider.
7. Conference with parents will be scheduled at teacher’s discretion.
8. Strategies will be developed to reduce hitting/biting behavior.
9. Strategies will be evaluated.

Confidentiality will be maintained at all times (ex. name of the child who bites will not be released to the parents of a child who is bitten). Biting is a developmentally appropriate infant/toddler phenomenon. A child who bites other people is not on the path towards being a discipline problem. This behavior is not the fault of the home, the parents or the teachers. Learning not to bite is part of the socialization process. Delayed punishment does not work.

Infants and toddlers do not connect an event of one time of the day to be a consequence of an event, activity or action of an earlier time of the day. Young children’s understanding of cause and effect is very short-term oriented. Rather than correlating their parents’ disapproval to the biting incident, a child may associate the disapproval with his or her current action. This can be very confusing to the child. Teachers address the biting incident when it happens and assist the children in appropriate alternatives at that time. We discourage parents from punishing or reprimanding their child later in the day/evening for a biting incident, which occurred at the Center.

**ASSESSMENTS/OBSERVATIONS/INTERVENTION**

All children will be screened with an age appropriate, reliable developmental screening tool within the first three months of enrollment to create a developmental base line to which future assessments may be compared for individual child growth information. Formal observations are conducted by teachers using the Teaching Strategies Gold Assessment tool and the Ages and Stages Questionnaire. Prior to using the tool for formal assessments staff undergo training developed by the maker of the tool and certify their ability to use the tool consistently. (Criteria 4E.4) Other assessment tools the Director/Teacher or families find necessary may also be included. Assessments will be conducted formally three times a year by the teachers. Informal assessments and observations will be performed daily. Curriculum and child development goals will be developed from the assessments outcomes and shared with the child’s family during Parent -Teacher Conferences (twice per classroom). All information gained in the assessments and observations is
confidential and will only be shared with the child’s parent (guardian). If parents have questions or would like further information on the specific assessment tools, their usage and training for staff please see the director. (Criteria 4E.3)

A Child’s World may invite other agencies to help in assessments for individual circumstances (no progress shown within 4 months) or for general best practice screenings. Before such agencies are contacted for a screening/assessment a conference will be held with parents if applicable and a written authorization to share information with outside agency will be obtained. All information gained will be confidential and shared only with crucial staff. Agencies may include but is not limited to:

Speech/Language/Hearing Sciences at Minnesota State University Moorhead. Graduate Students provide free speech-language and hearing screenings to the children at A Child’s World. When scheduled, we will post the date in the children’s classroom. If you want your child to participate you will need to sign a waiver. The purpose of the screening is to measure the speech, language, and hearing abilities of the children while providing valuable clinical experience to MSUM students. All screening procedures will be supervised by MSUM faculty certified in speech, language and hearing. Your child may be involved in both individual activities and observed within their classroom. Your child’s results of the screening summary report will be shared with you by letter. (Criteria 4C.2)

Fargo Cass Public Health. Vision screenings for children in PreK.

Sight 4 Kidz, Lions Club International, Vision screenings for all children.

The Right Track Program which is a free program for all North Dakota children, birth to three years of age. Right Track wants every child to have the best start in their physical, social, emotional, and intellectual growth. Right Track has a Child Development consultant ready to come on site and provide free developmental screenings, ideas on stimulating your child’s development and information and references to local, state, and national organizations. Staff will initiate these screenings for all ND resident children under the age of three within the first three months of enrollment.

Private Therapy Companies (Anne Carlson, Pediatric Therapy Partners, Sanford, Early Intervention). A Child’s World opens our door to allow screenings, assessments and therapy to take place on site to aid parents’ busy schedules. Parents are always welcome to join for these activities.

Fargo Public Schools, for assessment of children 3 years and older who live in the Fargo school district and showing signs of a developmental delay.

It is the intention of A Child’s World to help every child and to offer them the best learning environment, to the best of our ability the center also recognizes our environment may not be the best fit for every child and with input from family, teacher, director and any outside agencies, a different placement for the child may be necessary.

**CHILDREN WITH SPECIAL NEEDS**

All Children with diagnosed special needs (ex. food allergies, diabetes, asthma, ADHD, etc.) are required by licensing to have a care plan signed by a parent. Care plans must be updated yearly.

