

# **PARENT HANDBOOK**

## **Iron Range Tykes Learning Center**

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The owners of ***Iron Range Tykes Learning Center*** welcome you and are proud to have your child/children. We hope you feel comfortable with our environment and with the providers.

This handbook is designed to help parents understand who we are and what our expectations and policies are. All parents are expected to read this handbook and agree to follow the policies herein.

As with any policy manual, this handbook is subject to amendment as policies change or are added. Information on revisions and changes will be available to employees as soon as possible after adoption.

Parent comments and suggestions are encouraged and are taken into serious consideration as we continually adapt to new challenges. The children are not the only ones who are engaged in the learning experience – all of our staff learn from the children.

Sincerely,

Shawntel Gruba, CEO/Owner

Katie Mitrovich, Director/Owner

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## **Child Care Program Plan**

We are open Monday through Friday from 6:00 a.m.- 6:00 p.m.

Maximum Capacity of children served is 90

Licensed for: 90

Iron Range Tykes Learning Center offers five different classrooms for children that are supervised at all times from 6 weeks of age through 12 years of age. This program plan is below and available for you to see in the office at any time. Iron Range Tykes curriculum encourages learning through play, using a variety of activities and techniques to reach goals on a daily basis. Our developmentally appropriate curriculum provides for the whole child; it combines physical, emotional, social, and cognitive learning through an integrated approach. Each of these domains is interconnected and impacts the others. Each child care program plan was developed by a qualified teacher and will be evaluated in writing annually.

**Conferences** are scheduled twice a year in the Spring and the Fall. This is an opportunity to share our observations of your child's intellectual, physical, social, and emotional progress and discuss your observations. Conference forms outline the intellectual, physical, social, and emotional progress of each child and is documented in the child's record as specified in MN Rule part 9503.0090, subpart 2. Reports will generally be on social, Fine motor, Math, gross motor, reading readiness, self-reliance, practical, social/emotional, work habits, eating habits, and colors/shapes.

**Holidays** are observed and celebrated at Iron Range Tykes Learning Center. In respect to all children, we will not celebrate the religious aspect of any holiday. We will celebrate New Year's, Christmas, Thanksgiving, Fourth of July, Easter, St. Patrick's Day, Halloween, Valentine's Day, presidential birthdays, Mother's/Father's Day, Earth Day, famous national individuals and historical events. The center will be closed the following holidays: New Year's Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Friday after Thanksgiving, Christmas Eve, and Christmas Day. Birthdays will be celebrated per the parent's request. Birthday treats are allowed only if they are provided store purchased and in original packaging. Please remember that they need to be age accommodating.

### **Infant room**

for ages 6 weeks through 15 months with a capacity of 12

The Infant classroom provides the following goals:

- To care for infants in a warm, affectionate way that lets each child know that he/she is a special person, including the physical affection and cuddling that is so important at this stage of development
- To prepare activities to stimulate the senses, recognizing that infants learn through the use of their eyes, ears, fingers, sense of taste and smell
- To care for children in small groups; to prevent over-stimulation and disorder; and to provide opportunities for one-to-one interactions between children and staff
- To provide opportunities for the use of large and small motor skills with both indoor and outdoor activities
- To provide a safe environment for exploration
- To provide a consistency between Child Care and Home Care practices that will be most beneficial to the infant and will offer the parents an opportunity to influence the kind of care that their child receives
- To be supportive of parents, encouraging involvement, education, and open, honest communication while using tact and discretion

The infant classroom follows the following program plan daily:

- 6:00-8:00 Arrival/Choice time/Wash hands
- 8:00-8:30 Morning greeting: songs, finger plays, stories, theme discussion
- 8:30 Wash hands/Breakfast
- 9:30-11:00 Creative activities: Art, music, substance table, art easels
- 11:00-11:30 Large muscle play/Outside time
- 11:30 Wash hands/Lunch
- 12:30- 2:30 Quiet time/Nap time: books, puzzles, blocks
- 2:30-3:30 Choice time/Story time
- 3:30 Wash hands/Snack
- 4:00-4:45 Large muscle play/Outside time
- 4:45-6:00 Wash hands/Departure/Manipulative Play

\* Diapers are changed every two hours or as needed throughout the day

\* Parents provide a schedule for infants under the age of 1

**Toddler room:**

for ages 16 months through 25 months with a capacity of 14

The Toddler classroom provides the following goals:

- Begins to show empathy for others
- Feels safe and secure away from parents
- Shows affection or dislikes
- Shows pride in new accomplishments
- Exhibits contrasting moods (stubborn to compliant)
- Imitates others
- Tries to please others
- Exhibits an intense interest in adult language
- Climbs up steps or march in place
- Rolls, throws, and kicks ball
- Stacks blocks
- Uses a crayon or paintbrush
- Uses a spoon
- To care for children in small groups; to prevent over-stimulation and disorder; and to provide opportunities for one-to-one interactions between children and staff
- To provide opportunities for the use of large and small motor skills with both indoor and outdoor activities
- To provide a safe environment for exploration
- To provide a consistency between Child Care and Home Care practices that will be most beneficial to the infant and will offer the parents an opportunity to influence the kind of care that their child receives
- To be supportive of parents, encouraging involvement, education, and open, honest communication while using tact and discretion

The toddler classroom follows the following program plan daily:

- 6:00-8:00 Arrival/Choice time/Wash hands
- 8:00-8:30 Circle Time: Morning greeting: songs, finger plays, stories, theme discussion
- 8:30 Wash hands/Breakfast

- 9:15-10:15 Small group time: Art, music, substance table, art easels
- 10:15-11:00 Large muscle play/Outside time
- 11:00-11:30 Wash hands/Large group time: : parachute play, bowling, songs, manipulatives
- 11:30 Wash hands/Lunch
- 12:30- 2:30 Nap time/Quiet time: books, puzzles, movie
  - 2:30-3:30 Choice time
  - 3:15 Wash hands/Snack
  - 3:45-4:30 Large muscle play/Outside time
  - 4:30-5:00 Wash hands/Manipulatives/Story time
  - 5:00-6:00 Choice time/Departure
- \* Diapers are changed every two hours or as needed throughout the day

#### **Toddler transition room:**

for ages 26 months to 35 months with a capacity of 14

The Toddler Transition classroom provides the following goals:

- Attempts to put on shoes, socks, jacket
- Washes and dries hands
- Helps at clean-up time
- Influences or persuades others
- Asserts self appropriately
- Sits well in chair
- Enjoys "exploring" with others
- To care for children in small groups; to prevent over-stimulation and disorder; and to provide opportunities for one-to-one interactions between children and staff
- To provide opportunities for the use of large and small motor skills with both indoor and outdoor activities
- To provide a safe environment for exploration
- To provide a consistency between Child Care and Home Care practices that will be most beneficial to the infant and will offer the parents an opportunity to influence the kind of care that their child receives
- To be supportive of parents, encouraging involvement, education, and open, honest communication while using tact and discretion

The toddler classroom follows the following program plan daily:

- 6:00-8:15 Arrival/Choice time/Wash hands
- 8:15-8:30 Circle Time: Morning Greeting: songs, finger plays, stories, theme discussion
- 8:30 Wash hands/Breakfast
- 9:00-9:45 Small group: Art, music, substance table, art easels
- 9:45-10:15 Music
- 10:15-10:45 Large group time: parachute play, bowling, songs, manipulatives
- 10:45-11:15 Large muscle/Gym
- 11:30 Wash hands/Lunch
- 12:30- 2:30: Nap time/Quiet time: books, puzzles, movie
- 2:30-3:15 Choice time
- 3:15 Wash hands/Snack
- 3:45-4:15 Manipulatives
- 4:15-4:45 Large muscle/Gym

- 4:45-6:00 Wash hands/Manipulatives/Stories/Departure

\*Diapers are changed every two hours or as needed throughout the day

### **Preschool room:**

for ages 35 months up to Kindergarten with a capacity of 20. Additionally, the School Age classroom has a Preschool-School Age combination license. Therefore we are able to serve 50 preschool/school agers, not to exceed 30 preschoolers.

