

# OPEN ARMS EARLY CHRISTIAN CHILDHOOD CENTER

## PARENT HANDBOOK AND REFERENCE GUIDE Revised January 2016

“Where Arms are Open to Children and Hearts are Open to God.”

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## **Introduction**

Welcome to Open Arms Christian Early Childhood Center! We are delighted that you have chosen us to care for your child. We look forward to getting to know your child and your family, and serve you in the best way possible. This handbook serves as one form of communication between us and the families in our care. It is our hope that you will read over this Parent Handbook upon enrolling your child and will clarify any questions with the Director promptly. Thank you and welcome!

### **Ownership**

Open Arms Christian Early Childhood Center, "Open Arms", is a non-profit, Christian, early childhood program operated by Holy Emmanuel Lutheran Church of Bloomington, Minnesota. A Board established by the congregation oversees Open Arms.

### **Mission Statement**

Open Arms Christian Early Childhood Center offers to families a caring, non-judgmental, supportive Christian environment. Children's development is enhanced by opportunities that meet the individual needs of the whole child: spiritual, social, emotional, physical, intellectual, and creative. A loving, secure, and age-appropriate environment is culturally sensitive and encourages children to learn through play.

## **Program Information**

### **Hours of Operation**

6:30a.m. – 6:00 p.m. Monday through Friday

### **Center Capacity**

Total number of children in the center at one time: not to exceed 115

Infants: not to exceed 26

Toddlers: not to exceed 43

Preschool: not to exceed 74

School Age: not to exceed 20

### **Staff Qualifications**

The Director and the staff of Open Arms have educational backgrounds and experience that meet and exceed the Minnesota Department of Human Services licensing requirements. Each child's classroom is staffed with qualified caregivers and certified teachers. Volunteers and members of Holy Emmanuel Lutheran Church provide hands and hearts to assist in care and enhance your child's day.

### **License**

Open Arms is licensed by the Human Services Department of the State of Minnesota (Division of Licensing telephone number is 651-296-3971) to provide full and limited part-time care for 115 children at any one time.

### **Data Privacy and Parental Consent**

Records concerning your child, i.e. enrollment forms, health records, observation records, and written parent-teacher conferences reports and all other information about your child, is confidential information and will only be accessible to you, the director,

administrative staff, your child's teachers, and a person designated by the state licensing department to review our records for licensing purposes.

If at any time an outside party is deemed necessary to observe or work with a child (of any age) at the Center, parental/guardian consent is always required before any action can be taken. This includes behavioral and cognitive assessments, as well as observations done by students or other early childhood professionals. A special consent form would be given to parents in any such instance. Parental consent is also needed for field trips and any special activities outside of the center.

### **Field Trips**

Field trips and nature walks are an important part of the educational program and will be taken periodically to nearby places. A fee will be charged to cover the cost of admission, transportation, and/or program costs. A first aid kit and emergency cards are taken by Open Arms staff on all field trips and walks. Children are required to wear an Open Arms Field Trip T-Shirt and tennis shoes with socks. Field Trip shirts will be provided by the center and given to the children on the day of the field trip. Adequate adult supervision will be provided by staff and parent volunteers.

A signed permission form is required for each child to participate in a field trip. Generally, off-site trips will be taken only by the preschoolers. Younger children will be restricted to short walking trips.

If you choose to not have your child participate in a field trip, please notify your child's teacher as soon as possible. Children who are late and miss the field trip bus will either need to be transported to the field trip location by the parent(s) or will need to be taken home and brought back when the children return from the field trip.

### **Pets**

Pets may be used as an educational resource for children in a homebase. A pet will be allowed in the Center only if it is properly housed, cared for, inoculated and licensed in accordance with local health codes. Parents will be informed when pets are in the Center.

## **Enrollment and Registration**

### **Enrollment**

Enrollment is considered complete when all required enrollment forms (Registration, Emergency Card, Immunization Form\*\*, Food Program Application, and Permission Form) are completed and returned to Open Arms with paid registration fee of \$60 per child and one week's tuition for each child. **These fees are non-refundable.** Parents are encouraged to tour the center with their child and arrange a visit with their child's classroom. An intake interview with the child's teacher(s) will be scheduled, by the teacher, prior to the child's attendance at Open Arms. Full time enrollment is considered 5 days, and is given priority. Part time enrollment is defined as two to four days per week.

Please Note:

\* An updated Health Care Summary form is required annually for children under 24 months of age, and whenever a child 24 months or older advances to an older age category. Parents have up to 30 days from their child's first day of attendance to get this form back to the center.

\*\* The Immunization list is not required if the form is signed and notarized as a statement of parental objection to the immunization, or medical exemption, signed by the physician.

### **Change in contracted days**

A \$30.00 processing fee may be assessed to a change in contract attendance days. This does NOT include a child moving to a different room.

### **Enrollment of Child with Special Needs**

Children with special needs will be accepted after an evaluation is made to determine whether or not Open Arms can be beneficial to the child's development. Open Arms will develop a written program plan with staff, parents, and a qualified consultant. Progress of the child will be regularly evaluated by the resource consultant, staff, and parents.

Special needs encompass a wide range of conditions. Children with unclear speech or behavioral issues are also termed special needs. Open Arms has available special needs resources. Parents must give consent for child to receive assistance. When Open Arms staff approaches parents with special needs concerns, it is in no way a judgment of parenting skills; rather it is in the spirit of helping the child.

## **Arrival and Departure**

### **Sign In/Out**

Parents are required to use the time clock located at the front desk to sign their child(ren) in and out. The time clock is used for billing purposes and to verify attendance. You must also sign your child in and out in their classrooms. Parents are required to make sure the staff in their child's classroom is aware that the parent is dropping off or picking up. If a parent is not greeted at these times because they are busy with a child please make sure the teacher sees or hears you dropping off or picking up your child.

