

Young-uns Preschool & Childcare Center, Inc.

Parent Handbook – revised 2/10/25

Introduction

Welcome to Young-uns Preschool & Child Care Center. Today begins what we hope to be a positive and lasting relationship between your family and the staff at the Center. This handbook gives you an overview of our policies and procedures. Please keep this guide for future reference.

History

Young-uns on Kaufmann opened on March 31, 1997 as a fully licensed center through the Department of Human Services and had a capacity of 43 children. Young-uns on West 32nd Street opened on January 3, 2000 and had the capacity for 56 children. Our new location at 3375 Kennedy Circle opened on May 14, 2007. This location was a consolidation of the other two locations and has allowed for some expansion. Young-uns has consulted with top centers in Iowa to help design an innovative, child friendly and safe environment. Young-uns on Kennedy Circle is licensed for 181 children. In September of 2015 Young-uns opened a new classroom to accommodate a preschool and before and after school children. In April of 2016, 2 more preschool classrooms were opened to make room in the original building to expand our infant program. In the fall of 2016 a fourth preschool classroom was added making our new licensed capacity at 237 children. In January 2025 Young-uns opened 6 more classrooms, a multi-purpose room and another outdoor area. This new state of the art space which is on the same campus has allowed for 117 more children. The new licensed capacity is 354 children.

Philosophy

Young-uns Preschool & Child Care Center will provide developmentally appropriate childcare for infants through school-age children. Its main goal is to ensure a nurturing, relaxed and safe environment that fosters independence, self-esteem and meets the needs of the whole child. Each classroom is designed and equipped to meet the needs of the children it serves.

Young-uns promotes a child's socialization skills through play with peers and through interaction with warm, caring adults.

Licensing Information

We are licensed by the state of Iowa through the Department of Human Services for 237 children. A copy of the Iowa Department of Human Services Licensing Standards for child care centers and preschools is available at www.dhs.iowa.gov.

Young-uns participates in the Iowa Quality Rating System and IQ4K, voluntary programs which recognize child care facilities who work to continually raise the quality of the care they are providing. Quality initiatives have been put in place to go above and beyond the minimum requirements and make continuous improvements

Both directors have Bachelor degrees in Education and carry their National Administrators Certification (NAC). Also, both hold certificates in all areas of the Quality Rating Scale (QRS). They include ITERS, ECERS, and SACERS. We have been trained in IQPPS, have taken numerous continuing education classes and attend monthly director meetings. For more information on QRS, IQ4K or Environmental Rating Scales go to www.dhs.state.ia.us/iqrs/index.html or Child Care Resource and Referral's website.

Child/Staff Ratios

Ages 0-2:	1 caregiver to 4 children
Age 2:	1 caregiver to 7 children
Age 3:	1 caregiver to 10 children
Age 4:	1 caregiver to 12 children
Ages 5-12:	1 caregiver to 15 children

Children 18 months and older may be mixed with varied age groups. In this case, the child/staff ratio will meet the youngest child's ratio.

Days and Hours

Young-uns is open 6:30am – 5:30pm. Monday - Friday. We serve children 6 weeks to 11 years of age.

Young-uns Child Care Center will be closed on the following days: The closed dates will be posted on the current rate sheet for the year and will always include:

- New Year's Day
- Memorial Day
- Fourth of July
- Labor Day
- Thanksgiving and the Friday following
- Christmas Eve
- Christmas Day

*** Young-uns reserves the right to close the center due to low census on a particular day. A survey will be conducted and appropriate notice will be given to the families.

Admission / Orientation Policy

Enrollment at Young-uns Pre-school and Childcare Center shall be granted without regard to a child's race, color, creed, religion, national origin, or gender; and without regard to a parent's or guardian's race, color, creed, religion, age, national origin, gender, pregnancy or disability.

Children with disabilities will be evaluated on an individual basis. Young-uns strives to meet the needs of all children and will make reasonable accommodations under the Americans with Disabilities Act, if requested. Limitation of accommodations may exist for children whose needs require extreme facility modifications or specialized staffing beyond the capability of the facility's resources.

A director or other designated person will give a prospective family a tour showing the classrooms, facilities, and outdoor space and introducing staff members. During the tour the items discussed will be philosophy, cancellation policy, vacation & sick policy, rates, ratios, parent accessibility, snacks and meals, drop off and pick up procedures, discipline policies, illness policies, hours and days of operation, and other policies needed. The family will be offered the parent handbook via email which covers all of our policies. The updated handbook also gets emailed to everyone in January every year.