The Preschool classroom provides the following goals:

- Children's thinking skills, including the development of logical and symbolic thinking, problem-solving skills, and approaches to learning.
- Positive attitudes habits and learning styles
- Develop listening and memory skills
- Discover areas of eight learning domains
- Learn self-help skills – zippering, buttoning, and personal hygiene, etc
- Encourage the children to do tasks on their own
- Promote eye hand coordination, patience, waiting turns, etc.
- Give opportunities for hand washing, practicing proper meal manners
- Children's feelings about themselves, the development of responsibility, and their ability to relate positively to others.
- Children demonstrate a strong and positive self-concept, appropriate self-control and growth in their awareness of their responsibilities when interacting with others \*Develop skills in self-esteem, awareness and confidence
- Learn to get along with peers – functioning in a small or large group situation
- To care for children in small groups; to prevent over-stimulation and disorder; and to provide opportunities for one-to-one interactions between children and staff
- To provide opportunities for the use of large and small motor skills with both indoor and outdoor activities
- To provide a safe environment for exploration
- To provide a consistency between Child Care and Home Care practices that will be most beneficial to the infant and will offer the parents an opportunity to influence the kind of care that their child receives
- To be supportive of parents, encouraging involvement, education, and open, honest communication while using tact and discretion

The Preschool classroom follows the following program plan daily:

- 6:00-8:15 Arrival/Choice time/Wash hands
- 8:15-8:30 Circle Time: Morning Greeting: songs, finger plays, stories, theme discussion
- 8:30 Wash hands/Breakfast
- 9:00-10:00 Small Group Time/Exploration: Art, music, substance table, art easels
- 10:00-10:15 Large Group Time: parachute play, bowling, songs, manipulatives
- 10:15-10:45 Outside time/Discovery inside
- 10:45-11:15 Wash hands/Large Muscle/Gym
- 11:30 Wash hands/Lunch
- 12:30- 2:30 Nap time/Quiet time: books, puzzles, movie
- 2:30-3:15 Outside time/Discovery inside
- 3:15 Wash hands/Snack



- 3:45-4:15 Manipulatives
- 4:15-6:00 Choice time/Departure
- \* Diapering/bathroom breaks are every 1.5 hours or as needed throughout the day

### **School age room:**

For Kindergarten through 12 years old with a maximum capacity of 30 School Ageds. This classroom has a Preschool-School Age combination license. Therefore we are able to serve 50 preschool/school ageds, not to exceed 30 preschoolers

The School Age classroom provides the following goals:

- Physical skills development
- New thinking abilities development
- Exploration of the world beyond home and family
- New social skills development
- Competency development
- Developing a positive sense of self o Moving towards independence
- eir awareness of their responsibilities when interacting with others \*Develop skills in self-esteem, awareness and confidence
- Learn to get along with peers – functioning in a small or large group situation
- To care for children in small groups; to prevent over-stimulation and disorder; and to provide opportunities for one-to-one interactions between children and staff
- To provide opportunities for the use of large and small motor skills with both indoor and outdoor activities
- To provide a safe environment for exploration
- To provide a consistency between Child Care and Home Care practices that will be most beneficial to the infant and will offer the parents an opportunity to influence the kind of care that their child receives
- To be supportive of parents, encouraging involvement, education, and open, honest communication while using tact and discretion

The School Age classroom follows the following program plan daily:

- 6:00-8:00 Arrival/Choice time/Wash hands: songs, finger plays, stories, theme discussion
- 8:00-8:30 Circle Time: Morning Greeting
- 8:30- Wash hands/Breakfast
- 9:15-9:45 Large Muscle Play/Gym time
- 9:45-10:45 Small Group Time: Art, music, substance table, art easels
- 10:45-11:30 Large Group Time: parachute play, bowling, songs, manipulatives
- 11:30-12:30 Wash hands/Lunch/Reading time
- 12:30- 2:30 Quiet-rest time/Quiet activities: books, puzzles, movie, Maker space
- 2:30-3:15 Large Muscle Play/Outside time
- 3:15 Wash hands/Snack
- 3:45-4:00 Calm down activities
- 4:00-6:00 Departure/Choice time

### **Iron Range Tykes Pricing**

Iron Range Tykes offers 2 types of care: Full time and Drop in care.

Pricing is based on age and packaged rates as follows:

● **WEEKLY PKG**

- Infants- \$225
- Toddlers - \$210
- Preschoolers- \$195
- School Ageds- \$170
- School Ageds School day- \$50

● **4 DAY PKG**

- Toddlers - \$185
- Preschoolers- 170
- School Ageds- \$145
- School Ageds School day- \$45

● **3 DAY PKG**

- School Ageds- \$110
- School Ageds School day- \$40

● **DROP IN-1 DAY RATE**

- Infant- \$60
- Toddlers - \$55
- Preschoolers- \$50
- School Ageds- \$42
- School Ageds School day- \$20

There is a **3 day minimum requirement to hold your spot in the School age room**. We have a **4 day minimum requirement to hold your spot in our toddler rooms and preschool room**. Because of the low staff to child ratio, **Infants are only weekly or drop in availability**. All insurance and meals are included in this package. We offer kid friendly breakfast, lunch, and afternoon snack. When the facility is closed the minimums decrease with the exception of: 4th of July, Thanksgiving, and our annual community wide provider training on the first Friday of March. These weeks/days will have the normal weekly minimum.

School age rates are based on if your child's district has school that day. If there is no school due to summer vacation, holiday, COVID, weather, etc you are charged a full day rate not a school day rate.

We believe children and staff benefit from routine and consistency. This also gives you, as the parent, a cheaper rate the more they attend. Having your child attend more gives them stability, routine, friendships, instructional play, socialization and more. We offer structured activities throughout the day and incorporate the same curriculum as Mt Iron- Buhl school, High Scope curriculum, to prepare your child for school.

**Enrollment Requirements**

Each child will need an application with a \$50.00 nonrefundable fee, a health care summary filled out by a medical source, and immunization record on file prior to enrollment. Max \$100 per family. Infants require an additional deposit once an agreed slot is reserved. This deposit is non refundable and will go towards your first week's tuition.

**Billing**

We bill on a weekly basis. All invoices **MUST** be paid by **each Friday** by 6pm or a \$50 late fee will be charged. Also, if your bill is not paid by Friday, your child/children cannot return until the bill and the \$50 late fee have been paid in full. You may pay your bill by cash, check, money order, or online through the Brightwheel application.

### Extra Charges

- If you request, misplace or lose any paperwork and require a copy we will charge a \$2.00 a copy fee. We make all forms, invoices and notices available on our childcare app or website so we can invest more money into our program.
- There is a \$50 non refundable registration fee per child with a maximum fee of \$100.00 per family at the time of registration.
- There is a non refundable \$200 deposit charge for infants once their spot is guaranteed. This deposit will go towards your first week tuition once care has started.
- At start date and every 6 months from there is a \$25 fee for enrichment learning and field trips per child.
- We give one fob per legal guardian to each family. Additional fobs may be purchased for \$30.
- Lost or damaged fobs are charged \$50. If fob is found you are reimbursed.
- Non Sufficient Funds (NSF) payments will be charged a \$30 processing fee in addition to your failed payment.
- Minimums charged to hold a spot will be adjusted accordingly for center closings included with the exception to 4th of July, Thanksgiving Day, and a March date for community wide provider training day. (3 out of 11 closed days a year)

### Scheduling

We require a 5- day week minimum in our infant room, 4-day week minimum to hold a spot in our toddler and preschool rooms, and a 3- day minimum in our school age rooms. Schedules can be set, given monthly, bi-weekly or weekly. **All schedules are due by Wednesdays at 3pm the week prior** to your scheduling needs. You do have the option to change/alter your schedule that Thursday or Friday with office approval. Reason is, staff and their children are scheduled accordingly. **If you are picking up any later than 15 minutes, a phone call is required. We staff according to the kids schedules and may not always have room to take kids early or to have them stay late.** If you choose not to pay the minimum, you have the option to have a “drop-in” status. Drop-in status requires a parent to message and see what days and times we have available the week prior to scheduling needs. We cannot guarantee any days available for a drop-in status. You will not know availability till Thursday the week prior. Drop-in status is first come first serve.

If your child will not be attending childcare on a scheduled day you must call in/messa. Two full weeks of vacation/sick is built into each package. We do not offer sick, absent, or vacation days. Once you give a schedule, you are charged accordingly. We require a 2-week notice if you are terminating your child care needs or moving to drop in status with Iron Range Tykes Learning Center.

