PARENT HANDBOOK

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www.learningexplorerschildcarecenter.com

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Ramsey, MN 55303

"WELCOME TO LEARNING EXPLORERS CHILDCARE"

We have taken the best of all types of childcare available and put them into one complete package. A parent can leave with the confidence that their child/ren are in a safe and caring environment. Our job is to focus on each child's social, physical and emotional development. A child's self-esteem, independence, and ability to learn need to be taught through positive experiences in and out of the classroom. Part of our job is to help you prepare your child for their upcoming years. If we work together, this can be obtained. It is Learning Explorers philosophy that children mature to reach their growth potential when they are provided with a stimulating, inviting and loving environment. Your child will be involved in activities that will enrich their social, emotional, and physical growth every day. Learning experiences in art, music, dramatic play, fine motor skills, gross motor skills, and readiness for kindergarten will be provided.

Good communication between parents and staff is essential. This handbook is an easy reference to all of the questions you may have. If a question comes up that you are unable to find an answer for, please ask. Also keep us informed of your concerns, needs and comments. You are important to us! A written childcare plan is available for you to review at any time, just ask a teacher or director for a copy.

OPERATIONAL SERVICES

Learning Explorers Childcare's space is 10,200 sq. ft of indoor space. We are licensed to serve 168 children.

Breakdown of Rooms			
Room Name	Capacity	Ages	Ratio of Caregiver to Children
Infant Rooms			
Infant 1	14 infants	6 weeks – 16 months	1:4
Infant 2	24 infants	12 months – 20 months	1:4
Toddler Rooms			
Toddler 1	21 children	16 – 35 months	1:7
Toddler 2	24 children	16 – 35 months	1:7
Preschool Rooms			
Campers	25 children	33 months – 1st day of kindergarten	1:10
Explorers	30 children	33 months – 1st day of kindergarten	1:10
Backpackers	30 children	33 months – 1st day of kindergarten	1:10

The Backpackers classroom is licensed and has a flex room to accommodate school-age care for before or after school care or non-school days. Families will be notified when this room is being used/operated as a school-age room. The ratio for school-age is operated with one caregiver per 15 children. The LEC facility is open from 6:00 am - 5:30 pm all year round starting April 28th, 2025. The building has a security system and monitoring device in each classroom. We offer an exterior fenced in play area with two different sizes of play equipment and an indoor play area when weather doesn't permit us to go outside. Learning Explorers Childcare is staffed with a director, assistant director, lead teacher in every room with assistant teachers and aides. We also have substitute teachers on standby when our staff is unavailable.

LICENSING INFORMATION

Learning Explorers Childcare accepts all children regardless of color, race, religion or sex. Learning Explorers Childcare accepts all children able to follow the rules, schedules and guidelines of the center. We are licensed by the State of Minnesota, Dept. of Human Service Division of licensing. Their phone number is 651-431-6500.

PRE-ENTRANCE CONFERENCE

Parents must visit our facility before entrance to meet your child's potential teacher and see briefly how our program is run. We can answer questions and familiarize parents with the area the child(ren) will be in. You will receive Learning Explorers Childcare enrollment and medical forms at that time. These will need to be filled out and returned by the parent and family doctor before the first day of attendance. Your children's Immunization Form and Health care summary will need to be turned in to us before the first day. There will be a two-week trial period to find out how well your child will adjust to our center. Within this two-week period, either the parent or director may pull the child out of enrollment without a two week notice given.

INFANT REGISTRATION

Our Infant 1 room is licensed for 14 infants and typically runs at 12 infants. Our Infant 2 room is licensed for 24 infants and typically runs at 16 infants. Infant space usually fills months in advance. In order to enroll your infant, a $150.00 registration fee, first week's tuition, and enrollment form is needed at the time of registration. This will guarantee your spot until the first day you attend.

WAITING LIST

When the program of your interest is full, you can choose to be put on our waiting list. You will be contacted when a position becomes available. If contact cannot be made, your name will be removed from the waiting list. Being on the waiting list does not guarantee a spot.

PARENT WHITE BOARDS/CLASSROOM DOORS

This is our information highway! Information is always posted. You may not always receive everything in your children's cubby. Look at the door and parent white board daily. Ask questions.

NAP AND REST POLICY

Naps and rest must be provided in a quiet area. All children will have a crib or cot provided for nap/rest time based on their age. Crib sheets are provided in the infant rooms. Separate bedding must be provided for each child in care. Bedding must be washed weekly and when soiled or wet. If blankets become soiled, we, or goes home ill, they will be sent home that day to be washed and returned the following day.

Nap time begins at 12:45 pm and ends at 3 pm. All children are expected to rest quietly for a minimum of 30 minutes. Children not sleeping after 30 minutes will be allowed to do quiet activities for the duration of nap time. Children are supervised at all times. We ask that you provide a blanket and pillow from home. We ask that you bring these items home the last scheduled day of the week to be washed and then returned.