If there are needs that are to be met such as language barriers, reading assistance, or other information, the staff will do their best to provide assistance as needed. If a family needs support or help with translation due to a language barrier, we will utilize Google Translate. If there are other accommodations needed, we will utilize any resources available or will contact our AEA for assistance.

To enroll a child the following must be completed before attending:

- 1) Contract / Child Information Form*
- 2) Physical*
- 3) Iowa Immunization Certificate**
- 4) Guarantee of Hours Form
- 5) Birth Certificate (for 4 year old preschool)
- 6) Deposit
- 7) Tuition Express/voided check form

* These forms must be updated annually.

** Immunization cards must be updated after each doctor visit if vaccines were given at that visit.

After all the forms have been thoroughly completed and the director has accepted the child, a deposit of \$100.00 will be collected as well as the first week's tuition. The one-time deposit for each family enrolled will be applied to the final payment during the last week that a child attends. A two-week notice must be given in order to receive your deposit back. Deposits are only given back as a credit for child care. There will be no cash refunds.

Payment Options

All families are required to pay by automatic bank withdrawal. Receipts will be given when requested. They can be printed and given to you or sent through email. End of year statements will be printed on or before January 30th for the previous year.

If your child is in the preschool program and not needing extended care, you will pay a monthly tuition fee on or before the 1st of the month. If your child is only enrolled in the free 4 year old program, no payment will be collected monthly.

Tuition is to be paid on the first day that your child attends for that week. There is a \$30 fee for returned checks.

Timely payments are essential for continued enrollment at Young-uns. Non-payment of tuition is grounds for dismissal from the program. If payment is not submitted on time, it is the parent's responsibility to contact the director immediately for consultation. If tuition payment is consistently late, we reserve the right to require cash payment for the child to remain in the program.

Rate Sheets

Available upon request.

Waiting List

The Employees of Young-uns Child Care Center have first priority for vacant spots. Parents with children already in attendance at the center will have second priority for vacant spots. New enrollees will be accepted at any time and will be placed on the waiting list until there is an opening. A letter will be sent out periodically to update the current waiting list. If the letter is not sent back with the current information, the child will be taken off the list.

Check In/Out / Cancellations

Upon entering and departing the center, all families must check their child/children in and out using the ProCare Time Clock utilizing fingerprints or an individualized code. This helps the staff keep track of who is in the building. Upon registration, parents or caregivers use fingerprints or punch in an 8-digit code and the door will be released for entry into the building. ProCare provides an attendance record that includes the time children are dropped off and picked up and who drops off and picks up.

If a child is sick or not coming, parents are responsible to call, email or fax the center so the employee schedule can be adjusted accordingly and appropriate ratios can be maintained. No refund will be given for sick days or days your child is scheduled and does not attend.

If a parent or caregiver doesn't contact us within an hour of their scheduled time, we will call, email or message the parent using the Viber or ProCare app.

All visitors will get checked in via a state ID or equivalent. Those persons will sign in and out on the log sheet outside the office including the reason for the visit, date, time of arrival and departure and contact information.

Parental Access Policy/Confidentiality

Parents have the right to unlimited access to their child while being cared for at Young-uns, unless otherwise taken away through a court order. If one parent does not have custody right of the child and is not allowed to see him/her, the custodial parent must provide court ordered documentation to Young-uns. Young-uns staff will not discuss other children with you.

Owners, Directors, staff members and volunteers who have had a background check and approval to be involved with child care shall have full access to that child. Any person who does not fall into that category shall not have unrestricted access to children for whom that person is not the parent, guardian or custodian and cannot be counted in the staff to child ratio. Persons who do not have unrestricted access must be supervised by a paid staff member at all times and will not be allowed to assume any child care responsibilities.

Center staff will approach anyone who is on the property of the center without their knowledge to ask what their purpose is. If staff is unsure about the reason, they will contact the director or other management staff to get approval for the person to be on site. Non-agency persons who are on the property for other reasons such as maintenance, repairs, etc. will be monitored by paid staff and will not be allowed to interact with the children on the premises.