### **Key Cards / Building Security**

Access to Open Arms is controlled by a keyless entry system for the safety of your child and the center. Parents must obtain and use a key card for a refundable deposit fee of \$10.00 each. The deposit will be returned to you in the form of a credit to your account or a paper check. If your key card is lost, stolen or damaged your deposit fee will not be refunded and you will need to purchase another card to replace the lost or stolen one. Upon withdrawal, your key card will be deactivated and you will receive your deposit fee back, as long as the card(s) are returned to Open Arms in useable condition. Please do not allow anyone else to use your key card, and report lost or stolen key cards immediately so that they can be deactivated.

## **Center Visitors**

For the safety of our children, we take every precaution to monitor the doors that access our space, and we reserve the right to screen visitors. Please contact any staff member if you suspect the presence of any unknown person in or near our facility.

As a secure center, all visitors must be approved by the Director or Administrative Staff, provide adequate identification, and sign in/out at the front desk. After signing in, each visitor will receive a visitor badge. Open Arms encourages all parents of enrolled children to visit at any time.

## **Release of Child**

If a person other than the parent or authorized person (listed on emergency card & registration form) is picking up the child, Open Arms staff must be notified in writing. It is the responsibility of the parents to notify Open Arms in writing if/when authorized individuals change. In emergencies, a parent must call to inform Open Arms staff that another person will pick up the child and give a description of the person. The person will be asked to show proof of picture identification, such as a valid driver's license or state identification card.

Open Arms will not release a child to any person without prior written permission from the parent or guardian. If an unauthorized person arrives to pick up a child, the parent/guardian will be contacted by phone for permission. We cannot legally keep a parent from picking up his/her child from Open Arms without having a copy of a current court order. If there is a restraining order, a copy must be kept in the student's file and Open Arms staff notified.

## **Tuition, Credits and Absence Information**

### **Childcare Tuition**

Tuition is **prepaid** for the days your child is contracted to attend even if care is not provided due to illness, center closing, holidays, and staff in-service days as listed on the current school calendar. Please refer to the Childcare Tuition Fee Schedule for pricing.

We do work with Hennepin County Assistance. County assistance co-pays are **pre-paid** for the time period that the county has approved. Families that are receiving county assistance are responsible for all tuition that is not approved or paid by the county program. County Assistance will not pay for late fees that incur from picking up children late from the center. Families that are receiving county assistance are responsible for all late fees. Childcare may be terminated if an account becomes two weeks past due.

### **Payment Plan**

Parents are required to fill out a Payment Plan Form and submit it to the Director at the time of enrollment.

Weekly: Due by 6pm on Friday prior to the week of care.

Bi-weekly: Due by 6pm on Friday prior to the next two weeks of care

Monthly: Due by 6pm on the last Friday of the month for the next month of care

Arrangements for late payment due to emergencies must be made with the Director.

All payments are to be made even if care is not provided due to illness, center closing,

holidays or staff in-service days as listed on the current school calendar. Please refer to the Childcare Tuition Fee Schedule for pricing.

### **Method of Payment**

Open Arms accepts the following payment options: Check, Money Orders, and Cashier's Check. Visa, Master Card, and Discover will also be accepted. Open Arms does not accept cash payments. Automatic withdrawal is available from your checking account or credit card.

### **Returned Checks**

Returned checks will be assessed a \$30 surcharge. The surcharge and amount of the check must be paid in money order, cashier's check or credit card.

### **Late Pick-Up**

Open Arms closes promptly at 6:00 p.m. Parents will be charged \$15.00 for the first 15 minutes or fraction thereof, and \$2.00 per minute after 6:15 pm for each child at Open Arms past 6:00 p.m. If you know you will be late, please make arrangements for another authorized person to pick up your child before closing time. The total amount for the late fee will be added to your weekly payment and must be paid by the end of the week. In the event that your child has not been picked up by 6:10 p.m. Open Arms will begin calling authorized persons to pick up the child. If the parent or authorized contacts have not been reached by 6:30pm, the child will be in the care of the police as an abandoned child.

### **Late Payments**

A late payment fee of \$15 per child will be assessed on the Monday of the week of care if tuition is not paid for the week.

### **Holidays/In-service**

Open Arms is closed on New Year's Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving, Day after Thanksgiving, Christmas Eve, Christmas Day, and 3-4 staff in-service days per year. Please see current school calendar for dates.

### **Available Discounts**

Members of Holy Emmanuel Lutheran Church, whose child(ren) is enrolled at Open Arms receive a discount on tuition, based on current Holy Emmanuel membership requirements. A minimum of two Sundays church attendance per month is required to receive the discount. The discount is applied for the month following the month of church attendance.

### **Vacation Credit**

A vacation week is defined as no attendance for the child Monday through Friday of the same calendar week. A vacation week is considered approved with a prior two weeks' notice to the Director. No tuition will be charged for a vacation week. For each newly enrolled child, they will earn one week of vacation after 3 months of continuous enrollment, and an additional week after 6 months of continuous enrollment. Each child will receive a maximum of two weeks of vacation per calendar year. A child may not receive a vacation week credit while attending the center. To be eligible for a vacation credit, the child's tuition account must be at a zero balance or a credit.

### **Family Referral Credit**

Families that refer another family to enroll at Open Arms and attend for at least one month will receive a credit of \$50 towards their tuition.

*We understand everyone has difficult times financially.  
As a Christian Organization, if your family is experiencing a financial hardship please contact the Director for information on assistance.*

### **Withdrawal from Center**

A two-week written notice is required for any withdrawal. Tuition for those two weeks is the responsibility of the parent even if the child does not attend. If a parent wishes to re-enroll a child at a later time, the parent must follow the current registration procedures. Re-enrollment is dependent upon available space in the classrooms.