Naps and rest must be provided in a quiet area that is physically separated from children who are engaged in activity that will disrupt a napping or resting child. Cribs, cots, and beds must be placed so there are clear aisles, and unimpeded access for both adults and children on at least one side of each piece of napping and resting equipment. Cribs, cots, and beds must be placed directly on the floor and must not be stacked when in use.

The parent/guardian of each child will be informed of our center's nap and rest policy at the time of enrollment. Young children sleep and rest best at routinely scheduled times. Our nap and rest policy is consistent with the developmental level of the children enrolled at the center.

Toddlers: One afternoon nap after lunch.

Preschoolers: One afternoon nap or rest time after lunch.

• A child who has completed a nap or rested quietly for 30 minutes must not be required to remain on a cot or mat or in a crib or bed.
• Children's heads are uncovered when sleeping.
• At all times, program staff remain alert to supervise children sleeping. Lighting will be sufficient to ensure that children can be seen by supervising staff.
• Toddlers and preschoolers nap with shoes on in case of emergency evacuation.
• Separate bedding such as blankets and possibly cot sheets are stored in a sanitary manner

and washed weekly and when soiled.

Nap and Rest Policy Specific to Infants:

Infants: Naps are determined by each individual infant. Multiple naps per day will wean to two naps per day and then wean to one nap per day by the time the infant transitions to the toddler room.

Infants sleep in safety approved cribs that are checked at least monthly by staff. When a transitional older infant room is present, a program may apply to licensing for a variance for the whole room, every child, to be on cots. If the variance is granted, written permission from each an infant's parent/guardian is also required. When an infant room is present with all ages of infants in the same room, and the program wishes to use cots for certain older infants, the program must submit to licensing a variance for each individual child to be on a cot. If the variance is granted, written permission from the infant's parent or guardian is also required. The program must ensure that each infant has a designated area to rest, uninterrupted.

Supervision occurs when a staff person is accountable for the children's care, can intervene to protect the health and safety of the child and is within sight and hearing of the child at all times except when:

When an infant is placed in a crib room to sleep, supervision occurs when a program staff person is within sight or hearing of the infant. When supervision of a crib room is provided by sight or hearing, the program will have a plan to address the other supervision component.

 Our cribs are not in a crib room and therefore within sight and sound of staff at all times.
 Our program has a crib room, and the crib room is:
 Staffed/supervised at all times by a staff person when an infant is sleeping in the crib room.
 Equipped with a baby monitor so that we can hear in the crib room and we also conduct frequent, visual checks of each sleeping infant in the crib room. We recommend documenting these visual checks.

• When an infant younger than one year of age is placed down to sleep, the infant's clothing or sleepwear will not have weighted materials, a hood, or a bib.
• When placing an infant to sleep, we will place the infant on the infant's back. Unless we have documentation from the infant's physician, advanced practice registered nurse, or physician assistant directing an alternative sleeping position for the infant. The physician, advanced practice registered nurse, or physician assistant directive must be on a form

developed by the commissioner and must remain on file at our center.
• An infant who independently rolls onto its stomach after being placed to sleep on its back may be allowed to remain sleeping on its stomach if the infant is at least six months of age or if we have a signed statement from the parent indicating that the infant regularly rolls over at home.
• The infant will be placed in a crib directly on a firm mattress with a fitted sheet that is appropriate to the mattress size, that fits tightly on the mattress, and overlaps the underside of the mattress so it cannot be dislodged by pulling on the corner of the sheet with reasonable effort.
• Nothing will be placed in the crib with the infant except for the infant's pacifier.
• The pacifier will be free from any sort of attachment. The pacifier will be labeled with the child's first and last name or other individual identifier, and the label must be in good condition and securely adhered to the pacifier.
• If an infant falls asleep before being placed in a crib, we will move the infant to a crib as soon as practicable and we will keep the infant within sight until the infant is placed in a crib. When an infant falls asleep while being held, we will consider the supervision needs of other children in care 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 where the airway may be blocked or with anything covering the infant's face.
• We may place an infant under one year of age down to sleep wearing a helmet if we have signed documentation by a physician, advanced practice registered nurse, physician assistant, licensed occupational therapist, or licensed physical therapist on a form developed by the commissioner.
• Placing a swaddled infant down to sleep is not recommended for an infant of any age and is prohibited for any infant who has begun to roll over independently. However, with the written consent of a parent or guardian, we may place the infant who has not yet begun to roll over on its own down to sleep in a swaddle.
• A swaddle is defined as a one-piece sleepwear that wraps over the infant's arms, fastens securely only across the infant's upper torso, and does not constrict the infant's hips or legs.
• If a swaddle is used, we will ensure that it does not have weighted materials, a hood, or a bib and is not so tight that it restricts the infant's ability to breathe or so loose that the fabric could cover the infant's nose and mouth.
• Prior to any use of swaddling for sleep, we will obtain informed written consent for the use of swaddling from the parent or guardian of the infant on a form developed by the commissioner.
• If a parent or guardian requests the use of a cradleboard for a cultural accommodation, we may request a variance to permit the use of a cradleboard. A variance for the use of a a cradleboard may be issued only by the commissioner. The variance request must be submitted on a form developed by the commissioner in partnership with Tribal welfare agencies and the Department of Health. If a variance is granted, we will check the