For best practice, it is recommended to have the child’s health care provider sign the care plan. It is also recommended for emergency medication and/or equipment specified in the care plan to be provided by the
parents to have available onsite while your child is present.

**ACCIDENT PROCEDURES**

Injuries at the Center will be documented and kept on file. If your child is injured while at the Center you will receive a written report of what happened and what action was taken. Parents must read and sign the incident report. This report will be stored at the Center in the child’s file and a copy will be given to you.

The staff members are required by law to have first aid and CPR training. All injuries will be cleaned with soap and water, and covered with sterile bandage when necessary. We are not able to use first aid creams or gels due to possible skin allergies and adverse reactions.

**EMERGENCY PROCEDURES (Criteria 10B.19)**

**Fire**

Upon hearing the fire alarms sound, staff will immediately exit the building with ALL children. The center has an evacuation plan posted. If evacuation is necessary our fallout shelter is Madison School, located two blocks south of the center.

**Tornado**

The director and teachers will monitor threatening weather conditions. In case of danger and/or a tornado warning, staff and children will seek shelter in the basement. Older children will be positioned with backs against the wall, head down and hands over their heads. Staff will place infants in their laps and shield them with their arms. We will remain in the basement until the threat of a tornado has passed.

**Winter Storm**

When the Center is open and weather situations appear serious, the Center Director and the CEO of the YWCA Cass Clay will monitor weather reports and conditions and whether the Fargo Public Schools close or the Fargo Police Department issues a no travel advisory within city limits. If the Center needs to close, the Center Staff will notify parents of the early closing via phone call, remind or Brightwheel. If the center needs to close before 6:30am, the decision will be made before 6:15am, and the Director will notify families and staff via the Remind system, radio, television, Facebook, and the website: www.ywcasassclay.org of any closing or late opening announcements.

**Shelter in Place**

The center is on the Fargo Code Red System, which notifies areas in the community of emergency events that affect them. In the event of a Shelter in place, staff will evacuate children to the gym where there are supplies to seal the center off until authorities give the ok.

**Lock Down**

In the event of a suspicious person or the action of an unauthorized person to pick up a child the center will notify rooms to lock themselves in the room and move the children out of sight until the all clear is given. The unauthorized person will be asked to leave the premise and if non-compliant police and family will be notified. If person is compliant family will be notified and the all clear given to the rooms.

**Safety**

Safety drills will be practiced with the children. Written notification will be given to families when a drill occurs. Fire drills will be practiced monthly and Tornado drills will be in the months of April through September. Lockdown and Shelter in place drills will be practiced randomly but no less than semi-annually.
DROP OFF/PICK UP/AUTHORIZATION TO RELEASE CHILD

Every room has sign in and out sheet. All authorized persons dropping off or picking up a child(ren) must write time in/out and initial on every child’s sheet daily. The Center is not responsible for your child until your child is signed in and once you sign your child out. Upon enrollment parents/guardian must designate at least one person who in an emergency may pick up their child. Parent/Guardian picture is posted with the child’s emergency contact information; everyone on the list must either already have a picture on file or present a photo ID before a child will be released. Please call the center or leave a note if someone other than the child’s legal guardians will be picking up for the day. The person picking up must present a photo ID if the staff does not know them. Parents are required to complete an Authorization to Release Child Form in an event that you, a spouse, or emergency contact person cannot pick up your child(ren). This form will be kept in each room for easy access. This form must be completed each time a person not on your emergency card picks up your child(ren). After completion, the form will be placed in your child's file. If a child is not picked up by closing time a late fee will be charged. If a child has not been picked up at closing time, the teacher in charge of closing will call family or emergency numbers. The teacher will stay with the child until someone comes. If the teacher is unable to reach anyone on the child’s emergency list after fifteen minutes the director will be contacted. If no one has been found to pick up the child one hour after the Center closes, the Fargo Police Department will be contacted. Information about the child’s location will be left on the door of the Center.

In the event that an unauthorized person attempts to pick up your child(ren) from the Center, staff will:
- Inform the person that he/she is unauthorized to pick up the child (ren).
- Show a copy of the authorization.
- Contact the authorized person(s) and the Director to inform them of the problem.
- Call the police and the center will placed in Lockdown if unauthorized person does not leave.