Our license states that we are open Monday through Friday 6:00 a.m. to 6:00 p.m. therefore your child **MUST be out of the facility by 6:00 p.m.** Any child/children not picked up by that time will be charged \$50 per child. This amount must be paid in full before the child can return to child care. The first time you pick your child/children up past 6:00 p.m. you will get a verbal warning; the second time is a written warning and the third time you will no longer be able to attend Iron Range Tykes Learning Center. If a child is left after 6:30 the Police will be called.

### Drop Off/Pickup

Anyone can drop a child off at the center. Pick up is only authorized for parents/guardians and those authorized on the child’s pickup list, per the parents’ request. Parents/guardians **MUST** call or tell their child’s teacher if someone off the authorized pick up list is picking up. If the authorized pick up person shows up to pick the child up and neither parent/guardian has stated this, the parent/guardian will receive a phone call and verbal permission will be required at that time for the authorized person to take the child. If a parent/guardian cannot be reached, we cannot allow the child to go with the authorized pick up person until we hear from the parent/guardian. If an unauthorized person tries to

pick up they will be turned away and the parent/guardian will receive a phone call. We only allow a person over the age of 16 to pick up. All authorized pick up persons are required to have a photo ID at the time of pick up.

### **Suggestions For Separation**

Every child handles separation from his/her parent/guardian differently.

To help with your child's drop off in the most successful way, we suggest the following tips:

- Prior to your child starting at Iron Range Tykes please make an appointment to take a tour with your child/children to visit the center and meet the child/children's teacher(s).
- On the first day we recommend informing your child of what your plans are. Tell them you are bringing them to childcare and where you will be while they are attending. Be sure to tell them you will be picking them up and at what time this will be.
- After the teacher greets your child and you have shared whatever information necessary to make the break, give your child a hug, kiss and word of encouragement.
- Let your child know by your verbal tone and physical actions that you are sure they will have a good time. Share your confidence with your child. Stay positive and encouraging.
- Remember, by holding on or hesitating you will be confusing your child.
- If it is emotionally difficult to separate from your child, DO NOT COMMUNICATE this information to anyone in front of your child. Children are very perceptive and may become worried or anxious if they hear you share your concerns. This may affect their ability to adjust.
- If it is difficult to separate from your child please feel free to call throughout the day to check to your child.
- Our experience has shown the separation is more difficult on the parent than the child.
- It is very important to communicate with the teacher's any concerns or suggestions you may have prior to drop off, which can make your child's separation more comfortable.

### **Security**

Our doors are locked at all times and require a key fob. Each guardian is given a Key fob upon start date. There is a \$50 charge for a lost fob. You may purchase an additional fob for \$30. Children are sent home with their parents/guardian or designated pick up person ONLY. We must be notified via written notice, phone call, or brightwheel message whenever a child or children are to be picked up by another person and this person must be documented on your child's paper file. A photo ID is always required for pick-ups. Children are supervised with in sight and sound at all times and not permitted to leave without guardian approval.

### **Snacks And Mealtime**

Tables must be washed and sprayed with bleach water. Hands must be washed before eating. Staff and children will wash hands prior to eating. Staff will supervise all children while eating. Staff will wash faces and hands after eating. Tables will then again, be washed and sprayed with bleach water after meals.

Breakfast is served at 8:30 am

Lunch is served at 11:30 am

Snack is served at 3:15pm

Meals will be provided and included in your package rate. Meals are kid friendly and follow the USDA guidelines as of October 2017. Menus are posted weekly outside each classroom. If your child has a special dietary need this must be communicated in your child's application and verbalized to the child's teacher. We can accommodate certain, but not

all, special dietary needs and allergies. If we cannot accommodate the parent/guardian will be responsible to provide meals/drink for their child, daily according to USDA Food Guidelines.

Infants, under 12 months, eat on their own schedule. Children younger than 12 months must be served formula or breast milk unless written directions are on file from the child's health care provider. The center provides Parent's Choice Gentle Powder Infant formula from Walmart. You are required to bring your own bottles. You may supply your own formula. All breast milk brought into the center needs to be labeled with child's first and last name, as well as the date.

### **Nap and Rest Policy**

Rest is a basic human need. An infant spends most of the day in sleep, although periods of sleep are relatively short. As the child matures, gradual reduction occurs in the number of naps. A child who no longer naps requires a rest/quiet period. Children will choose to obtain their quiet or rest in different ways. It is therefore necessary for Iron Range Tykes to have a policy on naps and rest periods. Toddlers are required to nap or have quiet activities from 12:30-2:30 p.m. daily. Preschool parents have the choice of nap or quiet activities, which is held at the same time as toddler's nap. Quiet time activities may consist of a movie, reading or puzzle.

**A. Confinement Limitation:** A child who has completed a nap or rested quietly for 30 minutes will not be required to remain in crib or cot.

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

**C. Bedding:** Separate bedding is provided for each child in care. Bedding is washed weekly and when soiled or wet. Blankets are washed or dry cleaned weekly and when soiled or wet.

**D. Crib standard:** A crib is provided for each infant for which the center is licensed to provide care; twelve cribs for twelve infants. The equipment must be of safe and sturdy construction that conforms to federal crib standards under Code of Federal Regulations. We will place each infant to sleep on the infant's back, unless the license holder has documentation from the infant's physician directing an alternative sleeping position for the infant. The physician directive must be on a form approved by the commissioner and must remain on file at the licensed location. 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 the license holder has a signed statement from the parent indicating that the infant regularly rolls over at home. These forms are included with the Child Application.

**E. If an infant falls asleep before being placed in a crib,** we will move the infant to a crib as soon as practicable, and will keep the infant within sight until the infant is placed in a crib. When an infant falls asleep while being held, staff must 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.

Placing a swaddled infant down to sleep in a licensed setting 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 according to this paragraph, we may place the infant who has not yet begun to roll over on its own down to sleep in a one-piece sleeper must be wrapped over the infant's arms, equipped with an attached system that fastens securely only across the upper torso, with no constriction of the hips or legs, to create a swaddle. Prior to any use of swaddling for sleep by a provider licensed under this chapter, we must obtain informed written consent for the use of

swaddling from the parent or guardian of the infant on a form provided by the commissioner and prepared in partnership with the Minnesota Sudden Infant Death Center.

### **Sudden Unexpected Infant Death Syndrome (SUIDS)**

The Center follows the recommendations of the American Academy of Pediatrics (AAP) and the Consumer Product Safety Commission (CPSC) for safe sleep environments to reduce the risk of SUIDS.

- All infants (under one year of age) will be placed on their backs in a safety approved crib unless a written note from the infant's health care provider is provided stating the medical reason and the specific time frame that an alternate sleep position or alternate sleep surface (e.g. car seat) is required.
- Infants will not sleep in car seats, swing, bouncy seats, or other soft surfaces.
- All infants must be removed from their car seats (and have any outer clothing removed) by their parents and given to the child care provider when they arrive.
- The infants head will remain uncovered.
- Soft materials such as pillows, stuffed toys, loose bedding, pacifier attachment, bumper pads, quilts, and comforters will not be placed in infants' sleep environment.
- Supervised 'tummy time' will be observed while infant is awake.
- Bibs, shirts with hoods, a bib, hat, pacifiers with attachments or weighted materials will be removed before laying an infant down for sleep.
- Infants will only sleep on a firm tight-fitting mattress with a tight-fitting fitted crib sheet
- All staff members have taken SUIDS training
- If a swaddle is used, it must be wrapped over the infant's arms, fastened securely across the infant's upper torso, and not constrict the infant's hips or legs. Like other clothing or sleepwear, a swaddle cannot have weighted materials, a hood, or a bib.
- If an infant under one year of age requires a helmet for their development and would wear it while being placed down to sleep, centers must use the DHS form to obtain signed documentation from a physician, advanced practice registered nurse, physician assistant, licensed occupational therapist, or licensed physical therapist.

### **Reduction of Risk Of Sudden Unexpected Infant Death in Licensed Programs**

When a license holder is placing an infant to sleep, the license holder must place the infant on the infant's back, unless the license holder has documentation from the infant's physician directing an alternative sleeping position for the infant. The physician directive must be on a form approved by the commissioner and must remain on file at the licensed location. 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 the license holder has a signed statement from the parent indicating that the infant regularly rolls over at home.

The requirements of this section apply to license holders serving infants younger than one year of age. Licensed child care providers must meet the crib requirements. A correction order shall not be issued under this paragraph unless there is evidence that a violation occurred when an infant was present in the license holder's care.