cradleboard not less than monthly to ensure it is structurally sound and there are no loose or protruding parts and maintain written documentation of this review.
• Monthly crib inspections are documented on the DHS Monthly Crib Safety Inspection Form for Childcare Centers. On this same form, we will also document an annual certification of the crib by going to www.cpsc.gov
• Cribs are not placed by any exposed heating units or near drapery cords.

MEALS

Learning Explorers Childcare provides a full breakfast. Parents are allowed to bring in any breakfast items for their child if they want anything other than what is provided. A full lunch, morning snack, and afternoon snack is also provided. Let your teacher know in advance if a special occasion arises and you wish to bring in a snack for the classroom. All treats must be store bought and in its original package. Breakfast is served from 8am until 8:30 am, lunch is at 11:00am to 11:45am and snack is at 3pm-3:15pm. Please let your child's teacher know if your child will be arriving late or departing early for meal count. Monthly breakfast, lunch, and snack menus are available for you to review at any time. All meals and snacks will meet USDA nutritional requirements.

DIAPERS / TOILETING

All children in diapers will have disposable wipes provided for them. The center provides Up & Up brand wipes. All diapers used at the center must be disposable. Diapers are changed every 2 hours unless needed sooner. Toilet training will begin when your child seems ready in the toddler room. Every child is different, so training will begin when your child starts showing signs of interest. Training will be a positive experience. We use a reward system which works very well. There will be no punishment or shaming when accidents do happen.

PERSONAL ITEMS & CLOTHING

Mark your child's belongings with first and last names. Keep one or more sets of seasonal appropriate clothing in your child's cubby at all times. Wide ranges of activities take place everyday. We cannot guarantee paint, sensory, or art products will wash out of your child's clothing. It is recommended that your child not wear their best clothes. Your child's cubby needs to be cleaned out daily. Children will be going outside daily weather permitting so please dress your child accordingly. The children will have access to a water bottle provided by parents. These water bottles need to be brought home daily to be washed and refilled. No weapons are allowed in the building. Toys from home are allowed only on teachers' request days.

HOLIDAYS

We are closed on all major holidays including two staff training days. There is **no rate reduction** if these days fall on your regularly scheduled day. These days off for each year are communicated in advance to families with a reminder via Brightwheel the week before in addition to the monthly newsletter. It is your job to know these dates. If the designated holiday falls on a Saturday or Sunday, the preceding Friday or the following Monday is granted as the holiday.

BAD WEATHER CLOSINGS

Learning Explorers Childcare may close due to excessive snow, dangerous road conditions or extreme cold. Notifications of closings will be posted on our Facebook page, Brightwheel, and on KSTP CHANNEL 5 school watch. Learning Explorers Childcare will try to give as much notice as possible. If a closing occurs during childcare hours, parents will be notified and must pick up children within two hours. A rate reduction does not apply for these days if they fall on your regularly scheduled days.

DAILY HAZARDS

Learning Explorers Childcare will conduct a daily inspection of potential hazards in the center as well as the outdoor premises. This will be logged daily.

FIRE & TORNADO DRILLS

All staff are trained on how to conduct fire drills and tornado drills. Fire drilsl will be conducted monthly all year round. These drills will be logged and kept at the front desk. Tornado drills will be conducted from April through September and also logged and kept by the front desk.

OUTDOOR TIME

Outdoor time is mandatory for children in our toddler classroom to our preschool classrooms. General precautions will be taken in consideration of weather to determine appropriate outdoor time. We are outside two times a day. If your child is well enough to be at Learning Explorers Childcare then they will be expected to join in outside. Please dress your child accordingly. Should the weather prohibit outdoor time, each classroom will have time inside the large motor area.

FIELD TRIPS

In the event of an in house field trip or special occasion, a note with the fee will be sent home in enough time to sign the permission slip and return. Learning Explorers Childcare will not transport children in personal vehicles. All field trips are within walking distance or brought into the center. Parents may be responsible for the cost of field trips.

ABUSE REGULATIONS

Learning Explorers Childcare is obligated and will report any signs of abuse and/or neglect. We are all mandated reporters and will follow all state guidelines that pertain to this.

INSURANCE

Learning Explorers Childcare meets all appropriate government requirements.