In the event of a divorce or family separation both parents have the right to pick up their child unless a court document restricts that right. The enrolling parent, who chooses not to include the other parent’s name on the authorized list for pick-up, must file an official court document. If there is no documentation, the program may release the child to either parent, provided that parent documents biological or adoptive parenthood of that child. The parent must provide the center with updated legal documents when any changes occur.

It is understood that for shared custody, each parent has the right to create their own ‘authorized to pick up’ list. The center is not to be involved in family disputes over who may or may not be allowed. A shared custody agreement for pick-up of child(ren) must be created with the Director.

ACCREDITATION/BRIGHT AND EARLY ND

ACW is an accredited child care center: one of only 10 in the state of ND. Licensing and accreditation are two different things. Licensing is required by the state but is minimal health and safety requirements. Accreditation is voluntary and includes minimal health and safety plus best practices in early education.
Our accrediting organization; National Association for the Education of Young Children (NAEYC) has created 10 standards that measure the quality of early childhood programs. The standards were created by a blue-ribbon panel of early childhood experts and are based on the latest early childhood research. These ten standards are:

➢ Promote positive relationships for all children and adults to encourage each child's sense of individual worth.
➢ Implement a curriculum that fosters all areas of child development: cognitive, emotional, language, physical, and social.
➢ Use developmentally, culturally, and linguistically appropriate effective teaching approaches.
➢ Provide ongoing assessments of a child's learning and development, and communicate the child's progress to the family.
➢ Promote the nutrition and health of children, and protect children and staff from injury and illness.
➢ Employ a teaching staff that has the educational qualifications, knowledge, and professional commitment necessary to promote children's learning and development, and to support families' diverse needs and interests.
➢ Establish and maintain collaborative relationships with each child's family.
➢ Establish relationships with and use the resources of the community to support the achievement of program goals.
➢ Provide a safe and healthy physical environment.
➢ Implement strong personnel, fiscal, and program management policies so that all children, families, and staff have high-quality experiences.

Classroom and program portfolio's document how the program achieves the above ten standards. Family’s and staff rate the program's strengths and weaknesses through surveys. The final step in achieving an accreditation rating is: a professional child care expert observes the program, verifies the report by checking documentation in the program and classroom portfolio’s and the survey findings. A program must achieve an 80% or above in all 10 criteria in order to obtain an accreditation rating.

In 2010, Cass County started an Early Childhood Rating and Improvement System pilot (ECRIS) in which ACW participated. ECRIS has now been rolled out statewide by the ND Department of Human Services as Bright & Early North Dakota. Bright and Early is a voluntary program to support early childhood development and quality child care that will help foster a child’s early success by providing training, support, and resources to child care professionals.

CURRICULUM

Our curriculum is based on the development of the children. We do a variety of activities in our day including sensory, social/emotional, cognitive, fine/large motor, music/language, creative and science both indoors and outdoors. We also feature an anti-bias curriculum which teaches children to respect their own culture as well as that of others and encourages children to experience people of diverse cultures working together as unique parts of a whole community (Criteria 2A.6). Along with our anti-bias curriculum we use the word “friends” to get the attention of our class instead of “guys” and we address the teachers as Miss, Ms. or Mr.

Our art/creative projects emphasize the “process” not the “product.” Therefore, you may not know exactly what your child has made and is bringing home. Ask your child about the process of how they made the project, not “what is it?” You will be amazed at the imaginative answers.
As your child goes through our program, we introduce numbers, colors, letters and other academic information. Through Creative Curriculum, we start teaching the children in our infant room by utilizing teachable moments and incidental teaching. We add words onto the children’s sentences: “Teacher, I have a truck.” “Yes, I see you have a red truck. What else do you see that is red?” Or “What does your red truck do?” “How many hops does it take to get to the gym?” “I bet if you count to five I will be done wiping the table and you can use it.” We will not use any worksheets or coloring books in the younger age groups. Many parents may not realize that these items not only do not help children learn, but also may hinder a child’s learning. We focus on what a child should be doing instead of what they should not be doing. Instead of saying “please do not throw the books” we say “we need to leave the books on the shelf.” When you focus on what a child should not be doing it has the opposite effect of what you want, so focus your statement on what you want.

As the children progress through the center the teachers will emphasize learning on “school skills” working on where we live (address and phone numbers), the alphabet, writing names, learning shapes and numbers. We will also work on self-help skills such as zipping, snapping, dressing self and tying shoes.