### **Partnership with Parents**

#### **Grievance Procedure**

Parents are encouraged to give input regarding the operation of Open Arms. If a parent has a concern about the program, the following process has been established to ensure the concern is addressed:

- Discuss the concern with your child's teacher. If the concern remains, then
- Discuss the concern with the Director of Open Arms. Concerns will be addressed within seven days. If not satisfactorily resolved, then
- The concern may be taken to the Board of Early Childhood Education of Holy Emmanuel Lutheran Church. *Abusive behavior and/or verbal threats by parents toward Open Arms staff, children, or other parents will be cause for immediate termination of care.*

#### **Termination Policy**

If the below events occur, Open Arms may suspend and/or terminate care for a child or family.

- Non-payment of tuition after two weeks of care
- Physical or verbal abuse by a child toward staff or other children at the center
- Inability of staff to adequately care for a child's needs
- Parental hostility, the use of profane language, and verbal or physical threats or abuse toward staff or other adults in the center.
- Abuse of center policies.
- 

#### **Parent Communication**

Activities will be posted on a parent information board, and in the monthly newsletter. Illness reports, school menus, yearly calendar and other useful information are available at the front desk and the Parent Information Board. Parents will receive updates on PreciouStatus describing the child's food intake, sleeping patterns, and general behavior. Special notes from the staff or Director may be included in these reports.



## **Parent Conferences**

Formal conferences with your child's Teacher discussing the child's spiritual, physical, social, intellectual, emotional, and creative development will be scheduled in the fall and spring.

## **Transition between Classrooms**

When children are ready to move from one room to the next, the child's new teacher will schedule a meeting with the family to discuss new routines, expectations, and responsibilities of the room. A child will be transitioned into the next room over a period of time to allow the child to adjust to their new environment. The child's tuition rate will not change until they have fully transitioned into their new classroom.

## **Parent Committee**

A parent committee may meet on a regular basis. This is an informational meeting during which parents can discuss center activities, upcoming events and share suggestions with the Director. If you are interested in joining the Parent Committee, please speak with the Director

## **Supplies/Clothing**

The teachers in your child's classroom can provide you with a list of supplies for you to bring for your child, as needed. Parents are asked to label all items with the child's name. Toys from home are not allowed at Open Arms.

At Open Arms children will play and get dirty! Remember, play is a child's work. Children will go outside daily, weather permitting. Parents are asked to dress their children in appropriate seasonal wear. Tennis shoes with socks are preferred for children's play. For the safety of your child, we not allow backless shoes, slip-ons, or flip-flops.

## **Fundraisers**

Open Arms is a non-profit organization and relies on fundraisers and gifts to supplement its operating and capital budgets. For example, previous fundraisers have been and are being used to purchase things like playground equipment, carpet and furniture for the classrooms. Your participation in fundraisers is appreciated.

## **Family Functions**

Family functions including singing in Sunday worship services at Holy Emmanuel, the children's Christmas Program, Parent Meet and Greet and Ice Cream Social etc., are planned throughout the year. Participation in these activities is encouraged and appreciated by children and staff.

## **Meals and Snacks**

### **Infants**

Parents provide all food and formula for children up to one year of age. Once a child eats table food and drinks whole milk, parents have the option of purchasing a hot lunch for \$2.50/day or continuing to provide a cold lunch that meets the USDA guidelines. Meals are ordered one month at a time and parents are given the menus ahead of time

to make their selections..Open Arms provides breakfast and snacks to all children over one year of age.

### **Infants over 12 months of age, Toddlers and Preschoolers**

A nutritious breakfast and afternoon snack are served each day. Parents have the option of purchasing a hot lunch for \$2.50/day or continuing to provide a cold lunch that meets the USDA guidelines. Hot lunch is provided by a licensed caterer and meals are planned by a certified nutritionist/dietician following USDA guidelines. The menus are posted at the Parent Information Board and in the classrooms. Parents are also given a menu prior to the start of each month so they can determine what days they want their child to eat hot lunch and place their order.

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) If you wish to file a Civil Rights program complaint of discrimination, [complete the USDA Program Discrimination Complaint Form](#), found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

### **Food Allergies and Accommodations**

Please make us aware of any allergies or dietary needs that your child has. Food allergies and special dietary needs for all children will be posted in the kitchen and will be written on the meal plan in the classroom for infants. A Special Diet Form must be filled out by your child's physician if substitutions need to be made for any reason. This form must be turned in at the time of enrollment or when the child is diagnosed with a food allergy. Parents may be required to provide the components of the meal that the child cannot have for breakfast and snack. For lunch, children will be offered an alternative option by the caterer except for milk. If the alternative option is not viewed as adequate by the parent, the parent is responsible to provide the components of the meal that their child needs.

### **Severe Allergies**

If your child has severe allergies please ask the Director for the severe allergy packet. The included forms must be filled out and signed by the parent and also in some cases the child's physician. Parents must provide the medications and an epinephrine pen (epi-pen) before the child can start at Open Arms. The severe allergy forms must be updated every six months and resigned by the parents and/or child's physician.

### **Birthday and Party Treats**

Birthday and party treats must be commercially prepared and packaged. Please speak to the staff about your plans to bring treats and to see if there are any allergies in the classroom.