CONFERENCES

Written assessments will be done in November and again in late May for each child. The assessments will be given to parents to review. A copy of these assessments will be available to parents upon request. Written assessments will include your child's intellectual, physical, social and emotional development. During the rest of the year if you feel the need for a conference, your child's teacher will set up a time to meet with you. You will receive information throughout each month, all year long, explaining what is happening in your child's room. Lesson plans, newsletters of classroom happenings, and personal notes will be sent via the Brightwheel app. When the child, teacher and parent work together, amazing things happen. Our major concern is for the child, and parent to be comfortable and satisfied in every aspect while in our care.

WITHDRAWAL PROCEDURE

Please provide a written withdrawal note at least 2 weeks prior to leaving the program. The sooner we know about your withdrawal, the sooner we can find replacement enrollment. If a 2 week notice is not given, you will be liable for that payment period.

TUITION FEES

Tuition fee agreements are with your enrollment papers. This must be signed and returned. A registration fee of $150.00 per child plus the first week of tuition is due with

enrollment. Tuition payments are due on Friday every week for the following week. A $20.00 a day late fee will be added for payment not received on time. Your weekly fee is based on up to a ten hour day. You will be charged hourly for time after 10 hours. If you need a receipt for payment, this will be able to be found on the Brightwheel app. There is a $1.00 per minute late fee after our closing time, paid directly to the staff with your child during this time. If a child has been left after 15 minutes of closing with no parent call (and parents cannot be reached and the emergency contacts have failed) the child will be turned over to the local authorities.

- All holidays are paid for if the holiday falls on your reserved days.
- All payments will be made on the Brightwheel app and can be paid with checking account information with a .50 processing fee. Debit or credit cards can be used on the Brightwheel app to make payments with a processing fee of 2.5%.
- No reduction is given for absences due to illness,
- Vacations: One week at ½ pay rate per family per 12 month period, after one full year of tuition paid.
- Copays are due the first & fifteenth of the month. Those on assistance are responsible for payment that is not covered by the county.
- If you would like to temporarily remove your child from LEC care while holding their spot, 50% rate will need to be paid weekly. This will hold your child's spot for up to 12 weeks.

CHANGE OF SCHEDULE

A waiting period can occur if you request an enrollment change. Please let us know as far in advance as possible. If a child is absent from enrollment with no explanation for more than one week and no payment has been made, enrollment will be dropped.

TRANSITION

As your child develops, he/she will advance into the next age appropriate room. The teacher and director will decide which classroom is best for your child. The child will have some adjustment period and time to visit his/her new room. A new health care summary must be completed by a physician when a child transitions to their new room.

TRANSPORTATION

Parents are responsible for transportation to and from Learning Explorers Childcare. Only authorized persons are allowed to pick-up children. They must be 18 and must show a photo I.D. If someone needs to pick-up your child, we need a phone call or a message to your child’s teacher. If we don’t know someone else is coming, they will not be allowed to take the child whether they are on the pick-up list or not. Please bring your child into the classroom. No child

should be left anywhere in the building alone. When you pick your child up, they must stay with you at all times. Please do not allow your child into any other classroom but their own.

PARENT VISITATION

Parents are welcome to visit their child's classroom at any time during hours of operation. If your child has separation problems, we find it is better to leave promptly in order for them to begin their day. Teachers will comfort your child until they are comfortable and adjusted. We always say, "It's harder on the parent, then it is on the child". You may view the screen by the front desk if you choose for comfort.

PET POLICY

If the occasion arises and a pet will be on premises, all parents will be notified. All animals must be licensed and insured. No child can be allergic to the animal. The director will need to ok this prior to the visit. All parents will receive a notice letting them know when the animal will be here.

MISSING CHILD

If a child is missing or lost, the following procedure will happen:

- All staff will be notified immediately.
- The staff will be divided into teams and search the premises.
- A staff member will call 911.
- The missing child's parent will be notified.
- Staff remaining with other children will keep the children calm.

EMERGENCY AND FIRST AID PROCEDURES

All staff are trained in emergency procedures. In the event that medical attention is needed, one of two things occur:
* If immediate emergency treatment is needed 911 will be called and the child would be transferred to **Mercy Hospital in Coon Rapids, MN.** Parents will be notified immediately.
* If the injury is less serious, first aid is administered and the parent is contacted and will make the final decision for other medical treatment. Learning Explorers Childcare health and safety policies and procedures are reviewed monthly by health nurse and licensor.
* If your child does not have a dentist and has a dental emergency, Learning Explorers Childcare will use: **Rivers Bend Family Dental Care 14061 St Francis Blvd NW, Ramsey, MN 55303**

*** Learning Explorers Childcare EMERGENCY CARE PLAN** is located at the front desk and accessible for you to review at any time.

CORPORAL PUNISHMENT

Learning Explorers Childcare will enforce a policy that prohibits the following actions by or at the direction of a staff person.