**WATER PLAY**

We use water play with the children. Inside water play is used in the sensory tables for children 18 months and older. Children 18 months and younger will not be allowed to play in sensory tables as the benefits do not outweigh the dangers. Children’s hands will be washed before and after any water play to cut down on the spread of germs. Children with open sores or a communicable disease will not be allowed to play in the sensory table. New water is put into the sensory table daily. Children will not be allowed to drink the water, and when the activity is done, the sensory table will be drained of all water and sanitized before reuse.

Outdoors, we use sprinklers and various types of water play in the summer. Swimming pools are not permitted because they are too dangerous and can harbor bugs and germs. Teachers will post any upcoming water play activities so parents can bring the necessary items. School Age children may attend public swimming pools as field trips in the summer months if a current aquatics permission form is on file with the director.

**OUTDOOR PLAY**

Outdoor play is a daily activity in which all children in the Center are expected to participate. If a child is well enough to be at school, the child is well enough to go outside.

Outdoor play is valuable to children’s physical well-being. Doctors have stated that fresh winter air is healthier for young children than the “stuffy closed up rooms.” Staff will determine the length of time spent outdoors based on the weather conditions and children’s interest. The National Weather Service temperature and wind-chill chart will be used to determine whether the exposure risks are too great. Children will not be allowed outside if the temperature/wind chill is at or below 0°F or temperature/heat index is at or above 90°F. If the temperature is in the danger range for extended amounts of time, the Director should be contacted prior to going outside. When outdoor play is unsafe, the gym or large motor room will be utilized instead.

During spring time when the snow is melting and our playground gets pools of water and mud, the children will still go outside and play. Children will not be allowed to walk, sit or play directly in the water or mud but
will be allowed to scoop, pour and touch the elements since natural elements are excellent teaching tools and learning experiences.

FIELD TRIPS

Field trips are planned for the children throughout the year. Staff will always inform parents of the field trip details prior to the field trip and provide families with the field trip protocol for parent volunteers. Children will be supervised at all times with proper staffing ratios, and if vehicular transportation is needed, staff will go through seat belt and transportation safety with the children and maintain the ND Child Passenger Safety Laws. Head counts will be performed before the children leave the building, during transportation, and upon arrival back at the center. If children are walking to a field trip, hands will be held with staff or another child; a walking rope or other device will not be used as it is unsafe. An adult will walk at the front of the line and at the back of the line. A written consent form is on file for all of the children. Field trips scheduled during our winter season will not take place if the temperature/wind-chill is at or below -10°F.

REST TIME

A cot, crib, or mat is provided for each child during rest time. All children attending full days will rest. Children who attend only in the afternoons will be expected to rest for a short period of time. Infants and toddlers nap according to their individual schedules. Infants will always be placed to sleep on their backs in a crib unless a Health care provider provides a note. Children who are not able to sleep but who have rested for 30 minutes may get up and play quietly. Children who have slept and get up before their friends will be allowed to get up and play quietly.

Parents are asked to bring a blanket, a pillow (if desired), crib sheet or beach towel and a backpack for their child. Nap bags/Back packs are for your child’s belongings to allow for storage, ease of transportation and to limit the spread of germs. Your child’s nap items, including blanket(s), pillow, crib sheet/ beach towel and soft washable comfort item all need to fit inside the bag. If all items can not fit inside the zipper bag you will not be allowed to bring them. All nap items need to be labeled with your child’s name. Nap bags are to go home at the end of each week to be washed.

TOILET TRAINING

Learning to use the toilet begins when your child is ready. Teachers will coordinate with families to make sure the child is showing signs at home and at the center. Working together will aid in the process, if only one side is dedicated it will hinder the process and cause frustrations for everyone. Child size bathrooms are located in our two year old room and up. Children will be frequently asked to use the bathroom and to at least try when they show interest in toileting. Children will not be forced to use the toilet since forcing a child can actually delay the process. Children have control over their bodies, and they want to stay in control. During training a child should only use a diaper or a side tear Pull ups during naptime. Switching back and forth between diaper and underwear is confusing and will hinder the process. Although accidents can be time consuming and frustrating for adults, children need to feel wet and have accidents in order to learn how to prevent them in the future. Please bring in several changes of clothing 3-6 (underwear, pants, socks and even an extra pair of shoes or slippers just in case).