## **Guidance and Discipline**

### **Behavior Guidance**

In guiding young children, our goals are to help children feel good about themselves, to help children develop self-discipline, and to help them learn to consider the needs and desires of other people. Discipline and behavior guidance used by each teacher will be constructive, positive, and suited to the developmental level of each child. In order to do this, we use the following guidelines in working with children:

1. The staff will model acceptable behavior at all times.
2. Children's behavioral expectations will be developmentally appropriate.
3. The environment is prepared so that there are enough choices of activities and enough materials available to prevent arguments over them. Within this environment, our first step in guidance is to always model appropriate behavior for the children.
4. Rules are stated as clearly as possible and in a positive way. If a child acts inappropriately, the child is told what they should do, rather than dwelling on what they should not do. Clear and precise reasons and explanations are given for why a child is to do something. Our first action is to redirect a child to an appropriate behavior or activity. If necessary, and as a last resort, we will remove a child from the situation. A child is never threatened, hit or shamed.
5. Choices are given only when a choice really exists for the child, but encouragement is given to the child to make decisions.
6. Cooperation is emphasized and competition is minimized.
7. It is important for children to know that it is okay to have positive and negative feelings. We help the child label and deal constructively with feelings.

Children will never be subjected to physical punishment, punishment for lapses in toilet training, or emotional abuse. This includes, but is not limited to: rough handling, hitting, shaming, using language that frightens the child, shouting at, and threatening. No child will be left unsupervised, or withheld food, light, warmth, clothing or medical care as a punishment for unacceptable behavior. Other than to physically hold a child when containment is necessary to protect a child or others from harm, we will never use physical or mechanical restraints in dealing with a child.

### **Inappropriate Behavior/Separation from Group**

In the event that all less intrusive methods of guiding the child's behavior have been ineffective and the child's behavior threatens the well-being of the child or other children attending Open Arms, the following procedures will be followed:

- The child will be separated from the group but will remain within an enclosed part of the classroom.
- The child must be continuously seen and heard by a staff person.
- The child's return to the group must be contingent on the child's stopping or bringing under control the behavior that precipitated the separation.
- The child will be returned to the group as soon as the behavior that precipitated the separation abates or stops.
- An infant (6 weeks to 16 months of age) may not be separated from the group as means of behavior guidance.

If your child is separated from the group, it will be documented on a Separation Log. If your child is separated from the group three or more times in one day, the parent will be notified and it will be documented that you were notified. If a child is separated five or more times in one week, or eight or more times in two weeks, a special meeting will be set up with the parent, the teacher, and the Director to determine how the behavior should be handled.

### **Persistent Unacceptable Behavior**

If your child exhibits persistent unacceptable behavior:

- Staff will make observations and record the child's unacceptable behavior and their response to the behavior.
- A conference with the Director, Teacher and parent will be held to review the child's unacceptable behavior and to formulate a written plan of action.
- If no progress is made, the child may be removed from the center.

### **Biting Policy**

Our program recognizes that biting is, unfortunately, not unexpected when infants and toddlers are in group care. We are always upset when children are bitten in our program, and we recognize how upsetting it is for parents. While we feel that biting is never the right thing for children to do, we know that they bite for a variety of reasons. Most of these reasons are not related to behavior problems. Our program, then, does not focus on punishment for biting, but on effective techniques that address the specific reason for the biting. When biting occurs, we have three main responses:

1. Care for and help the child who was bitten
2. Help the child who bit learn other behavior
3. Work with the child who bit and examine our program to stop the biting

Our teachers express strong disapproval of biting. They work to keep children safe and to help the child who bit learn different, more appropriate behavior. We do not and will not use any response that harms a child or is known to be ineffective.

We give immediate attention and first aid to children who are bitten. We wash the wound with soap and water and put ice on the affected area.

When children are bitten, their parents are informed personally that day. We will not, however, tell you who has bitten your child. If the bite is on the face or has broken the skin, we will call you during the day to inform you that a particularly noticeable bit has occurred on your child. You are then to alert your doctor, in case they have any precautions that they would like you to take. In either scenario, biting is always documented on our standard Incident Report Form. It is completed and signed by the teacher and must also be signed by you. The form is then kept in your child's file and a copy is given to you as well.

When we experience ongoing biting, plans are discussed between the teachers and the Director with specific strategies and techniques to help combat the biting. We will also keep the name of the child who bit confidential to avoid labeling of the child and to give teachers the opportunity to use their time and energy to work on stopping the biting.

## Health and Safety Policies and Procedures

### **Physical Examinations and Immunizations**

Open Arms must comply with the Minnesota State Immunization Law regarding immunizations and regular physical examinations. The Health Care Summary Form must be signed by your health care source and be on file within 30 days of your child's first day at the Center. Written verification of immunization for D.P.T., polio, measles, rubella, mumps, HIB, Varicella, and PCV must be presented to the Director prior to the first day at the Center. It is required that the Health Care Summary Form be updated and given to the Director as children move to a new classroom within the Center (i.e.: infants to toddlers).

If you, as a parent/guardian, conscientiously oppose certain or all immunizations, you are to obtain the signature and public stamp of an authorized notary public. This is to be documented on your child's Child Care Immunization Record and provided to the Center before your child's first day of admission. Furthermore, in the instance that a vaccine-preventable disease to which children are susceptible occurs in the Program and your child is not immunized against said disease, your child will be promptly excluded. The length of exclusion is to be determined by the State Health Department.

### **Standard Exclusion Policies of Ill Children**

In order to minimize the spread of illness, Open Arms has developed an illness exclusion policy for all families to follow. When children arrive at the center, the teachers greet them and do a quick assessment to determine if the child is healthy. If during the quick health assessment the teacher feels that the child is ill and should not be at the center, the child will have to be taken home and exclusion guidelines followed. If your child becomes ill or has to be excluded from the center according to the Open Arms illness exclusion policies, you will be called to pick up your child. Open Arms requires that you pick up your child within ONE (1) HOUR of being called. If your child is not picked up within one hour of you being contacted, we will then call the emergency contacts listed on the child's emergency contact form in their file. In addition, the late fee of \$1.00 per minute will be assessed if you have not picked your child within ONE (1) HOUR of being called. Parents are encouraged to establish a plan for back up care should their child be ill or become ill while at the center.