If an infant falls asleep before being placed in a crib, the license holder must move the infant to a crib as soon as practicable, and must keep the infant within sight of the license holder until the infant is placed in a crib. When an infant falls asleep while being held, the license holder must 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 infant nap room is equipped with a monitor and is checked every 15 minutes which is documented on a sheet on the nap room door. The sleeping infant must not be in a position where the airway may be blocked or with anything covering the infant's face.

Placing a swaddled infant down to sleep in a licensed setting 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 according to this paragraph, a license holder may place the infant who has not yet begun to roll over on its own down to sleep in a one-piece sleeper equipped with an attached system that fastens securely only across the upper torso, with no constriction of the hips or legs, to create a swaddle. Prior to any use of swaddling for sleep by a provider licensed under this chapter, the license holder must obtain informed written consent for the use of swaddling from the parent or guardian of the infant on a form provided by the commissioner and prepared in partnership with the Minnesota Sudden Infant Death Center.

### **Program Drug And Alcohol Policy**

Iron Range Tykes prohibits license holders, employees, subcontractors, and volunteers, when directly responsible for persons served by the program, from abusing prescription medication or being in any manner under the influence of a chemical that impairs the individual's ability to provide services or care. The license holder must train employees, subcontractors, and volunteers about the program's drug and alcohol policy

### **Personalized items at school**

We personalize the environment for the children in the following way:

- Labeling cubbies/hooks/bins with names
- Recognizing children's birthdays

### **Items from home**

***We do not allow toys or materials from home to be brought in to the center*** unless a show and tell is asked of the child from the child's teacher. We explain to the children that "toys and materials from home belong to one person, and toys and materials at the center belong to everyone". We also do not allow food from home except for birthdays. Birthday treats must be store bought and packaged to be allowed in the center. Gum is never allowed in the center. We do accept toy, art supply and office supply donations. If you wish to donate, please see the office.

### **Clothing**

Play clothes are always encouraged at the center. For safety reasons, we ask that children wear tennis shoes or rubber soled shoes; no clogs, flip flops, or cowboy boots. We also ask that the shoes fit according to the child's correct size. Too big of shoes become a hazard. Shoes must be worn at all times in case of an emergency. Outerwear changes of clothes should be labeled clearly with child name or initials. We encourage the children to be responsible for their own belongings. Outside clothing is needed daily as we extend our classroom program to outside. The use of cloth diapers and/or wet bags are prohibited from center use due to health and sanitation policies for large care group settings.

### **Transportation**

We are happy to send/receive your child on their designated bus if the parent/guardian has made the proper arrangements from the schools. Virginia, Mt. Iron-Buhl, Eveleth-Gilbert, Cherry and Marquette buses all come to the front door. We cannot allow your child to leave with another individual, aside from parents and individuals listed on application, unless we have been notified in writing or on Brightwheel.

### **Parent Visitation Policy**

Iron Range Tykes Learning Center encourages an "open door policy". This means that parents/guardians are welcome at any time. We are proud of our program and enjoy parent/guardian involvement. Parents will be welcomed by teachers and shown the most appropriate way to observe and interact with the group during their scheduled activities.

## **Communication**

Open communication between parents/guardians and teachers/staff is essential. Your child will benefit from regular parent/teacher communication.

**Conferences** are scheduled twice a year in the Spring and the Fall. This is an opportunity to share our observations of your child's intellectual, physical, social, and emotional progress and discuss your observations. Reports will be on social, Fine motor, Math, gross motor, reading readiness, self-reliance, practical, social/emotional, work habits, eating habits, and colors/shapes.

**Parents bulletin** will be posted with general information, community events, adult education and special child care notices as shared by both parents and staff.

**Phone & written communication** will be utilized to attempt to reach out to a parent/guardian in the event of a situation arising where we feel it needs to be addressed in a timely manner. We request that the parent/guardian keep the teachers & staff informed of your child's needs, concerns and feelings.

## **Yearly Activities**

**Enrichment programs** during the year there will be various educational and cultural activities planned for the children. Parents/guardians will be notified of such activities prior to the time. Some of the enrichment and cultural activities may include but are not limited to: storytellers, fire safety speakers, students from local schools putting on skits/plays, safe animal interactions, and musicians. On rare occasions, a special trip, summer recreation programs and other program activities may require an additional fee. Iron Range Tykes does not participate in any form of research, experimental procedure or public relations activity involving a child.

**Field trips** may be scheduled throughout the year. Parents/guardians will be notified prior to the time of the field trip. Written permission is required from parent/guardian before each field trip the child may attend.

**Holidays** are observed and celebrated at Iron Range Tykes Learning Center. In respect to all children, we will not celebrate the religious aspect of any holiday. We will celebrate New Year's, Christmas, Thanksgiving, Fourth of July, Easter, St. Patrick's Day, Halloween, Valentine's Day, presidential birthdays, Mother's/Father's Day, Earth Day, famous national individuals and historical events.

The center will be closed the following holidays: New Year's Day, staff training day in March, Memorial Day, Fourth of July, sometimes the day before or after the 4th of July depending on where it lands during the week, Labor Day, Thanksgiving Day, day after Thanksgiving, Christmas Eve, and Christmas Day. Minimums charged to hold a spot will be adjusted accordingly for center closings included with the exception to 4th of July, Thanksgiving Day, and first Friday of March for community wide provider training day. (3 out of 11 closed days a year)

**Birthdays** will be celebrated per the parent's request. Birthday treats are allowed only if they are provided store purchased and in original packaging. Please remember that they need to be age accommodating.

## **Programs mission and philosophy**

Iron Range Tykes aims to offer safe and nurturing childcare at all times. Our goal is to provide learning through play in all aspects, including outside play. Close personal attention with smaller class sizes is essential to providing a quality experience for all children; therefore, adequate and experienced personnel will be hired to ensure each child has the proper supervision while in our care.

Iron Range Tykes Learning Center staff will strive to provide the Highest Quality Childcare and Educational Service that promotes and enhances each child's development; while assuring our parents peace of mind in the care and service we



render. We provide a wide range of age-appropriate learning opportunities for children from 6 weeks thru 12 years of age to develop and grow intellectually, socially, and emotionally, while in a child friendly environment. Children here are encouraged to be children; we do not believe they are small adults. The individual progress, growth, and development of every child are important to us. The environment at the Center promotes learning while having fun during the process. Through a mixture of hands-on experiences, group activities, and individual play, our children develop the intellectual, social, emotional, and physical skills necessary for all aspects of life and growth. Parent comments and suggestions are encouraged and are taken into serious consideration as we continually adapt to new challenges. The children are not the only ones who are engaged in the learning experience - all our staff and parents also learn from the children.

### **Behavior Guidance Policy And Procedures**

Iron Range Tykes Learning Center is committed to ensure that each child is provided with a positive model of acceptable behavior while providing a safe, happy, and nurturing environment. The behavior guidance policy and procedures is tailored to the developmental level of the children that our center is licensed to serve; 90. Our goal is to help each child grow to his or her potential, and participate in our community at the Center and, ultimately, in the community overall. As with any community, large or small, rules are necessary to ensure smooth functioning and to reduce conflict. With children, it can be difficult to enforce these rules without appropriate strategies of behavior management to create a sense of discipline. Before we continue, two terms need to be specifically defined to understand our approach to behavior management:

**Discipline** the ongoing process of helping children to develop self-control for self-management while protecting and maintaining the integrity of the child.

**Punishment** the use of negative consequences to correct unacceptable behavior.

Each child potentially presents a unique behavioral challenge, and thus we deal with each situation and circumstance individually. The techniques we use are designed to help the child take responsibility for his or her actions by teaching appropriate behaviors and, when the child acts inappropriately, using positive redirection and reinforcement. Harsh, humiliating, and shaming techniques are counter-productive in most cases, and are thus not used. There is no use of mechanical restraints, such as tying. Only the use of physical restraint other than to physically hold a child where containment is necessary to protect a child or others from harm.

### **Prohibited Actions**

**These following actions are prohibited by or at the direction of a staff person.** Subjection of a child to corporal punishment which includes but is not limited to rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching hitting and spanking. Subjection of a child to emotional stress which includes but is not limited to name calling, ostracism, shaming, making derogatory remarks about a child or the child's family and using language that threatens, humiliates, or frightens a child. Separation from the group except within rule requirements, the use of physical restraint other than to physically hold a child where containment is necessary to protect a child or others from harm, and the use of mechanical restraints, such as tying such as tying, Punishments for lapses in toileting. Withholding food, light, warmth, clothing or medical care as a punishment for unacceptable behavior.