CLOTHING
Play is children’s work so children need to wear clothes appropriate for their work such as washable, comfortable clothing and nonskid shoes. Expect clothes to get dirty. (All children will have a labeled storage container provided by the center for extra clothes.)

Each child should have two (2) complete changes of clothing (underwear, socks, shirts, and pants) labeled with their name to be stored at the center. During the winter months send snow pants, mittens, a hat and winter boots for outdoor play. Center staff will be responsible for bundling your child up, but you need to be responsible for sending the appropriate number and items of clothing.

The Center for Disease Control recommends that Child Care personnel not rinse out soiled clothes before they are put in a plastic bag. The procedure of rinsing soiled clothes increases the chance that germs will be spread. Therefore, soiled clothing will be bagged immediately after removing them from the child. If clothing is severely soiled staff will call to ask if you would like them sent home or properly disposed of.

**PERSONAL ITEMS FROM HOME**

We willingly adhere to parental requests for the use of individual attachment objects such as favorite blankets, stuffed animals, pacifiers and items that are washable and soft. We realize the adjustment to the Center, rest time, and new situations create the need for extra comforting for a young child. If these items provide extra security, we are pleased to accommodate. Please note that due to recommendation from the American Academy of Pediatrics and required criteria through NAEYC , our accrediting body, that we cannot have blankets and soft items in a crib with a child twelve months or younger.

Please do not send any toys, candy or gum to the center, as they are too easily broken, lost, or difficult to share with other children. If a child wants to bring a special picture, souvenir, book, tape, nature item or “found treasure” to share with the group, that is acceptable. Once the item is shared it needs to be stored in the child’s cubby. Please be sure it is labeled with the child’s name. The Center will not be responsible for breakage or lost items brought from home.

**TRANSITIONS**

When children are ready to move to the next room their chronological age, developmental age, enrollment date and room openings available in the next room are taken into consideration. The Director will visit with the child’s teachers to create the best plan for transition. Environmental considerations will be taken into account as well, such as a vacation or sibling expected at same time. The center encourages children, especially children 2 years and younger, to spend 9-12 months in each of the rooms before transitioning. Exceptions to the 9-12 month policy may be made based on developmental readiness and a child’s enrollment date. (Criteria 10B.23, 10B.24)

**FOOD PROGRAM-ALLERGIES**

A Child’s World participates in the Child Care Food Program which is a federally funded program administered by the U.S. Department of Agriculture. The program provides cash assistance which helps the Center to provide children with nutritious well balanced meals. Menus are prepared under the guidelines set forth by the USDA food program. Due to their regulations a signed dietary statement or food care plan provided by your child’s physician is required if children have a food allergy for which menu substitutions are necessary. Food allergies are posted in each classroom. The center will do our best to accommodate substitutions for religious purposes.
The Center will provide breakfast, lunch and an afternoon snack. Our kitchen manager will prepare the meals and snacks. The kitchen manager will prepare meals on a seven-week rotation with changes implemented when necessary or unavoidable. Parents of infants are encouraged to continue to breastfeed, the center will offer a place to nurse or pump if needed. Storage of breast milk will follow best practice guidelines. When and if parents start to use formula the center will provide Member’s Mark Formula (DHA & ARA - Lipids). Parents wanting to use a different formula need to sign a waiver and can provide other formula for their infant. Families wanting their child to continue to drink breast milk from a sippy cup at meal time will be allowed to under the following conditions: your child will be given/ offered their cup several times during the meal and when finished the cup will be placed out of reach to avoid any chance of another child being able to access the cup. Copies of the menu are available above the drinking fountain for you to take home. Menu items are subject to change and that day’s menu will be posted in the rooms and on the kitchen door.

HEALTHY LIVING POLICY

Using age-appropriate physical activity and nutrition as the children’s bodies grow, our healthy living practices establish the foundation for a lifetime of health. We will take the following steps to support children:

1. **Daily Movements.** Active play is vital for muscle, skeletal and brain development. Active play is encouraged with an emphasis on exploration and experimentation. Our goal is at least 60 minutes of daily movement for the children. Infants will participate in physical activity that encourages active exploration of their environment. Older children will take part in daily active play and practice basic movement skills. All children are encouraged to move their bodies in free play and planned activities. Through engaging activities such as dancing to music, performing actions with our bodies, walking in imitative and imaginative ways to get from one place to another, and playing interactive games, children will not only engage in physical activity but have fun while learning!