- Subjection of a child to corporal punishment. This includes, but not limited to: rough handling, shoving, hair pulling, ear pulling, shaking, grabbing, kicking, biting, pinching, hitting or spanking.
- Subjection of a child to emotional abuse. This includes, but not limited to name calling, ostracism, making derogatory remarks about the child or child's family, using language that threatens, humiliates or frightens the child.
- Separation of a child from the group except as provided in Subpart 4
- Punishment for lapse in toilet training.
- Withholding food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior.
- The use of physical restraints other than to physically hold a child when necessary to protect the child or others from harm.
- The use of mechanical restraints such as tying.
- There is a zero tolerance policy for any type of corporal punishment towards any child at Learning Explorers Childcare.

BEHAVIOR GUIDANCE & TOLERANCE ISSUES

Learning Explorers Childcare provides a learning environment and childcare combined. We put the safety and well-being of the staff and children first. If a child, staff, or parent's behavior threatens the safety or is abusive towards others or a child, the staff or parent will be asked to leave the premises immediately. Further actions will follow if deemed necessary. Children copy what they hear and see. The staff at Learning Explorers Childcare is here to create a peaceful, relaxing, fun atmosphere. We are here to prepare your child for their upcoming years. We hope they enjoy coming and enjoy those around them as well. Our job is to teach a group of children at one time. In order for this to happen we need to have children here for the same reasons. Here is a copy of our Behavior Guidance that is in our Policies and Procedures book.

General requirements:
Our behavior guidance policies and procedures:

- Ensure that each child is provided with a positive model of acceptable behavior.

- Are tailored to the developmental level of the children we are licensed to serve.
- Redirect children and groups away from problems toward constructive activity in order to reduce conflict.
- Teach children how to use acceptable alternatives to problem behavior in order to reduce conflict.
- Protect the safety of children and staff persons.
- Provide immediate and directly related consequences for a child's unacceptable behavior.

Persistent unacceptable behavior:

We deal with persistent unacceptable behavior by increasing the amount of staff guidance and time.Our staff deal with persistent unacceptable behavior by:

- Observing and recording the behavior of the child and the staff response to the behavior.
- Developing a plan to address the behavior documented in item A in consultation with the child's parent and with other staff persons and professionals when appropriate.

Prohibited actions:

Our behavior guidance policy prohibits the following actions by or at the direction of a staff person:

- Subjection of a child to corporal punishment. Corporal punishment includes, but is not limited to, rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting and spanking.
- Subjection of a child to emotional abuse. Emotional abuse includes, but is not limited to, name calling, ostracism, shaming, making derogatory remarks about the child or the child's family, and using language that threatens, humiliates, or frightens the child.
- Separation of a child from the group except within rule requirements.
- Punishment for lapses in toilet habits.
- Withholding food, light, warmth, clothing or medical care as a punishment for unacceptable behavior.
- The use of physical restraint other than to physically hold a child when containment is necessary to protect a child or others from harm.
- The use of mechanical restraints, such as tying.

Separation from the group:

No child will be separated from the group unless we have tried less intrusive methods of guiding the child's behavior which have been ineffective, the child's behavior threatens the well-being of the child or other children at the program. A child who requires separation from the group will remain within an unenclosed part of the classroom where the child can continuously be seen and heard by a program staff person; the child will remain within sight and sounds of a staff person at all times. When separation from the group is used as a behavior guidance technique, the child's return to the group is contingent on the child's stopping or bringing under control the behavior that precipitated the separation, and the child will be

returned to the group as soon as the behavior that precipitated the separation abates or stops. A child between the ages of six weeks and sixteen months will not be separated from the group as a means of behavior guidance.

Separation report:

All separations from the group will be noted on a daily log. A notation in the log will include the child's name, staff person's name, time, date and information indicating what less intrusive methods were used to guide the child's behavior and how the child's behavior continued to threaten the well-being of the child or other children in care. If a child is separated from the group three times or more in one day, the child's parent will be notified, and notation will be indicated on the daily log. If a child is separated five times or more in one week or eight times or more in two weeks, the procedure in persistent unacceptable behavior will be followed.

SEPARATION

When a child's behavior is cause for concern and/or safety of others, and the staff has tried but been proven ineffective in guiding the child's behavior in a positive direction, the child will be separated from the group. The child will remain in the room or presence of the director and return to the group after the child discusses his/her behavior and has calmed down. Children up to 16 months shall not be separated from the group. If the child is causing physical harm and does not show signs of calming down, the parent will be called and asked to pick up the child. If this is a persistent problem, the Learning Explorers Childcare Tolerance Policy will go into effect. A Separation log will be kept in the classroom closet.

GRIEVANCE POLICY

In the event that you have a concern, please bring it to your child's teacher immediately. He/She will gladly work on it with you. Voice your resolution to the problem. If you are not satisfied with the response, contact the director as soon as possible. Positive communication is extremely important to the environment at Learning Explorers Childcare. The children must feel comfortable and well taken care of at all times. Our goal is to provide a safe and welcoming environment.