**Prone restraint prohibition.** A prone restraint is a physical hold or mechanical restraint that places a person in a face-down position. All programs prohibit the use of prone restraints except in very specific brief instances. These exceptions include:

- a person rolling into a prone position during a restraint if the person is restored to a non-prone position as quickly as possible;
- holding a person briefly in a prone restraint to apply mechanical restraints if the person is restored to a non prone position as quickly as possible; and
- holding a person briefly in a prone restraint to allow staff to safely exit a seclusion room. Contraindicated restraint prohibition.

Programs must not use any type of restraint that is contraindicated for a person's known medical or psychological conditions. In this context, “contraindicated” means the restraint could be harmful for children with certain medical or psychological conditions. If a restraint is contraindicated for a given child, it means the child’s medical or psychological conditions rule out the use of that restraint due to the harm that would be caused. An assessment of any contraindications must occur prior to using restraints on a person and the program must document this determination.

If a child has a known medical or psychological condition, centers should include whether any type of restraint is contraindicated for their condition in the child’s Individual Child Care Program Plan (ICCPP), as applicable.

## **Separation from the Group**

### **Separation of a child from the group except within rule requirements**

No child may be separated from the group unless the following has been occurred:

- a less intrusive method of guiding the child’s behavior have been tried and were ineffective.
- The child’s behavior threatens the well-being of the child or other children in the program.
- A child who require separation from the group must:
  - remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person.
  - The child’s return to the group must be contingent on the child stopping or bringing under control the behavior that precipitated the separation.
  - The child must be returned to the group as soon as the behavior that precipitated the separation abates or stops.
- Children between the ages of six weeks and 16 months must not be separated from the group as means of behavior guidance.

### **Separation Report**

When a child is hurting him- or herself, others, or things and cannot be redirected, staff will call the directors for additional help and intervention. All separations from the group must be noted on a daily log that must include the following: The child’s name, the staff person’s name, time, date, information indicating what less intrusive methods were used to guide the child’s behavior, and how the child’s behavior continued to threaten the wellbeing of the child or other children in care. If a child separated from the group three or more times in one day, the child’s parent shall be notified, and the parent notification shall be indicated on the daily log. If a child is separated five or more times in one week, eight times or more in two weeks, a meeting between the teacher, director/s, and parents will be required.

### **Persistent Unacceptable Behavior**

The applicant and license holder must develop written procedures for dealing with persistent unacceptable behavior that requires an increased amount of staff guidance and time. These procedures include the following:

- A journal of staff observations of the child’s unacceptable behavior and staff responses to the behavior.
- How staff plan to address the behavior documented.
- A plan established with consultation of the child’s parent on how to deal with the behavior
- A conference between child’s parent, teacher and director/s.

- If no improvement, care may be terminated with a two day notice.
- At any given time for any reason your care can be immediately terminated if your child, the staff, other children, or equipment is at risk for concern.

### **Medical & Health Information**

We are required by MN department of Human Services to have on file, a medical form, for each child enrolled at our center. This form must be completed by the child's physician and include immunization dates. Each time a child progresses into another room at the center, they are required to have a new medical form and updated immunization record.

### **Medications**

Staff will administer medication to children under the following conditions:

\*Medication comes in a clearly and properly labeled pharmacy container with child name, dose, directions, and expiration date.

\*Medication is not expired.

\*Parent has filled out a required medication permission form fully with signature and date.

\*Over the counter medications are accompanied by a signed doctor's permission form.

NO MEDICATION of any form should be packed in your child's backpack.

\*Parent(s) are welcome to stop by the center to administer medications they wish their child to have.

\* Staff will administer medications during a life-threatening event or when a medical sheet is properly filled out.

Following administration of epinephrine, the emergency services will be called, and the parent notified. It is the responsibility of the parent to replenish the medication stored in the center and to ensure the medication is current (not expired).

### **Communicable Diseases**

If a child at our center contacts a communicable disease, we ask that the parent/guardian notify us immediately. We will post the information, with exclusion of child's name, for other parents to be notified and informed.

### **Plan Ahead**

Many children can become ill shortly after entering a group situation, especially if they have had limited exposure to other children. This adjustment period is usually short and not serious. Please refer to the sick policy to address instructions for sick children.

### **Sick Policy**

Parents should notify the teacher when they drop their child off if the child did not eat well, did not sleep well, or seems to be out of sorts. Parents should also notify the teacher if their child has been diagnosed with pink eye, strep throat, chicken pox, measles, lice, scabies, etc. If a child becomes ill at the center, parents will be notified to come and pick their child up immediately. If parents cannot be reached, the center will call the persons authorized by parents to pick up the child. Until the parents come, ill children will be separated from the group.

The center's policy is stringent: ***Iron Range Tykes Learning Center*** does not care for sick children. Therefore, each parent must make other arrangements for their child when they are sick. The center keeps sick children out of the center, so the healthy children remain healthy. The center has no facilities to care for sick children. Children should remain home when any of the following situations arise:

- Cannot participate in daily routine.

- The child's temperature is 100°F or above (a temperature is the body's basic defense mechanism to battle illness, so a temp is an indicator that a child is ill. Parents should not give their child medicine to reduce fever and then bring them to the center).
- The child has any communicable infectious disease such as pink eye, measles, chicken pox, mumps, strep or bronchial infection.
- The child has any infectious or unidentified skin disease or rash, such as active fever blisters, thrush or impetigo.
- Parents must NOT bring their child to the center if their child has diarrhea regardless of the cause. Children shall be excluded from attending the center until the child is without nausea, diarrhea or vomiting for 24 hours.
- With influenza or other illnesses with fever, children shall be excluded from attending the center until the child is without fever for 24 hours without the aid of medicine.

### **IRT COVID-19 PREPAREDNESS & RESPONSE PLAN**

IRT is committed to providing a safe and healthy workplace for all staff, children, and families. We have updated our COVID-19 Preparedness & Response Plan in response to the 2022 CDC, MDH, & DHS guidelines. Our goal is to mitigate the potential for transmission of COVID-19 in our facility and communities, and that requires full cooperation among our staff and families. Only through this cooperative effort can we establish and maintain the safety and health of our facility and all that enter.

These guidelines are ADDITIONAL steps IRT is taking besides our normal daily cleaning/disinfecting routines and IRT sick policies. These guidelines are not limited to that which is discussed below. This is a broad tool. Policy and procedures will change and adapt as we gain professional development to help guide decision making and best practices. Iron Range Tykes strives to follow all CDC, MDE, MDH, DHS, and Governor's guidelines.

#### **PREVENTION:**

##### **1. Implement social distancing of 6 feet as much as possible.**

- A. Classrooms will be rearranged to encourage distancing while playing.
- B. Designated areas of play and toys will be established whenever possible.
- C. Outside play will be utilized as much as possible as direct sunlight is encouraged.
- D. Children will not combine groups unless necessary for child to teacher ratios (6:00-6:30am & 5:15-6:00pm)
- E. Special events and visitors will be outside or at a safe distance outside.
- G. At nap children will be spaced and placed in head to toe order.
- H. IRT normal sick exclusion policy will be strictly enforced. Unusual absenteeism among staff or children will be reviewed.
- I. Staff have access to PPE equipment and hand sanitizer at all times. Staff that work in one classroom with the same group of children and coworkers are not required to wear a mask/shield when there is a mask mandate. Staff do have the option to wear a face shield vs a mask per the Governor's Executive Order 20-81.

- J. Staff, children, and families will be instructed to cover their mouth and nose with their sleeve/elbow/tissue when coughing or sneezing and to avoid touching their face.
- K. **Children will not wear face masks unless** they can reliably wear, remove, and handle masks following the CDC guidance throughout the day and it does not restrict their breathing during activity play as per the Governor's Executive Order 20-81.
- L. Families and staff are asked to be mindful of traveling and who they come in contact with.
- M. Weekly & monthly communication and training for staff to implement these plans and supervision necessary to ensure effective ongoing implementation.