2. **Outside Play.** Children will be exposed to outside elements when weather conditions do not pose a significant health risk. Children must be dressed appropriately for the weather. Infants will have opportunities for independent gross motor play outdoors as appropriate for their skills and weather conditions. Toddler and Preschool aged children will be encouraged to enjoy physical activity and have the opportunity to explore their surroundings outside in a safe environment for 60 minutes daily. When weather conditions pose a health risk physical activities will take place inside.

3. **Free play most of the day.** Children should be active and moving to properly grow and develop. Seated times for older children will not exceed 15 minutes, or even shorter times depending on the age of children and the dynamic of the group. Infants will not use motion restricting equipment (e.g. swings, strollers, bouncers) for more than 15 minutes at a time. Using restrictive equipment may delay development such as rolling over, crawling, walking, and cognitive development. Teachers will ensure infants have unrestricted active play in between feedings and naps as appropriate for their age.

4. **We limit Screen Time.** Research shows children learn best from actual peer and adult interactions. Infants and toddlers are not allowed to watch television, videos, play on the computer or play video games. Pre-school children are not allowed more than 15 minutes of educational computer time per day. There is no cable service for regular TV watching and “G” rated movies in the preschool age group are limited to no more than one movie in a two week timeframe.
5. Nutrition. Physical activity is important, but moving our bodies achieves only part of our goal for healthy living. The food we eat also matters. We follow these guidelines to help children get the nutrients they need to grow and develop:

- Children are never forced to eat and will listen to their bodies when they are full.
- Encourage children to try foods at each meal.
- Serve meals family style as age appropriate to continue the learning process throughout mealtime.
- Adults sit and eat lunch with the children and refrain from eating food the children can’t have.
- We use a cycle menu that is adjusted each season.
- We serve milk with breakfast and lunch.
- No more than 4 oz. of 100 % juice will be served each day. We do not serve sugar-sweetened beverages or juices. (Juice is not served for children under 12 months)
- We follow the Federal Food Program’s guidelines for all meals and snacks served to children. (Criteria 10D.3)
- We provide children with whole grains for meals and snacks.
- Candy and gum are not allowed.
- We serve a variety of fruits and vegetables daily.
- We feed infants when hungry and hold them while they are being fed.
- We work with moms to make it easy to continue to breastfeed.

BIRTHDAYS AND CELEBRATIONS

The Center is willing to help celebrate a child’s birthday by serving preferably nutritious treats at snack time if desired. We encourage parents to join us for the party to help make the birthday child feel extra special. We do not recommend homemade treats. If treats are brought in, we still need to serve the planned snack to follow the food program guidelines.

The Center is NOT to be involved with children’s home/private birthday parties. Distribution of birthday invitations at the Center is not permitted. Invitations will need to be mailed to the children’s homes. Field Trips to celebrate a child’s birthday will also not be permitted.

We find many reasons to have special celebrations. Christmas, Kwanzaa, winter celebrations, events of the world (such as Olympics), Hanukkah, Halloween, July 4th, Mardi Gras, Valentine’s Day, Cinco de Mayo and Thanksgiving are times when we often have Center parties. Parents are encouraged to help celebrate and to inform us of other Holidays their family may celebrate. We are always looking for other cultural and ethnic celebrations that we could include into our program.

STAFF BABYSITTING POLICY

The Center is not responsible for employee conduct outside the scope of working hours.

PARENTS GRIEVANCE POLICY

If you have a grievance concerning something regarding our program, you should follow the following
procedure. If you do not feel that you have reached satisfaction, then you must continue through the process stopping when you feel you have satisfaction on the matter. Final decision lies with the CEO of the YWCA. (Criteria 10B.20)

1. Speak or Write to Room Teacher(s) directly
2. Speak or Write to Center Director directly and request a meeting should one be necessary.
3. Speak or Write to CEO of YWCA Cass Clay requesting a phone or in person meeting.
4. Should you feel your concerns require the attention of the licensor, please contact Coreen Ruona, A Child’s World Licensor at 701-239-6704.