A person who has been convicted of a sex offense against a minor who is required to register with the Iowa sex offender registry:

- a. shall not operate, manage, be employed by, or act as a contractor or volunteer at the center
- b. shall not be on the property of the child care center without the written permission of the center director, except for the time reasonably necessary to transport the offender's own minor child or ward to and from the center.
 - The director is not obligated to give written permission and must consult DHS consultant first
 - If written permission is granted it shall include the conditions under which the sex offender may be present, including:
 - The precise location in the center where the sex offender may be present
 - The reason for the sex offender's presence at the facility
 - The duration of the sex offender's presence
 - Description of how the center staff will supervise the sex offender to ensure that the sex offender is not left alone with a child
 - The written permission shall be signed and dated by the director and sex offender and kept on file for review by the center licensing consultant.

Arrival/Departure/Parking

Parents are responsible for coming into the center to drop off or pick up their child/children. When picking your child/children up, we encourage parent/caretaker interaction. Staff will also assess each child for early detection of an apparent illness, communicable disease or unusual condition or behavior which may adversely affect the child or group. Please discuss your child's day with the childcare provider(s).

If you are not able to pick up your child/children at the scheduled time, please call and notify the staff. If someone else is picking up your child, the designated person must be on the authorized pick-up list and must provide a photo ID upon pick up.

Young-uns provides curbside, hand-to-hand drop-off and pick-up for Preschool children. If your child does not attend extended care at Young-uns, our preschool staff meet parents or guardians in the lobby to either pick up or drop off the child.

When parking out front please try not to block anyone in. Please try to pull up as far as possible. This will help with the traffic in the morning and afternoon. The lower parking lot is available for families if the circle is filled up or if you need extra time for drop off and pick up. Do not park in the center lane.

Volunteers/Students In Practice

Parents/grandparents are welcome to observe at any time and are encouraged to help out with special activities. Please feel free to talk to the director if you wish to help with any event or share a special hobby with the children. All visitors must log in and out on the log sheet outside the office including a reason for the visit and contact information.

Occasionally there will be students from the Dubuque area colleges fulfilling required hours of training. These students may be working with your children on reading, art activities, and fundamental skills.

Guarantee of Hours

In order to schedule caregivers and keep costs associated with over staffing to a minimum, all hours are due by 12:00 noon on Tuesday prior to the week that your child will be attending Young-uns Child Care Center. All children 2 years of age and older will be charged a minimum of 20 hours per week. All children ages 0-2 will be charged a minimum of 40 hours per week. Your options for turning in your guarantee of hours are:

- phone 563-584-0845
- fax 563-584-9285
- e-mail yuschedules@gmail.com

If you fail to do this by the designated time, a \$5.00 fee will be added to your invoice. If you have a fixed schedule, provide us with a schedule for our records and indicate that it doesn't change unless otherwise notified.

Parent/Guardian -Center Communication

Good communication between parents, caregivers and children is the key to creating successful experiences for the children. Parents should feel free to contact the teachers or directors about their child(ren)'s progress or other situations or concerns.

Weekly invoices and timely information are sent on Friday mornings. Monthly newsletters are e-mailed or made available to inform parents about field trips, special events, and birthdays. If there is any change in policy, that information will be posted on the front door or white board. Please stay informed by reading the door and board daily.

Staff

All staff at Young-uns Child Care Center have:

- a state and national background check and Fingerprint
- basic First Aid and CPR
- universal precautions
- have earned a minimum of 6 hours of professional development per year
- are child abuse/mandatory reporters

In addition, many have completed additional hours relating to early childhood. Under the Child Protective Services Act, mandatory reporters are required to report any suspicion of abuse or neglect to the appropriate authorities. Under this law, all staff of Young-un are considered mandatory reporters. The staff is not required to discuss their suspicions with parents prior to reporting the matter to the appropriate authorities, nor are they required to investigate the cause of any suspicious marks, behavior, or condition prior to making a report. Under the Act, mandatory reporters can be held criminally responsible if they fail to report suspected abuse or neglect. The Child Protective Services Act is designed to protect the welfare and best interest of all children.

As mandatory reporters, the staff of Young-uns cannot be held liable for reports made to Child Protective Services which are determined to be unfounded, provided the report was made in "good faith." Iowa law states that child care personnel may take, at public expense, photographs of injured area. Any person participating in the making of or in the investigation of a report shall have immunity from any liability, civil or criminal, which might otherwise be imposed.