## **2. Intensify cleaning and disinfecting routines:**

- A. Less toys and supplies will be available.
- B. High contact areas such as but not limited to: door handles, area around handles, door frames, light switches, drinking fountains, sinks and faucets will be disinfected every few hours.
- C. Gym equipment and outside equipment will be spray disinfected after each use.
- D. Nap blankets will be sent home every Friday to be laundered before returning on Monday.
- E. Frequent handwashing. Children and staff wash hands at drop off, before meals, after meals, after toileting, after outside play, and gym play, and at pick up.
- F. Weekends will have an additional intensify cleaning/disinfecting routine.
- G. Air exchange systems will run extra cycles each day.

## **3. Modified drop off and pick up:**

- A. Every child is to wash hands with soap and water for 20 seconds each time entering the facility with the assistance/guidance of who is dropping off.
- B. Parents are still asked to wash their hands and their children's hands at pick up to prevent germs leaving the facility/classroom.
- C. Only one individual will enter the facility for drop off and pick up. Guardians are encouraged to designate the same 1 or 2 persons for drop off and pick up. Example: grandparents, high risk individuals, and additional siblings should not be entering.
- D. Persons entering are asked to keep 6 feet distance from all in the building.

- E. EXCESS items such as bags, blankets, stuffed animals, and toys are not allowed inside.
- F. Children and persons entering and exiting are to go directly in and out and refrain from wandering and touching additional items.

#### **4. Screening procedures:**

- A. Children who have a fever of 100.00°, difficulty breathing, cough, an undiagnosed rash or other signs of illness will not be admitted to the facility. Parents must be on the alert for signs of illness in their children BEFORE ATTENDING and to keep them home when they are sick.
- B. Staff will screen and observe children for these symptoms throughout the day.
- C. Staff will screen themselves daily before entering the facility
- D. Isolation of a sick individual will be implemented such as waiting in the office or a cot in the corner of the classroom until a guardian can pick up.

**IRT receives weekly communication and guidance from a local Health Care Nurse. Transmission levels will be based on the facility, local Health Care guidance, and local School Districts guidance.**

#### **MODERATE COMMUNITY TRANSMISSION:**

- 1. IRT will coordinate with local health officials to determine the best strategies for safety.
- 2. If child attendance is high in certain classrooms, IRT may limit care to essential workers of certain tiers.

#### **SUBSTANTIAL COMMUNITY TRANSMISSION:**

- 1. IRT will coordinate with local health officials to determine the best strategies for safety.
- 2. Child drop off and pick will be at the entrance to prevent others entering classrooms.
- 3. Care may be limited to essential workers of certain tiers.
- 5. The facility may temporarily close or reduce hours of operation.

#### **CONFIRMED CASE:**

- 1. IRT will be notified or IRT will notify local health officials and MDH and work with the assigned MDH coach.
- 2. All families and staff will be immediately notified of the exposure via brightwheel and/or phone call.
- 3. The positive individual will leave/isolate immediately and be absent for at least 5 days AND have no symptoms in order to return. Confidentiality of the individual as required by the Americans with Disabilities Act and the Family Education Rights and Privacy Act will be maintained.

4. Close contacts within the classroom DO NOT have to quarantine but will be monitored closely by family and providers over the next 14 days for symptoms of COVID. If symptoms develop, quarantine for 5 days. If you chose to quarantine your asymptomatic child because of possible exposure please message us. You will be charged tuition according to standard Policies and Procedures
5. Close contacts within a HOUSEHOLD WILL BE REQUIRED to quarantine for 5 days. If symptoms develop, quarantine for an additional 5 days will be required.
6. Operations will continue based on MDH guidance. At any point in time, a room or facility closure and longer quarantine periods may happen in order to stop a spread. Families are encouraged to report any symptoms or testing to the office via email or phone.

#### **Sources of Emergency Care**

Mt. Iron Fire Department (218) 748-7570

Mt. Iron Police Department (218) 748-7574

Virginia Hospital (218) 741-3340.

We will dial 911 for emergency services.

#### **Iron Range Tykes Learning Center's liability**

Insurance to protect your child in case of accidents requiring medical attention is Otis-Magie Insurance Agency of Virginia.

### **Emergency Policies**

#### **Emergency Shelter**

Our center's gym is specially designed as a protective storm shelter. In the event that the center becomes unsafe for the children the staff will move the children to Lake Country Power at 8535 Park Ridge Dr (across the street of the center) and parents will be notified immediately through the brightwheel app.

#### **Fire Drills**

We have mandated monthly fire drills all year, which are logged and filed listing the following: date, time, staff present, number of children present, and management person present. First staff at the scene closes off fire area, pulls fire alarm if available, and picks up the tablet and emergency backpack. Other staff get children to safety outside of the building by use of either the primary or secondary fire exit posted in each classroom. A copy of this is below for your reference. A count of children is made when all are outdoors. The outside meeting place is the sign in the parking lot of Iron Range Tykes Learning Center. One staff member will call 911 (from outside of the building) after everyone has been evacuated from the building and wait for the fire department. Parents will be notified via our brightwheel app. No one will return to the building until the fire department officials have given approval.



FLOOR PLAN  
3/32" = 1'-0"

----- Primary exit evacuation route  
----- Secondary exit evacuation route  
-X- Fire extinguisher

IRON RANGE TYKES LEARNING CENTER  
8440 ENTERPRISE DRIVE SOUTH  
MT IRON MN 55768

**Sources of Emergency Care**  
Mt Iron Fire Department (218) 748-7570  
Mt Iron Police Department (218) 748-7574  
Virginia Hospital (218) 741-3340  
We will dial 911 for emergency services.

Owner: Shawntel Gruba (218) 349-7196  
Maintenance/Repair: Adam Gruba (218) 349-3832  
Relocation site: Fairview clinic @ 8496 Enterprise  
Dr S (2 blocks right of center) 741-2250

### **Tornado Drills**

We have mandated tornado drills from April through September, which are logged and filed listing the following: date, time, staff present, number of children present, and management person present. Our center's gym is specially designed as a protective storm shelter. Each class room teacher will gather the tablet and emergency backpack. Other staff will get children to storm shelter located in the gym. After everyone is in attendance parents will be notified via our brightwheel app.

### **Severe Weather Plan**

If a blizzard/storm/tornado develops where the children are unable to leave the center the staff is also required to stay until all the children are gone. The center maintains food, medical supplies, clothes and extra blankets which would sufficiently supply all the children and staff. Every precaution will be taken to ensure the safety of all the children. In the event of bad weather and a decision is made to close the center early all parents will be notified. Authorized/emergency pickups will be notified if the parents are unable to be reached. The center director reserves the right to not open the center due to weather conditions.

### **Person who is suspected of abuse attempts to pick up a child**

We cannot restrict a parent access to their child/children. Staff can offer to call the child's emergency contacts to come pick up child. If none can be reached staff will call Police.

### **Special needs**

Special attention will be given to any child with special needs during an emergency.



## Missing Child


If a child is missing, the entire staff will be notified. Immediate attempts will be made to locate the missing child by available staff- members. If unable to locate the missing child immediately notify the Directors, the Police, and the child's parent/guardian.

## Procedures for recording any accidents, injuries & incidents involving a child enrolled in the center

Staff must provide written record of all accidents, injuries, and incidents must include the following: name and age of the persons involved, date of the accident injury or incident, place of the accident injury or incident, type of injury, action taken by staff persons, and to whom the accident injury or incident was reported.

If a serious injury or death occurs, we are required to report the incident within 24 hours of being notified of the incident on the serious injury/death report. The report needs to be submitted electronically to DHS on the childcare center serious injury and death reporting form.