Certain symptoms in children may suggest the presence of a communicable disease. If a child has to be excluded for a communicable disease, he/she can return:

1. If a doctor has certified that the symptoms are not associated with an infected agent; or
2. The symptoms have subsided and the guidelines in the policies have been followed.

Open Arms will exclude children with one or more of the following symptoms:

1. **Reportable Condition** – one that the Commissioner of Health determines to be contagious
2. **Illness** – one requiring more care than the program can provide without compromising the health and safety of others.

3. **Fever** – Axillary (under the arm) of 100 degrees or higher. Your child must be excluded from Open Arms for a minimum of 24 hours fever free without the aid of fever-reducing medication.
4. **Diarrhea** – if the number of diarrhea episodes cause excessive handling (defined as three or more abnormally loose stools during the previous 24 hours). You child may return to Open Arms after stools are back to normal without medication or after 24 hours have elapsed since the last diarrhea stool.
5. **Vomiting** – one episode. Your child may return to Open Arms 24 hours after vomiting stops.
6. **Eye Drainage** – abnormal drainage from the child’s eye. We will ask that a physician’s exam rules out pink eye or other infectious diseases. Your child may return to Open Arms with a physician’s note ruling out an infectious illness. If your child is diagnosed with pink eye, he/she may return to Open Arms after 24 hours of administering medication. Furthermore, Open Arms will require a new prescription with each incident of pink eye.
7. **Abnormal Rash**—If your child has an abnormal rash, Open Arms will require a physician’s exam to rule out a contagious illness. Child may return with physician’s approval.
8. **Unusual Color of Skin, Eyes, Stool or Urine**— Open Arms will require a medical exam to rule out an infectious disease. Child may return with physician’s approval.
9. **Lethargy or Unusual Behavior**—If your child is unable to participate in daily activities of Open Arms (including outdoor play time). Your child may return when normal activity level resumes.
10. **Respiratory Symptoms**—Labored, rapid breathing, or severe coughing; child makes high pitched croupy or coughing sound after they cough or child is unable to lie comfortably due to continuous cough. Your child may return when coughing is under control.

### **Communicable Disease Policy**

Parents are asked to notify the Director within 24 hours if their child has been diagnosed with any communicable disease. The Director will notify all parents when the children in the program have been exposed to a communicable disease. The Director will notify the Commissioner of Health within 24 hours when any illness or condition specified by law is present in the Center.

### **Specific Disease Exclusion Guidelines**

Please note: when it states “until fever is gone”, you are to abide by the 24 hour fever free without the aid of fever-reducing medication rule. Also, if we as Center staff do not believe your child to be well enough to participate in routine activities (including outdoor play), we have the ultimate authority to exclude them from attending or send your child home, even over a doctor’s opinion. A child who is put on prescription medication for a bacterial illness must be on that medication for 24 hours before returning to the Center. Exceptions are (always at the discretion of the Director): recurrent ear infections (without a fever) and those on long term health care plans (asthma, etc.).

ACUTE BRONCHITIS/  
BRONCHILITIS

Until fever is gone and the child is well enough to participate in routine activities.

CAMPLYOBACTERIOSIS	Until diarrhea has stopped.
CHICKEN POX	Until all the blisters have dried into scabs; about six (6) days after rash onset.
CONJUNCTIVITIS (PINKEYE)	Bacterial – until 24 hours after treatment begins. Viral – until a letter from a physician is provided to verify that the child does not have bacterial conjunctivitis.
CROUP	Until fever is gone and child is well enough to participate in routine activities.
CRYPTOSPORIDIOSIS	Until diarrhea has stopped.
CYTOMEGALOVIRUS (CMV)	No exclusion is necessary.
DIARRHEA	Generally, until stool returns to normal form. Each specific disease situation needs to be evaluated on an individual basis.
E-COLI	Until two stool cultures obtained at least 24 hours apart have tested negative for E. coli O157:H7.
ENTEROVIRAL INFECTION	For children with diarrhea and/or vomiting, until diarrhea and/or vomiting has stopped.
FIFTH DISEASE	No exclusion is necessary.
GIARDIASIS	For those with diarrhea only: Until the child has started treatment and diarrhea is no longer present.
HAEMOPHILUS INFLUENZAE TYPE B (Hib) DISEASE	Until the child has been treated and is well enough to participate in routine activities.
HAND, FOOT, AND MOUTH	Until fever is gone and child is well enough to participate in normal daily activities (sores may still be present).
HEAD LICE	Until first treatment is completed and no live lice are seen (nits are NOT considered live lice).
HEPATITIS A	Consult with your local or state health department. Each situation must be looked at individually to decide if the person with Hep A can spread the virus to others.
HEPATITIS B	Children who have the Hep B virus in their blood may attend childcare unless they have unusually

aggressive behaviors (e.g. biting), oozing sores that cannot be covered, or bleeding problems.

HEPATITIS C	Children who have the Hep C virus in their blood may attend childcare unless they have oozing sores that cannot be covered or bleeding problems.
HERPES, ORAL INFECTION	Until those children with a primary infection who do not have control of their oral secretions no longer have active sores inside the mouth. No exclusion necessary for children who have recurrent infections (fever blisters or cold sores).
HIV/AIDS	See HIV fact sheet on pages 105 - 106 of the Hennepin County Community Health Department Epidemiology and Environmental Health infectious disease handbook.
IMPETIGO	Until treated with antibiotics for 24 hours and sores are drying or improving.
INFLUENZA	Until fever is gone and the child is well enough to participate in routine activities.
LACROSSE ENCEPHALITIS	No exclusion is necessary.
LYME DISEASE	No exclusion is necessary.
MEASLES	Until four (4) days after the rash appears.
MENINGOCOCCAL DISEASE	Until the child has been on appropriate antibiotics for at least 24 hours and is well enough to participate in routine activities.
METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS (MRSA) COLONIZATION AND INFECTION	If draining sores are present.
MOLLUSCUM CONTAGIOSUM	Children with visible lesions should not participate in close contact activities such as wrestling or swimming.
MONONUCLEOSIS	Until the child is well enough to return to routine activities.
MUMPS	Until nine (9) days after swelling begins.
PERTUSSIS	Until five (5) days after appropriate antibiotic treatment begins.