ANIMALS VISITING THE CENTER

Prior to animals visiting A Child’s World Staff will ensure children do not have allergies and will obtain a copy of the animal’s vaccinations. Staff will supervise all interactions between children and the animal and instruct the children on safe behavior when interacting with animals to ensure safety of the children and the animal. Hand of both staff and children will be washed if children have direct contact with animals. Reptiles will not be allowed as visitors to the center because of the risk of salmonella.

VOLUNTEERS

The Center is a learning environment for adults so we encourage volunteers. Volunteers visiting the center must arrange times with the Director, sign a confidentiality waiver, and sign in and out every visit. Volunteers may help the teachers with activities and duties around the room but do not count in ratios. A volunteer will never help a child with personal activities such as toileting or changing a diaper, and a volunteer will never be left alone with the children.

INFECTION CONTROL AND DISINFECTION

All adults and children hands will be washed for 20 seconds with soap and warm running water. Hand sanitizer may be used for staff and children 24 months and older for hand that are not visibly dirty and when soap and water are not readily available.

Children’s hands are washed:

1. **Upon arrival at center**
   2. Before helping set the table for meals or snacks
   3. Before and after all meals
   4. After toileting or having diaper changed
   5. After sneezing, coughing or wiping noses
   6. Before and after using water tables or playdough
   7. After art activities (painting, gluing, etc.)
   8. After playing outside
   9. After handling pets, pet cages, or other pet objects
   10. Whenever hands are visibly dirty
   11. Before going home

Provider’s hands are washed

1. **Upon arrival at work**
   2. Whenever entering classroom to cover breaks, or if you leave classroom and re-enter.
   3. Before handling food, preparing bottles, or feeding children
4. Before setting the table for meals or snacks
5. After handling mouthed toys
6. After using the toilet, assisting a child in using the toilet, or changing diapers
7. After coming in contact with a child’s bodily fluids-blood, urine, stool, vomit, saliva, mucus, etc. (including wiping noses)
8. Before and after eating
9. After handling pets, pet cages or other pet objects
10. Whenever hands are visibly dirty
11. After cleaning up or handling garbage
12. After playing outside
13. After removing gloves for any purpose
14. Before giving medications
15. Before going home

Cleaning:
1. All toys are washed daily, weekly or when dirty. Infant/Toddler toys are washed as mouthed.
2. Toilets and sinks are cleaned and disinfected daily.
3. Tables are sanitized before and after each meal
4. Blankets and sleep toys are sent home each week for cleaning
5. Cots are disinfected each week or between use if used by different children
6. Floors are swept and vacuumed daily
7. Bathrooms are washed daily.

CLOTH DIAPERS

We applaud the effort of trying to help the environment, but reusable diapers are against the North Dakota Licensing Rules and Regulations and therefore not allowed in the center.

NO SHOES IN INFANT ROOM

Since infants are on the floor and put everything in their mouths, the infant room is a no outside shoe area. Please help the infant teachers by either removing your shoes before entering the room or put on the shoe booties that have been provided for you outside the room door.

DAILY SCHEDULES

The room’s daily schedules are posted in the room and should be a part of your welcome letter.

INFANT ROOM SPECIFICS

CHANGING
• Diapers are checked for and changed if soiled every two hours, upon need and upon waking from a nap (Criteria 5A.17). Diapers are changed only in diaper changing areas (diaper table and bathrooms) and a child is never left unattended on a changing table,

FEEDING
• Please supply labeled bottles and labeled lids
• Infants are fed on demand unless written orders from a health care provider state otherwise.
• Place already made bottles into the refrigerator upon arrival (breast milk may go in the freezer). Do not put the bottles in the door of the fridge to ensure temperature stability.
• Bottles of formula to be warmed will be warmed in a crock pot with the cover on.
• Bottles of breast milk to be warmed will be warmed individually in containers of warm water. Breast milk will never be warmed in the microwave or the crock pot. Containers in which breast milk has been warmed are sanitized prior to next use.
• Bottles of formula or breast milk are only good for 1 hour after being served to an infant; any uneaten formula or breast milk will be thrown after each feeding. (Criteria 5B.7)
• Infants will always be held for bottles; bottles will never be placed with an infant in a crib or propped.
• Infants will only be fed baby food/table foods that have been previously introduced by parents.
• Fish, eggs, peanut products, etc. have been typically avoided before one year of age. Due to the discrepancy among physicians, it is best to ask parents to see what their infants’ physician recommends as far as what food to offer and when.
• No Honey until after 1 year of age.
• Infant will not be served juice; plain fruit is preferred.