## Emergency Preparedness Form

		<b>Child Care Emergency Plan</b>	
<b>Instructions:</b> State law requires the following providers to use this form to create an emergency preparedness plan: (1) licensed child care centers (Minn. Stat. 245A.41, Subd. 3), (2) licensed family child care providers (Minn. Stat. 245A.51, Subd. 3), and (3) certified child care centers (Minn. Stat. 245H.15). Please refer to the Keeping Kids Safe planning guide for guidance in creating your emergency preparedness plan.			
<b>1. Provider Information</b>			
DATE CREATED	DATE(S) REVISED		
March 2018	11/01/2019 Dec 2023		
PROVIDER NAME			
Iron Range Tykes Learning Center			
ADDRESS	CITY	STATE	ZIPCODE
8520 Park Ridge Dr	Mt Iron	MN	55768
PHONE NUMBER	EMERGENCY PHONE		
218-248-6881	Shawntel: 218-3497196 Katie: 218-780-5890		
<b>2. Shelter-in-Place / Lockdown Procedures</b> If we need to stay in the building due to an emergency, the following procedures will be followed			
LOCATION 1 (IN-BUILDING)		LOCATION 2 (IN-BUILDING)	
Classroom bathroom or infant nap room		Classroom closets	
<b>PROCEDURES FOR SHELTER-IN-PLACE / LOCKDOWN</b> Describe your procedures (who, what, where, when)			
Teachers are responsible to gather all children into the bathroom/nap room in classroom and do a head count. The aide is responsible to grab the emergency backpack, refrigerated medications and the tablet. Emergency contact information is kept in the backpack and on the tablets. The teacher will dial 911 if possible and try to keep the kids quiet and calm as possible.			
<b>SHELTER-IN-PLACE / LOCKDOWN FOR CHILDREN WITH DISABILITIES OR CHRONIC MEDICAL CONDITIONS</b> Include any special circumstances or procedures needed for children with disabilities or chronic medical conditions			
The aide/assistant teacher will assist children with disabilities or chronic medical conditions into the bathroom. All children will be together and have access to emergency supplies in the backpack.			
<b>Notification</b>			
<b>EMERGENCY RESPONDERS WILL BE NOTIFIED WHEN</b>			
Once all children are safe and secure in their designated room. The teacher will dial 911 from their cell phone.			
<b>PARENTS / GUARDIANS WILL BE NOTIFIED WHEN</b>			
Parents will have a copy of our evacuation/relocation procedures. They will be notified via our brightwheel app after 911 has been contacted.			
<b>Emergency Kit for Shelter-in-Place / Lockdown Situations</b>			
<b>PLEASE DESCRIBE YOUR EMERGENCY KIT.</b> Please see Keeping Kids Safe for more information about how to use your emergency kit during shelter-in-place and lockdown situations			
Each classroom has an emergency backpack that contains the following: emergency list of action steps and phone numbers, flashlight with batteries, bandages, bandage tape, gloves, gauze, hand sanitizer, disinfecting hand wipes, and extra batteries. The tablet will contain all children/guardian info will also be in there. Any medication will be stored in the backpack so they will be readily available.			

### 3. Evacuation and Relocation Procedures

IF WE NEED TO EVACUATE OUR SITE AND RELOCATE TO ANOTHER SITE, THE FOLLOWING PROCEDURES WILL BE FOLLOWED

**EVACUATION ROUTES AND EXITS** Show how you and the children will leave from any room in the building

The teacher will do a head count, while the aide grabs the emergency backpack and tablet. Each room will exit the building using their primary exit, however will not hesitate to adjust these routes to avoid dangerous areas.

**EVACUATING INFANTS AND TODDLERS** Describe any special circumstances or procedures needed for evacuating infants and toddlers from the building

Teacher will get one or two cribs and put infants in them, while aide/assistant teacher grabs the emergency backpack and tablet. Teacher will do a headcount and both staff will exit by wheeling the cribs out their primary or secondary exit. All staff will relocate to our relocation site or Lake Country Power.

**EVACUATING CHILDREN WITH DISABILITIES OR CHRONIC MEDICAL CONDITIONS** Describe any special circumstances or procedures needed for evacuating children with disabilities or chronic medical conditions from the building including procedures for storing a child's medically necessary medicine

Teacher will do a headcount while aide grabs emergency backpack and tablet. The aide/AT will assist children with disabilities or chronic medical conditions to the relocation site. A second headcount will then take place.

#### Notification

**EMERGENCY RESPONDERS WILL BE NOTIFIED WHEN**

Emergency responders will be notified through our alarm system as well as staff dialing 911 once at the relocation site.

**PARENTS / GUARDIANS WILL BE NOTIFIED WHEN**

Parents/guardians will have a copy of our evacuation/relocation procedures. They will be notified via brightwheel after 911 has been contacted.

#### Emergency Kit for Evacuation and Relocation Situations

**DESCRIBE YOUR EMERGENCY KIT.** Please review Keeping Kids Safe for more information about how to use your emergency kit during evacuation and relocation situations. Each classroom has an emergency backpack that contains the following: emergency list of action steps and

phone numbers, flashlight with batteries, bandages, bandage tape, gloves, gauze, hand sanitizer, disinfecting hand wipes, and extra batteries and tablet. The tablet will contain all child/guardian info. Any meds will be in it.

#### Relocation - Location 1

BUILDING NAME	REASON(S) TO EVACUATE TO LOCATION 1		
Lake Country Power	Fire/lockdown		
ADDRESS	CITY	STATE	ZIP CODE
8535 Park Ridge Dr	Mountain Iron	MN	55768
PHONE NUMBER	EMERGENCY PHONE		
218-741-8137	Shawntel:218-349-7196 Katie:218-780-5890		

**TRANSPORTATION TO LOCATION 1**

walking West on Park Ridge Drive 200 feet, taking next right

**OTHER DETAILS**

#### 4. Parent/Guardian and Child Reunification Procedures

If we need to evacuate, shelter-in-place, or when parents/guardians are unable to get to children, the following procedures will be followed to reunite children with parents/guardians or designated contacts as soon as it is safe.

##### PARENTS / GUARDIANS WILL BE NOTIFIED WHEN

Parents/guardians will have a copy of our evacuation/relocation procedures. They will be notified via brightwheel after 911 has been contacted. In the event a parent cannot be contacted, the next authorized contact person will be notified.

##### PARENT/GUARDIAN CONTACT INFORMATION WILL BE MAINTAINED IN THIS LOCATION

Each room will have their own backpack and tablet containing the child's emergency contact information.

**Release** Children will only be released to parents/guardians or other individuals listed on the child's form (with proper identification)

##### OTHER DETAILS ABOUT RELEASE OR REUNIFICATION

Children will only be released to parents/guardians or other individuals listed on the child's form (with proper identification).

#### 5. Continuing Operations Procedures

In the period during and after a crisis, the following procedures will be followed regarding continuing operations

##### Notification and Decision Making

THE FOLLOWING PEOPLE WILL NEED TO BE NOTIFIED AND BE A PART OF THE DECISION-MAKING PROCESS REGARDING CONTINUED OPERATIONS DURING A CRISIS

The owner, the directors, the parents, and the staff's emergency contacts.

THE FOLLOWING PEOPLE WILL NEED TO BE NOTIFIED AND BE A PART OF THE DECISION-MAKING-PROCESS REGARDING CONTINUED OPERATIONS AFTER A CRISIS

The owner, the directors, all the enrolled families, all the staff, and the DHS licensor.

## 6. Emergency Contact Information

### For Emergencies - Dial 911

#### Law Enforcement Agencies

CITY (if applicable)	CONTACT NAME
Mountain Iron	Kevin Friebe
NON-EMERGENCY NUMBER	24-HOUR EMERGENCY NUMBER
218-748-7574	911
CITY (if applicable)	CONTACT NAME
Virginia	Nicole Mattson
NON-EMERGENCY NUMBER	24-HOUR EMERGENCY NUMBER
218-748-7500	911

#### Utility Emergency Phone Numbers

ELECTRIC	COMPANY
Mt. Iron Utilities	Mt. Iron Utilities
CONTACT PERSON	24-HOUR EMERGENCY NUMBER
Tim Satrang	911
GAS	COMPANY
MN Energy	MN Energy
CONTACT PERSON	24-HOUR EMERGENCY NUMBER
customer service 844-889-3400	1-800-889-4970
WATER	COMPANY
Mt Iron Utilities	Mt Iron Utilities
CONTACT PERSON	24-HOUR EMERGENCY NUMBER
Ty Hebl	911

#### General Emergency Resource Numbers

MINNESOTA POISON CONTROL	PHONE NUMBER
	800-222-1222
CRIME VICTIM SERVICES	PHONE NUMBER
Virginia Courthouse	218-749-7101
POST-CRISIS MENTAL HEALTH HOTLINE	PHONE NUMBER
Range Mental Health Clinic	218-749-2881
FIRE DEPARTMENT	PHONE NUMBER
Mt Iron Fire Dept	218-748-7571
OTHER	PHONE NUMBER
Mt Iron Fire Chief Mark Madden	218-748-7570
NAME OF INSURANCE AGENCY	
Otis Magie Insurance Insurance in Virginia	
INSURANCE CONTACT PERSON	PHONE NUMBER
	218-248-8396

#### Licensing or Certification Information

LICENSING OR CERTIFICATION NUMBER	
1093043	
LICENSED OR CERTIFIED BY STATE OR COUNTY	
<input type="text"/>	
LICENSOR NAME	LICENSOR PHONE
Rebecca Mesto	651-431-6030 ext 4021

#### Child Care Assistance Program (CCAP) Information (If applicable)

CCAP PROVIDER ID	
38734	
CCAP AGENCIES REGISTERED WITH	CCAP AGENCY PHONE NUMBER(S)
St Louis & Koochington Counties	218-726-2064

## 7. Identification of Hazards

This section is provided as a resource for your emergency preparedness. It allows you to identify the risk of certain hazards occurring, the impact that a hazard could have if it did occur, and how you would continue operating during and after the emergency.