PINWORMS	Until 24 hours after treatment has been started.
PNEUMOCOCCAL INFECTION	No exclusion is necessary.
PNEUMONIA	Until fever is gone and the child is well enough to participate in routine activities.
RESPIRATORY INFECTION (VIRAL)	Until fever is gone and the child is well enough to participate in routine activities.
RESPIRATORY SYNCYTIAL VIRUS (RSV) INFECTION	Until fever is gone and the child is well enough to participate in routine activities.
RINGWORM	Until 24 hours after treatment has been started.
ROSEOLA	Provided that other rash illnesses, especially measles, have been ruled out, the child may return when the fever is gone.
ROTAVIRAL INFECTION	Until diarrhea has stopped.
RUBELLA (GERMAN MEASLES)	Until seven (7) days after rash appears.
SALMONELLOSIS	Until diarrhea has stopped.
SCABIES	Until 24 hours after treatment begins.
SHIGELLOSIS	Until 24 hours after treatment with antibiotics has been started and diarrhea has stopped.
SHINGLES (ZOSTER)	None, if blisters can be covered by clothing or bandages. If blisters cannot be covered, people should be excluded until the blisters have crusted.
STAPH SKIN INFECTION	While draining sores are present.
STREPTOCOCCAL INFECTION (SORE THROAT, SCARLET FEVER, PERIANAL CELLULITIS)	Until 24 hours after antibiotic treatment begins and until the child is without fever.
TUBERCULOSIS	Consult with the local or state health department.
VANCOMYCIN-RESISTANT ENTEROCOCCI (VRE) COLONIZATION AND INFECTION	No exclusion is necessary.

VIRAL GASTROENTERITIS	Until diarrhea and vomiting have stopped.
VIRAL MENINGITIS	None, unless the child has a fever, diarrhea, or is unable to participate in routine activities.
WARTS	No exclusion is necessary.
YEAST INFECTION	No exclusion is necessary.

### **Medication Administration and Storage**

#### 1. Prescription Medication

No prescription medication will be given without written authorization from the child's physician or dentist. Medication can be given only as prescribed. We can only use prescription medication that has your child's name and current prescription information (name of doctor, prescription number, name of medication, date dispensed, and instructions for use) on the label. This includes vials for nebulizers. Please bring all medication in the original box with a legible label. These directions must be followed as prescribed. If there is an expiration date on the label, the medication will not be given beyond this date. Parents must write medical instructions on the Prescription Medication Authorization/Administrative Form and sign it before a teacher can administer ANY medication.

2. Nonprescription Medication We follow manufacturer's directions on all medications, unless differentiating instructions are accompanied by a doctor's authorization. This means that Tylenol (and the like) need to be accompanied by a doctor's authorization for children under two years of age. Parents must write medicinal instructions on the Non-Prescription Medication Authorization/Administration Form and sign it before a teacher can administer ANY medication.

3. Physician's Notes Prescriptions and doctor's notes are only good for two weeks and for each separate instance of needing the prescribed medication. If your child needs to be on medication longer than two weeks, we will need a new doctor's note or an Individualized Child Care Plan (see the following).

4. Individualized Child Care Plans (ICCP) If your child needs to be on a long-term health care plan (i.e. severe allergies; asthma; special needs), we will need the doctor to complete an ICCP form. These forms need to be updated every year, or sooner if your child's prescription changes. An individualized care plan will be coordinated with either the service plan, education plan, and/or with the physician, psychiatrist, or psychologist. The parents must be involved and approve all aspects of the planning. In order for an Open Arms staff member to be involved in an IEP (Individualized Education Program) or IFSP (Individual Family Service Plan), the parents MUST request their presence.

If your child should swallow or eat anything that is poisonous while at the Center, the Poison Control Center will be notified immediately. The Center would then follow all directions that Poison Control would give. Syrup of Ipecac is not given at the Center. Medication is stored in the following ways: 1. Non-refrigerated medications are stored in a sealed bucket, which is located the toddler and preschool classrooms in secure cabinets. Infant medications are stored in individual cubbies. 2. Refrigerated medications are placed in a labeled Ziploc baggie and stored in the sealed bucket in the refrigerator.

### **Sudden Unexpected Infant Death**

Sudden Unexpected Infant Death is defined as the sudden and unexplained death of an otherwise healthy infant less than one (1) year of age. In 1999, the Consumer Product Safety Commission, the American Academy of Pediatrics, and the National Institute of Child Health and Human Development, revised their recommendations on how to put children less than twelve (12) months of age to sleep. Their recommendation is for children of this age to sleep on their backs with no soft toys, bumper pads, or blankets in their crib. To provide the best possible care for your child, Open Arms recognizes the importance of placing children on their backs to sleep. While your child is enrolled here, they will be placed on their backs to sleep. Your child may still use a blanket, but it has to be large enough to allow the blanket to be tucked under your child's mattress to prevent the blanket from moving to your child's face, and must only be of one-ply thickness. If you choose to, a sleep sack may be used in place of a blanket. A sleep sack allows you to place the child in the sack before going to sleep in place of a blanket. We also will not allow any soft material (stuffed animals, bumper pads, etc.) in your child's crib. If your child has a medical reason to not sleep on their back, a doctor's order stating the condition and recommendation must be obtained and placed in your child's file

### **Public Health Nurse**

Once a month, our public health nurse from Health Consultants for Child Care visits the Center and talks with the Director and classroom teachers. She observes program practices and reviews and makes recommendations about the program's practices and written health policies to ensure health promotion and prevention of infection and injury. If you have a concern about your child's nutritional, developmental, or physical needs, please contact your child's teacher, who will then contact the nurse for you.