POLICIES AND PROCEDURES

A copy of our Policies & Procedures for rule 3 book, our Childcare program plan book, forms and logs manual is available at the front desk for you to review at any time.

TAXES / FLEX PLANS

Check with your tax advisor for details on tax credit. The director will sign flex plans that you have prepared. Leave them at the front desk and they will be returned to you as soon as possible. Receipts can be emailed out upon request or can be accessed in the Brightwheel app at any time. Yearly receipts along with the Fed. Tax I.D. number will be available via the Brightwheel app, these can also be printed upon request.

RESEARCH AND PUBLIC RELATIONS

Learning Explorers Childcare will ensure that written permission is obtained from a parent before a child is involved in experimental research or public relations activity involving a child while at the center. A separate written permission form must be obtained before each occasion of experimental research or public relations activity or on a form that annually summarizes all research and public relations activities that will be undertaken. This permission form will be maintained in your child's file.

IMMUNIZATION & HEALTH RECORDS

These will need to be filled out and returned by the parent and family doctor before the first day of attendance. It must be renewed each time a child moves from one room to another or changes age brackets. New immunizations must be on record. Please notify us when your child receives new immunizations.

ADMINISTRATION OF MEDICATIONS

Learning Explorers Childcare Staff can administer medication if the following procedures happen:

- A medication permission slip is filled out completely.
- All medications must be in the original containers, complete with prescription labels stating the child’s name and the dosage amount.
- Medication must accompany a doctor note.

Tylenol, Ibuprofen, and Pain reliever medications:

These types of medication require a doctor's note and will not be administered without one. The decision to administer such medication on-site will be made by LEC Management on a case-by-case basis. Our health consultants advise that children needing these medications are most likely not well enough to attend daycare. These types of medications mask our symptoms which would cause us to keep an ill child in our care causing additional spread of illness.

ILLNESS POLICY

Learning Explorers Childcare must strictly enforce the policies below.
The State of Minnesota regulates the laws regarding sick children and when they must be excluded from a childcare center and we are required to follow these regulations. We have certain guidelines we must use regarding illness policies. We are licensed as a "well" childcare center. We are committed to providing you a safe and healthy environment for your child. If you have any questions regarding our policy, please contact us before you bring your child. If your child becomes sick while they are here at Learning Explorers Childcare, they will be moved to a quiet space away from the group to rest, while being monitored until you can pick them up. If you can not be reached, we will try your emergency contacts. We need your child picked up as soon as possible to protect the other children. Parents are required to notify us if your child has a contagious disease and we will report it to the other parents. We are not licensed to operate a "sick" child program. Learning Explorers Childcare management team makes all final decisions on all children returning from illness. Children with illnesses are not allowed to return until a physician and/or parent has certified that the child is no longer a health threat to the center and all symptoms have subsided. Children returning from being out ill need to be able to participate in daily activity and group care. If a child requires constant holding, comforting, very emotional, and behaviorally acting out they will be sent home. These are all signs of a child not being fully recovered from being ill and needing more care than group childcare can provide. When a child is home with illness, full tuition is still due, unless otherwise discussed with the director. **We will not admit any child who was sent home due to illness until 24 hrs without medication has passed.** A doctor's note may be required and accompany the child when returning. Parents are required to notify the center within 24 hours exclusive of weekends and holidays, when a child is diagnosed by a medical source as having a contagious reportable disease.

GENERAL EXCLUSION GUIDELINES FOR ILL CHILDREN

Certain symptoms in children may suggest the presence of a communicable disease. Excluding an ill child may decrease the spread of the disease to others in childcare settings. Recommended exclusion varies by the disease or infectious agent. Children with the symptoms listed below should be excluded from the childcare setting until symptoms improve; or a health care provider has determined that the child can return, and children can participate in routine activities without more staff care than usual.

Exclude children with any of the following:

Illness: Unable to participate in routine activities or needs more care than can be provided by the childcare/school staff.

Fever: An elevation of body temperature above normal and accompanied by behavior changes, stiff neck, difficulty breathing, rash, sore throat, and/or other signs or symptoms of illness; or is unable to participate in routine activities. **Measure temperature before giving medications to reduce fever.** May return fever free after 24 hours with no medications.

Axillary (armpit) temperature: 100o F

Oral temperature: 101o F or higher

Rectal temperature: 102o F or higher

Ear temperatures are not recommended because of inconsistent and inaccurate results. Each manufacturer may have different temperature ranges, which makes setting standards difficult.

Signs/Symptoms of Possible Severe Illness: Child is unusually tired, has uncontrolled coughing, unexplained irritability, persistent crying, difficulty breathing, wheezing, or other unusual signs for the child. Exclude until a healthcare provider has done an evaluation to rule out severe illness.