Attention licensed child care centers: You are not required to complete this section as you should have already identified potential risks and impacts as part of your Risk Reduction Plan (see Minn. Stat. 245A.66). If you have not addressed any of these hazards that could impact your site, you should use this section or add items to your Risk Reduction Plan.

HAZARDS	RISK OF HARM, POTENTIAL IMPACT AT YOUR SITE, AND PLAN FOR CONTINUING OPERATIONS DURING AND AFTER THE EMERGENCY
Fire	
Flood	
Gas/Chemical Leaks	
Hazardous Materials	
High or Low Temperatures	
Infectious Diseases	
Nuclear Power Plant	Please note, there are two nuclear power plants in Minnesota. Depending on your proximity to these plants, which are located in Welch and Monticello, you may/may not have a potential "risk of harm."
Severe Winter Weather	
Thunderstorm	
Tornado	
Violent Incidents	
Other	



## **Health Policies**

### **Infant Feeding**

We will obtain written dietary instructions from the parent of the child, have the infant's feeding schedule available in the food preparation area, and offer the child formula or milk and nutritionally adequate solid foods in prescribed quantities at specified time intervals. Sanitary practices/procedures are used to prepare, handle, and store formula, breast milk, solid foods, and supplements. Infants 12 months and under must be given breast milk or formula. Once the infant turns 1 year old, they will be given whole milk from a cup. Any formula or breast milk brought into the center from home must be labeled clearly with child's first and last name.

### **Preparing, Handling and Storing Formula**

Staff will wash hands and surfaces. Infant bottles are labeled with the baby's name. Glass is prohibited in the facility. Prepare formula according to container label. Refrigerate prepared bottles until ready to use and use them within 48 hours from the time they were prepared. We are required to throw out prepared formula not used within 1 hour and breast milk not used within two hours. For babies who prefer a warm bottle, staff will warm the bottle immediately before feeding by holding it under running warm water. Never use a microwave to heat the formula.

## **Dietary Needs**

### **Infant diets**

The diet of an infant must be determined by the infant's parent. The license holder must ensure that sanitary procedures and practices are used to prepare, handle, and store formula, milk, breast milk, solid foods, and supplements. Procedures must be reviewed and certified by a health consultant. A center serving infants must: obtain written dietary instructions from the parent of the child; have the infant's feeding schedule available in the food preparation area; offer the child formula or milk and nutritionally adequate solid foods in prescribed quantities accordingly to USDA Food Guidelines at specified time intervals; and label each child's bottle.

### **Prescribed diet needs**

The license holder must provide for a child's dietary needs prescribed by the child's source of medical care or require the parent to provide the prescribed diet items that are not part of the menu plan approved. A license holder serving a child who has a prescribed diet must keep the diet order and its duration specified in the child's record. All staff designated to provide care to the child must be informed of the diet order.

### **Food allergy information**

Information about food allergies of the children in the center must be available in the area where food is prepared or served to children with allergies. All staff providing care to the child must be informed of the allergy.

### **Allergy Prevention & Response**

Before admitting a child for care, the license holder must obtain documentation of any known allergy from the child's parent or legal guardian or the child's source of medical care on application. If a child has a known allergy, the license holder must maintain current information about the allergy in the child's record and develop an individual child. The individual child care program plan must include but not be limited to a description of the allergy, specific triggers, avoidance techniques, symptoms of an allergic reaction, and procedures for responding to an allergic reaction, including medication, dosages, and a doctor's contact information. The license holder must ensure that each staff

person who is responsible for carrying out the individual child care program plan review and follow the plan. Documentation of a staff person's review must be kept on site. At least annually or following any changes made to allergy-related information in the child's record, the license holder must update the child's individual child care program plan and inform each staff person who is responsible for carrying out the individual child care program plan of the change. The license holder must keep on site documentation that a staff person was informed of a change. A child's allergy information must be available at all times including on site, when on field trips, or during transportation. A child's food allergy information must be readily available to a staff person in the area where food is prepared and served to the child. The license holder must contact the child's parent or legal guardian as soon as possible in any instance of exposure or allergic reaction.

The license holder will contact the child's parent or legal guardian as soon as possible in any instance of exposure or allergic reaction that requires medication or medical intervention. License holder must call emergency medical services when epinephrine is administered to a child in the license holder's care. Documentation will be kept on site for any changes made to allergy-related information in the child's record and the license holder will update the child individual child care program plan and inform each staff person who is responsible for carrying out the individual child care program plan for the change. Documentation of the child's individual child care program plan in regard to allergies will be available at all times including on site, when on field trips or during transportation.

Each staff person who is responsible for carrying out the individual child care program plan will review documentation annually and documentation of the review will be kept on site.

### **Parent Grievance Procedures**

If there are any issues, problems, or worries in your child's room please talk to the teacher immediately. If the issue has not been taken care of, after you have discussed it with the teacher, you must bring it to the attention of the director. Any issues above and beyond that: *Department of human services licensing* (651) 431-6015.

### **Maltreatment Of Minors Mandated Reporting Policy For DHS Licensed Programs**

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

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

**Where to Report.** If you know or suspect that a child is in immediate danger, call 911. Reports concerning suspected abuse or neglect of children occurring in a licensed child foster care or family child care facility should be made to county child protection services. Reports concerning suspected abuse or neglect of children occurring in all other facilities licensed by the Minnesota Department of Human Services should be made to the Department of Human Services, Licensing Division's Central Intake line at (651) 431-6600. Incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency at 218-471-7128 or local law enforcement at 218-748-7574. If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota Statutes or Rules that govern the facility, you should call the Department of Human Services Licensing Division at (651) 431-6600.

**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 to ensure reviews completed.** The internal review will be completed by Shawntel Gruba . If this individual is involved in the alleged or suspected maltreatment, Wynona Clinton 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.



### **Discrimination Statement**

We do not discriminate in admission of children in the center. It is illegal to discriminate against children or parents because of race, color, gender, religion, age, disability, or national origin.

### **Operations during a pandemic/crisis**

When operating in a pandemic, IRT must adjust and change its policies in order to be in compliance with CDC/DHS/MDE/MDH/Governor's guidelines and recommendations. These policies are a guideline and may change as a pandemic/crisis changes.

1. Frequent and intense cleaning/disinfecting will take place all over the center
  - A. Less toys/supplies will be out to reduce the spread of germs
  - B. Doors/handles will be disinfected frequently throughout the day
  - C. Weekends will include deep/thorough cleaning practices
2. Extra items from home will not be permitted inside; blankets, toys, bags
3. Air exchange system filters will be changed monthly and will run extra cycles daily
4. Room ratios and home classrooms will adjust to keep group size limited
  - A. Rooms will be rearranged to divide students into groups when possible
  - B. Daily program plans will adjust to the children's needs
  - C. We may have to limit care to essential workers only
5. We may operate outside our normal business hours or reduce normal business hours to accommodate essential workers and staffing limitations (no weekends)
6. Parents and child's hands will be washed at drop off and pick up
7. No visitors will be allowed in the building
8. Drop off and pick up people are limited/consistent
9. Sick exclusion policy will be strictly enforced
10. Home/crisis schooling will be allowed and we will help with work/meetings as much as possible
11. Considerations of payment plans and reduction of policies to hold a child's spot will be taken into high consideration on each family basis

### **Risk Reduction Plan**

A risk reduction plan will be reviewed and documented annually along with staff orientation on the risk reduction plan. When conducting the review of the license holder must consider incidents that have heard in the center since the last revealing including the assessment factors in the plan, the internal reviews conducted under this section in any, since been no treatment findings in any, and incidence that caused injury or harm to a child in any better that occurred since the last review. Please find this form in the office.