Causes for reporting suspected child abuse or neglect include, but are not limited to:

- Unusual bruising, marks, or cuts on the child's body
- Severe verbal reprimands
- Improper clothing relating to size, cleanliness, season
- Dropping off or picking up a child while under the influence of illegal drugs or alcohol
- Leaving a child unattended for any amount of time
- Failure to attend to the special needs of a disabled child

-Children who exhibit behavior consistent with an abusive situation

Staff meetings are held to update staff of any policy changes or to address any issue brought up by staff, parents or directors.

Supervision Policy

All staff are required to actively supervise children at all times while the children are in their care. Active supervision requires focused attention and intentional observation of children at all times.

Staff Training

Staff are trained through orientation and on-going professional development including

Passport to EC

Essentials trainings set up by the state

Annual renewal of policies

Some strategies utilized by staff to make sure all children supervised well are:

Basic Care Routines & Indoor Play

- The environment is organized so children can be seen and heard at all times
- Staff actively and directly supervise children by sight and hearing at all times even while sleeping
- Staff scan and account for all of the children in their care and know where they are and what they are doing at all times
- Staff carefully plan where to position themselves so they can hear and see all children and paths are cleared so they can react quickly when necessary and circulate the area
- Staff will focus on the positive rather than the negative to teach a child what is safe
- Staff will establish clear and simple safety rules and the safe way to use equipment

During Transitions

- Watching, counting, recounting, listening and comparing the schedule to children's faces each and every time the group transitions from one area to another
- Staff scan and account for all of the children in their care and know where they are and what they are doing at all times
- If there is more than one staff in an area, they will separate to focus on different areas
- Staff will try to anticipate behavior and make adjustments as needed to help
- Staff try to allow children to solve problems on their own and when they are unable, staff engages and redirects children depending on individual needs

On the Playground

- Staff will be fully aware of the children's schedule and who they are responsible for as noted on the daily schedules
- Count each child and use name to face recognition by visually identifying each child
 - All photos are on the ProCare Engagement App if there is any question about what a child looks like
 - Family photos are also requested in order to utilize facial recognition
- Watching, counting, recounting, listening and comparing the schedule to children's faces each and every time the group
- Extra staff are hired for anytime children leave the premises for a field trip or activity
- If there is more than one staff in an area, they will separate to focus on different areas
- Staff will try to anticipate behavior and make adjustments as needed to help
- Staff try to allow children to solve problems on their own and when they are unable, staff engages and redirects children depending on individual needs
- Staff will establish clear and simple safety rules and the safe way to use equipment

Field Trips & Time away from the Center

- Staff will be given a list of the children in their group who they are responsible for
- Staff will count each child and use name to face recognition by visually identifying each child
 - All photos are on the ProCare Engagement App if there is any question about what a child looks like
 - Family photos are also requested in order to utilize facial recognition
- Watching, counting, recounting, listening and comparing the schedule to children's faces each and every time the group
- Extra staff are hired for anytime children leave the premises for a field trip or activity
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- Staff will establish clear and simple safety rules and the safe way to use equipment

Around Bodies of Water

Young-uns utilizes sensory tables and sprinklers for extra experiences. Staff must remain within arms-length to the water activity and maintain close supervision.

- Children under 4 years will not be taken to a pool or near any body of water
- Children 4 years and older attend a public pool a life guard must be on duty
- Lesser staff to child ratios are maintained while at a public pool with a ratio of 1:4 for children 4 - 5 years of age and 1:6 for school-aged children
- All staff are responsible for a small group of children with 1 person in charge
- Staffing for children 4 & 5 year olds will remain within arms-length providing touch supervision

Curriculum for Children

1. Young-uns is a theme-based center. A director will give all lead teachers the monthly themes on which to base lesson plans.
2. All children (18 months and older) will have circle time appropriate to his/her age. Circle time covers songs, stories, shapes, colors, numbers, calendar, etc. which expose the children to these milestones. Our main focus is to cover these materials, and introduce them to the children.
3. The children will go outside 2 times per day, weather permitting. We will follow weather guidelines set up by the national weather service. Children will need to bring appropriate clothing all year long to play outside. This includes snow pants, boots, hats, mittens, etc.
4. We offer a balance of active and quiet activities, individual and group activities and staff initiated and child-initiated activities.
5. Our preschool program is guided by Creative Curriculum. We utilize these curriculums:
 - **Teaching Strategies Gold (assessment tool)**
 - **Read It Again!**
 - **Second Step**
 - **Building Blocks Math**
 - **Heggerty Phonics**
 - **Growing Up Wild Science**

There are 3 assessments each year with 2 scheduled conferences to discuss the growth and development of each individual child.