Diarrhea: Diarrhea is defined as an increased number of stools compared with a child's normal pattern, along with decreased stool form and/or stools that are watery, bloody, or contain mucus. A child who has three or more abnormally loose stools since admission that day will be sent home. Exclude until 24 hours after diarrhea stops.

Vomiting: Child has vomited two or more times in the previous 24 hours. Exclude for 24 hours after the last episode of vomiting.

Mouth Sores with Drooling: Exclude until a medical exam indicates the child may return or until sores have healed.

Rash with Fever or Behavior Change: Exclude until a medical exam indicates these symptoms are not those of a communicable disease that requires exclusion.

Eye Drainage: No exclusion, unless the child has a fever or is not healthy enough to participate in routine activities.

Pink eye: No exclusion, unless the child has a fever or is not healthy enough to participate in routine activities.

Unusual Color of Skin, Eyes, Stool, or Urine: Exclude until a medical exam indicates the child does not have Hepatitis A. Symptoms of Hepatitis A include yellow eyes or skin (jaundice), gray or white stools, or dark (tea or cola-colored) urine.

RSV/Croup/Respiratory Virus: No labored breathing/rapid breathing/extreme nostril flaring, fever free for 24 hours, manageable cough, and being able to participate in routine activities.

Strep: Fever free for 24 hours, 24 hours after starting antibiotics, and being able to participate in routine activities.

Head Lice: Nit free and no live lice.

Hand, Foot, and Mouth: Fever free for 24 hours, no open sores, no drooling, sores must be scabbed over, and being able to participate in routine activities.

The child **may not return** to Learning Explorers Childcare until they are symptom free for **24 hours and** are able to fully participate in normal daily activities. If your child has been exposed to measles, mumps, chicken pox, whooping cough, diphtheria or scarlet fever, it should be reported to the director immediately. A doctor's note will be needed for return. Notification to all parents will be given on all contagious and reportable diseases.
Please help us keep illness down in our center and keep our staff healthy as well. This is beneficial to everyone.

Other informational numbers:

Dept. of Human Services	651-296-3971
Poison Control	1-800-222-1222
Child Services	651-213-0234
County Health Dept.	1-800-422-4453
Fire /Medical/ Police	911

MALTREATMENT OF MINORS MANDATED REPORTING

Please see the attached packet for the policies and guidelines we follow written by the State of Minnesota when pertaining to maltreatment of minors.

LOCAL COUNTY CHILD PROTECTIONS SERVICES AND LAW ENFORCEMENT

Anoka County Child Protection Service: 763-324-1440
Ramsey Police: 763-427-6812
Anoka County Sheriff: 763-324-5000

Closed Days for 2025

Facility is closed the following Holidays:

New Years Day 01/01
Memorial Day 05/26
Independence Day 07/04
Labor Day 09/01
Thanksgiving Day 11/28
Day after Thanksgiving (Black Friday) 11/29
Christmas Eve 12/24
Christmas Day 12/25

Please also note the facility will be closing early at 4pm on Halloween 10/31/2025 and 3pm on New Years Eve 12/31/2025.

If the holiday falls on a weekend, the holiday will be observed on a weekday before or after.

Facility is closed the following Training Days:

Presidents Day 02/17
Columbus Day 10/13

DEPARTMENT OF HUMAN SERVICES

DHS-7634A-ENG 10-24

OFFICE OF INSPECTOR GENERAL - LICENSING DIVISION

Maltreatment of Minors Mandated Reporting

This form may be used by any provider licensed by the Minnesota Department of Human Services, except family child care and Psychiatric Residential Treatment Facilities (PRTF). The form for family child care providers is DHS-7634C-ENG. Reports concerning suspected maltreatment of a child in a PRTF should be made to the Minnesota Department of Health.

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 child care program, or in a child foster care home, should be reported to the local county social services agency at 763-324-1440 or local law enforcement at 763-427-6812 .
- Reports concerning suspected maltreatment of a child in a Psychiatric Residential Treatment Facility (PRTF) should be made to the Minnesota Department of Health.

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.

Provide policy to parents

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

The following sections only apply to license holders that serve children. This does not include family child foster care per Minnesota Statutes 245A.66, subd. 1.

Internal review

- When the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made, the facility must complete an internal review within 30 calendar days and take corrective action, if necessary, to protect the health and safety of children in care.
- The internal review must include an evaluation of whether:
  - related policies and procedures were followed;
  - the policies and procedures were adequate;
  - there is a need for additional staff training;
  - the reported event is similar to past events with the children or the services involved; and
  - there is a need for corrective action by the license holder to protect the health and safety of children in care.

Primary and secondary person or position to ensure reviews completed

The internal review will be completed by Ashley . If this individual is involved in the alleged or suspected maltreatment, Kim or Becca will be responsible for completing the internal review.