### **Substitute Teachers and Volunteers**

Every effort is made to staff the Center with our full and part time employees; however, in extreme situations, it may be necessary to enlist the help of a substitute teaching service to fulfill our teacher to child ratios. If such an occurrence arises, the Director (or staff person in charge) will call an area substitute staffing service (i.e. Teaching Temps; Teachers on Call) and request a substitute for a certain day and time.

The following are a few of the parameters for substitutes that parents are to be aware of:

- A substitute will never be left alone to care for a group of children; they will only assist an Open Arms employee in the care of the children.
- In certain cases, it will not be possible to alert parents that a substitute will be working with a group of children. Parents are to be proactive and introduce themselves to anyone present in the classroom that they do not know.
- All substitutes have cleared a background check and are trained in CPR and First Aid.

From time to time there will be volunteers at the Center. According to DHS guidelines, volunteers who have direct contact with or access to children must be supervised at all times by a staff person that meets the qualifications for director, teacher, or assistant teacher. Volunteers are given a background check and are never left alone with children, but do not have to be CPR and First Aid trained.

## **Nap and Rest Policy**

### **Infants**

Infants will nap according to their sleep patterns and behavior. A record of naps will be provided to parents on a daily basis. Each child will be provided with a separate crib, which meets and crib sheet, which is laundered weekly or as needed. Teaching staff supervise the infants by sight and sound at all times, and sleep checks are conducted every ten minutes. Please see the SUID Policy for more information.

### **Toddlers and Preschoolers**

As an alternative to noisy and involved activities, naps are an important part of the daily program. Naps in the Preschool and Toddler Rooms are after lunch, and can last from one to two hours, depending on how long each group sleeps on a particular day. We request that each child lie on their cot, read softly, or just enjoy the quiet. We have found that most children need the rest and will easily fall asleep within one half-hour. If your child does not fall asleep after half an hour, they will be allowed to get up and do quiet activities or play in the large motor area.

Please make sure that your child has a blanket for naptime. These blankets are to be brought home to be laundered once a week.

While no child likes a break from play, we ask that you help your child understand that naptime is a quiet time. Please help us by referring to it as rest time. This may help your child adjust to the transition from play.

### **Outdoor Play**

Outdoor play is part of the program throughout the entire year on a daily basis. Children should come prepared for such activities during all seasons of the year. All children in attendance are considered well enough to participate in outdoor activities.

Part of the summer program is water play. Parents should supply their child with a swimsuit and a towel daily for this activity. For sanitation reasons, we request that towels and swimsuits be brought home daily.

If the weather, air quality, or other environmental concerns do not allow us to enjoy outdoor play, we will provide similar activities inside in our large muscle room. The large muscle room is supervised at the same level as outdoor equipment and care is taken to ensure the safety of such equipment. Specific details concerning outdoor activities during the various seasons will be communicated through the newsletter or posted in your child's room.

We provide a bottle of sunscreen with an SPF of 15 or higher, for all of the children to use during the months of April through October.

When you pick up your child for the day while we are playing outside, please make sure that you notify a teacher that your child is leaving for the day.

A good way to help your child with self-help skills is to allow them to put on their own shoes, coats, snow pants, boots, hats and mittens. Gentle encouragement from you will help your child learn to do these tasks by themselves.

## **Touch and Nurturing**

Physical touching is an important part of the care and nurturing of young children. Children feel loved, accepted, and supported through the sensations of touch by nurturing adults and peers. However, physical touch should be respectful of children's body cues and only occur with their permission.

Staff members are trained to be sensitive to children's requests for physical interaction and responses. They model appropriate nurturing touches. Except for safety or cleansing, children will always have the right to refuse touch. Children are also taught to respect adults' and other children's touch preferences.

Nurturing touch is necessary for every child's emotional growth. Affectionate nurturing includes: hugging, holding on lap, rocking, carrying, rubbing or patting backs, cuddling, and hand holding. Children always have the right to refuse these touches except for safety purposes.

Personal care touch includes diapering, cleaning, dressing, feeding, and naptime routines, and is done in a gentle and respectful manner. It will also include face and hand washing, assisting with toileting, examining rashes and unusual marks, nose wiping, assisting with necessary clothing changes, and first aid treatment. Genital areas are gently touched for purposes of cleansing and only when age appropriate.

First aid is administered by appropriately trained staff as gently as possible and always accompanied by verbal explanation and appropriate comfort.

Physical intervention occurs when necessary for the safety of children and staff, or to provide the least restrictive guidance necessary in a given situation.

Children are taught through modeling and verbal guidance to use words rather than physical interaction to settle their differences with others.

## **Mandated Reporting**

### **Who should report child abuse and neglect?**

Any person may voluntarily report abuse or neglect.

If you work with children in a licensed facility, you are legally required or mandated to report and cannot shift the responsibility of reporting to your supervisor or to anyone else at your licensed facility. If you know or have reason to believe a child is being or has been neglected or physically or sexually abused within the preceding three years you must immediately (within 24 hours) make a report to an outside agency.

### **Where to report:**

If you know or suspect that a child is in immediate danger, call 911.

All reports concerning suspected abuse or neglect of children occurring in a licensed facility should be made to the Department of Human Services, Licensing Division's Maltreatment Intake line at 651-297-4123.

Reports regarding 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 952-563-4873 or local law enforcement at 952-563-4900.