SLEEPING
All infants under 12 months of age will be placed completely flat on their backs in a safety approved crib or playpen for sleep. Once placed on their back the infant will be allowed to assume any comfortable sleep position. Infants are not allowed to sleep in car seats or any other piece of infant equipment. If a parent wishes their child to be placed in an alternative sleep position, or in another device/equipment for sleep, licensing requires a written order from a health care provider stating the medical reason and time frame to follow the order as well as written parental permission. Due to the recommendation of AAP and required NAEYC criteria 5A.22 and 5A.24 c children may not have any items in their crib besides a pacifier, including blankets. Children may have a thin sleep sack to substitute for a blanket. Bibs must be removed for sleep. Sleeping infants will be visually checked and documented every 15 minutes or sooner.

SHOES
Adults and children shall remove or cover shoes before entering an infant classroom. Adults may wear shoes, shoe covers or socks that are used only in the infant play area.

PACIFIERS
We recognize the need for pacifiers to help encourage an infant’s sucking reflex and because of a possible link to the reduction of SIDS, and staff will willingly adhere to parental requests to use a pacifier but will follow this policy in doing so:

• Work with families to recognize the sucking reflex diminishes after 3 months of age and substituting items of comfort instead to wean an infant off at an earlier age to discourage over attachment to and dependence on a pacifier. Parents will provide at least two pacifiers, labeled with their child’s name using a nontoxic marker.
• Staff will inspect pacifiers for tears or cracks prior to a child’s usage.
• Staff will wash a pacifier with soap and water before and after a child’s usage to ensure cleanliness.
• Attachments (straps, clips, stuffed animals, etc.) for use with a pacifier will not be allowed.
• If an infant refuses a pacifier, the pacifier will be kept away.
• If a pacifier falls out of a child’s mouth, it does not need to be re-inserted.
• Pacifiers will never be coated with a sweet solution.
• Pacifiers will be cleaned and stored in a fashion that leaves them open to air, separate from the
diapering area and other personal items.

- Children sleeping with a pacifier will be visually and physically checked on to see child’s face, coloring, breathing, and pacifier placement.
- Pacifier usage outside of crib where there are mobile infants is discouraged.
- If there is suspicion that a pacifier has been shared with another child, the staff member shall clean the pacifier and make sure the nipple is free from fluid that a child may ingest. If there is such fluid, the pacifier must be discarded.
- Recognize that pacifier use, while beneficial for SIDS, has links of increased ear infections and oral health issues for children.

**DISCIPLINE**

Behavior Guidance for an infant begins with consistently and responsively meeting infants’ needs. This will build the trust needed to help children listen and follow directions as they grow. We respond immediately to infant cries are because this establishes the foundation of emotional security for later self-control. We explain to infants what is happening to them and why in order to build that foundation of understanding: for example, “I am going to pick you up to change your diaper”, and “I need to wipe your nose so you can breathe.” We will not pick up infants from behind because they may be startled.

**LARGE MOTOR RULES**

**Gym Rules**
- No more than 25 children allowed in the gym at one time.
- Children are to be supervised extremely closely.
- Shoes must be worn at all times.
- Only one child on a scooter at a time or one bike at a time.
- Children may not have a toy and a bike at the same time.
- No toys on the climber.
- Watch out for smaller children.
- Children’s hands stay off the screens.
- No pushing or hitting friends.
- All toys need to be picked up upon leaving the gym.
- Children will not be allowed to leave the gym by themselves to go to the bathroom. The Two’s and Three’s bathrooms may be used if proximity is a concern.
- Respect each other, children and adults.

**Outside Rules**
- Children need to listen to the teachers and follow directions.
- Watch for smaller children; no tag or chasing games when younger children are present.
- Sand and snow stay on the ground.
- Snow is not to be thrown at children or adults.
- Sand stays in the sand areas.
- Try to keep sand off the deck and off the grass.
- Keep balls close to the ground to help prevent them going over the fence. An adult needs to go with a child when retrieving a ball from outside the playground area.
- Children may not climb on or hang on any fence.
- Children play cooperatively without fighting.
- Any holes dug need to be filled in before leaving the area.
- Children’s hands need to stay off of the window screens.
• All toys need to be picked up and brought in at the end of every day. Each room is responsible for the toys they bring outside.