Documentation of internal review

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

Corrective action plan

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

Definitions

Found in Minnesota Statutes, section 260E.03

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

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

From section 260C.007, subdivision 14:

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

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

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

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

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

Mental injury (Minnesota Statutes, section 260E.03, subd. 13)

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

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

A. "Neglect" means the commission or omission of any of the acts specified under clauses (1) to (8), other than by accidental means:

1. failure by a person responsible for a child's care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child's physical or mental health when reasonably able to do so;
2. failure to protect a child from conditions or actions that seriously endanger the child's physical or mental health when reasonably able to do so, including a growth delay, which may be referred to as a failure to thrive, that has been diagnosed by a physician and is due to parental neglect;
3. failure to provide for necessary supervision or child care arrangements appropriate for a child after considering factors as the child's age, mental ability, physical condition, length of absence, or environment, when the child is unable to care for the child's own basic needs or safety, or the basic needs or safety of another child in their care;
4. failure to ensure that the child is educated as defined in sections 120A.22 and 260C.163, subdivision 11, which does not include a parent's refusal to provide the parent's child with sympathomimetic medications, consistent with section 125A.091, subdivision 5;
5. prenatal exposure to a controlled substance, as defined in section 253B.02, subdivision 2, used by the mother for a nonmedical purpose, as evidenced by withdrawal symptoms in the child at birth, results of a toxicology test performed on the mother at delivery or the child at birth, medical effects or developmental delays during the child's first year of life that medically indicate prenatal exposure to a controlled substance, or the presence of a fetal alcohol spectrum disorder;
6. medical neglect, as defined in section 260C.007, subdivision 6, clause (5);
7. chronic and severe use of alcohol or a controlled substance by a person responsible for the child's care that adversely affects the child's basic needs and safety; or
8. emotional harm from a pattern of behavior that contributes to impaired emotional functioning of the child which may be demonstrated by a substantial and observable effect in the child's behavior, emotional response, or cognition that is not within the normal range for the child's age and stage of development, with due regard to the child's culture.

B. Nothing in this chapter shall be construed to mean that a child is neglected solely because the child's parent, guardian, or other person responsible for the child's care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care.

C. This chapter does not impose upon persons not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care a duty to provide that care.

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

A. "Physical abuse" means any physical injury, mental injury under subdivision 13, or threatened injury under subdivision 23, inflicted by a person responsible for the child's care on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child's history of injuries, or any aversive or deprivation procedures, or regulated interventions, that have not been authorized under section 125A.0942 or 245.825.

B. Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or legal guardian that does not result in an injury. Abuse does not include the use of reasonable force by a teacher, principal, or school employee as allowed by section 121A.582.

C. For the purposes of this subdivision, actions that are not reasonable and moderate include, but are not limited to, any of the following:

1. throwing, kicking, burning, biting, or cutting a child;
2. striking a child with a closed fist;
3. shaking a child under age three;

4. striking or other actions that result in any nonaccidental injury to a child under 18 months of age;
5. unreasonable interference with a child's breathing;
6. threatening a child with a weapon, as defined in section 609.02, subdivision 6;
7. striking a child under age one on the face or head;
8. striking a child who is at least age one but under age four on the face or head, which results in an injury;
9. purposely giving a child:
    i. poison, alcohol, or dangerous, harmful, or controlled substances that were not prescribed for the child by a practitioner in order to control or punish the child; or
    ii. other substances that substantially affect the child's behavior, motor coordination, or judgment; that result in sickness or internal injury; or that subject the child to medical procedures that would be unnecessary if the child were not exposed to the substances;
10. unreasonable physical confinement or restraint not permitted under section 609.379, including but not limited to tying, caging, or chaining; or
11. in a school facility or school zone, an act by a person responsible for the child's care that is a violation under section 121A.58.

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

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

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

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

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

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

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

12. use of a minor in sexual performance under section 617.246; or
13. parental behavior, status, or condition that mandates that the county attorney file a termination of parental rights petition under section 260C.503, subdivision 2.

Threatened injury (Minnesota Statutes, section 260E.03, subd. 23)

A. "Threatened injury" means a statement, overt act, condition, or status that represents a substantial risk of physical or sexual abuse or mental injury.

B. Threatened injury includes, but is not limited to, exposing a child to a person responsible for the child's care, as defined in subdivision 17, who has:

   1. subjected a child to, or failed to protect a child from, an overt act or condition that constitutes egregious harm under subdivision 5 or a similar law of another jurisdiction;
   2. been found to be palpably unfit under section 260C.301, subdivision 1, paragraph (b), clause (4), or a similar law of another jurisdiction;
   3. committed an act that resulted in an involuntary termination of parental rights under section 260C.301, or a similar law of another jurisdiction; or
   4. committed an act that resulted in the involuntary transfer of permanent legal and physical custody of a child to a relative or parent under section 260C.515, subdivision 4, or a similar law of another jurisdiction.

C. A child is the subject of a report of threatened injury when the local welfare agency receives birth match data under section 260E.14, subdivision 4, from the Department of Human Services.