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 651-296-3971.

### **What to Report:**

Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556).

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

An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays.

## **Emergency Procedures**

### **Procedure Concerning Injured Children**

All staff at the Center are trained in Pediatric First Aid (including management of a blocked airway) and CPR every two years. If your child receives a minor cut or abrasion while at the Center, their teacher will wash the area with soap and water, apply ice, and provide a band-aid. Any further treatment of the wound must be done at home. If your child's teacher feels that the wound requires medical attention, you will be notified. Every accident is recorded on an Accident Report Form and one copy is given to families to take home. The original copy is kept in your child's permanent file.

### **Accidents**

If a serious accident occurs and the child requires immediate medical attention, an attempt will be made to reach the parents or the emergency contacts of the child. If none can be reached, the paramedics will be called and the child will be taken to Fairview Ridges Emergency Room in Burnsville. A teacher will accompany and stay with the child until a parent arrives. Staff are not authorized to transport children.

### **Inclement Weather/Emergency Closings**

In the event of inclement weather Open Arms will close when Bloomington Public Schools close. Local radio and television stations will broadcast such announcements. In the event a situation unique to Open Arms occurs (loss of heat/water/power) the staff will make every attempt to contact families.

(Note: No tuition credit is given for care missed due to center closing for the above stated reasons).

### **Storms**

In the event of a weather emergency such as a tornado or severe storm warning, the staff will follow the evacuation procedures listed below:

Infants - Infants will be placed into reinforced Emergency Cribs, four (4) infants per crib, and will be wheeled into the main hallway.

Toddlers and Preschoolers – All children will be escorted into the main hallway, where they will be seated against the walls and instructed to place their heads into their laps.

All children will remain in the shelter area until the Director or teacher in charge gives the all-clear signal. This signal will be determined by weather instructions given by radio station WCCO 830 AM or by the signal ceasing. A weather radio and main first aid bag will be brought into the emergency shelter. The children are familiar with this procedure, as unannounced tornado drills are practiced once a month from April to October.

### **Fire**

In the event of a fire at the Center or in the Church, the staff will follow the evacuation procedures as listed below:

Infants – Infants will be placed into reinforced cribs, four (4) per crib, taken out the fire exit, and proceed to the middle of the parking lot. There are three (3) reinforced cribs in the infant room.

Toddlers – All children will be escorted out the appropriate exit door and into the middle of the parking lot. There is a reinforced crib in the penguin – toddler 1 room to aid in the evacuation of the children.

Preschool – All children will be escorted out the appropriate exit door and into the middle of the parking lot.

### **Safety Checks**

We regularly check recall notices for toys and our cribs to ensure the safety of the children. All broken or dangerous toys are thrown away immediately.

## **Legal Statements**

### **Insurance Declaration**

Open Arms is included in the comprehensive liability policy carried by Holy Emmanuel Lutheran Church. Children are covered against personal and automobile accidents and injury while at the Center or on a Center-sponsored field trip through this insurance policy. The insurance coverage is in effect during the time children are signed-in at the Center.

### **Statement of Non-Discrimination**

Holy Emmanuel Lutheran Church, in operating a Child Care Center, does not discriminate against anyone due to race, religion, or gender. In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. (Not all prohibited bases apply to all programs.) To file a complaint of discrimination, write USDA, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call 800.795.3272 (voice) or 202.720.6382 (TTY). USDA is an equal opportunity provider and employer.

### **Changes in Policies or Procedures**

Licensure by the Department of Human Services sometimes requires that current policies and practices be changed at times other than January 1st of each year. Existing policies and fees are subject to change. These changes will be communicated through the monthly newsletter, emails and mailings.

**OPEN ARMS CHRISTIAN EARLY CHILDHOOD CENTER  
CHILDCARE FEE SCHEDULE**

**HOURS: 6:30 a.m. - 6:00 p.m.**

**\*All amounts are weekly fees**

<b>2016 Standard Weekly Rates</b>					
<b>Classroom</b>	<b>Ratio</b>	<b>5 Day</b>	<b>4 Day</b>	<b>3 Day</b>	<b>2 Day</b>
Turtles & Penguins	1:4	\$305.00	\$274.50	\$228.75	\$183.00
Alligators & Koalas	1:7	\$265.00	\$238.50	\$198.75	\$159.00
Monkeys, Tigers & Giraffes	1:10	\$240.00	\$216.00	\$180.00	\$144.00

<b>2016 Member Weekly Rates</b>					
<b>Classroom</b>	<b>Ratio</b>	<b>5 Day</b>	<b>4 Day</b>	<b>3 Day</b>	<b>2 Day</b>
Turtles & Penguins	1:4	\$260.00	\$238.50	\$201.75	\$165.00
Alligators & Koalas	1:7	\$220.00	\$202.50	\$171.75	\$141.00
Monkeys, Tigers & Giraffes	1:10	\$195.00	\$180.00	\$153.00	\$126.00

**TUITION** includes Breakfast, Lunch and Afternoon Snack.

Part-time children that need additional days may attend at the above daily rate, as long as space allows.

**ADDITIONAL FEE INFORMATION:**

\$60 Non-refundable Registration Fee per child (paid at enrollment).

\$30 Returned Check Fee.

Late Child Pick-up Fee (per child): \$15 will be charged if the child(ren) are picked up between 6:01 and 6:15 pm then \$2 per minute there after (payable at pick-up).

**AVAILABLE TUITION DISCOUNTS:**

- Members of Holy Emmanuel Lutheran Church are charged the member weekly rates.
- A minimum of 2 Sundays Church Attendance per month is required.

**PAST DUE TUITION:**

In the event where your tuition is past due by two weeks, your contract with Open Arms will be terminated. If there are extenuating circumstances, please see the director immediately.