6. Each lead teacher in the classroom will screen children upon enrollment into their classroom. We will update each screening tool each September based on their current age. If a child enrolls mid year, he/she will be screened within 60 days and then annually. If additional evaluation is needed, we will reach out to Keystone AEA or another agency to help with intervention strategies.

Toys/Things from Home

Toys from home are not allowed unless it is a special occasion. Young-uns accepts no responsibility for lost or damaged items. Please mark/label all clothing and belongings.

Clothing

Please dress your children in play clothes. Weather permitting, outdoor activities will be planned year-round. Young-uns is not responsible for ripped or dirty clothes. You may want to bring an extra set of play clothes to be kept in your child's cubby. During winter months please send your children in hats, mittens, snow pants and boots; mark these items with your child's name. Make sure that your child has appropriate shoes to wear both inside and outside. This will help keep our center clean and dry.

Summer Program

During the summer, children will go on educational and fun-filled field trips. Some of the places that are planned include bowling, skating, the library, the movie theater, the fire station and swimming at Flora Pool is on the regular weekly schedule. Once a week, the children 4 and older will walk to Kennedy playground. Parents will be notified of other special events (Grandparents' Day, special parties, etc.). School kids must attend at least 20 hours a week and may use 2 weeks of vacation throughout the summer if the children attend and parents sign a 52 week contract. Summer schedules are sent out to families in May or before the beginning of the summer.

Discharge Policy

Our goal is to eliminate or severely limit expulsion, suspension, punitive or other exclusionary discipline. The goal is to work with families regarding different situations before discharging a child. If we cannot come to a conclusion or solution our policy is:

Your child will be discharged from the center if:

1. Young-uns cannot meet the needs of your child. If the child continually shows signs of distress or constantly requires one-on-one attention and would thrive better in a smaller setting.
 - Children's needs are determined by:
 - In-take form
 - Staff and expert assessments
 - Conferences
 - Communication with parents/caregivers through in person and written communication
 - Annual physicals
 2. Your child is a threat to other children, staff, or self. This includes but is not limited to biting, hitting, scratching, attacking in any way and using foul language.
 3. there has been failure to meet the center's rules and regulations. This includes updating information sheets, yearly physicals and immunization records.
 4. There has been one week of non-payment or three returned checks.
- *Payment must be made on the first day of the week.

Documentation and communication utilized:

- Incident and accident reports will be filled out, given to parents for signature
- A meeting with the director with one or both parents to discuss the situation.
- Professional experts may be brought in for consultation
- A behavior intervention plan (BIP) may be set up
- Supports in place to help staff
- Give staff behavioral suggestions
- Help with putting preventions in place

- Communicate with family members about the process
- Utilize the Staff Leadership Team
- Local Specialists (CCR&R, Keystone AEA, Unified Therapy, Lion's Club, VNA, DCSD)

If child is expelled

- Young-uns will offer the phone number of CCR&R (1-855-244-5301) to get extra support
 - o the director will ultimately decide on the best result for the particular incident.
 - o the child will be either discharged or placed on probation. If placed on probation, the parent, child, and director will meet after 30 days to see if the problem has been corrected. If not, the child will be removed from the center.
 - o If the child is discharged, the deposit is forfeited.

Discipline Policy

- State Law and our policies absolutely prohibit the use of corporal punishment and or physical discipline is prohibited at all time
- Time out is not a developmentally appropriate behavior guidance
- Young-uns uses PBIS (Positive Behavior Interventions and Supports). In utilizing PBIS, some of the developmentally appropriate guidance utilized is:
 - o Redirection
 - o Positive reinforcement
 - o Catch a child "being good"
 - o Cue cards and use of visuals
 - o Individualized social stories
 - o Environmental set up
 - o Staff support positive relationships by utilizing:
 - o Red and green choices
 - o Calm down corners or areas designated as such
 - o Problem solving teaching and coping skills
 - o Expressing feelings, asking "are you ok"
 - o Saying I'm sorry
 - o Self regulation
 - o Utilizing center-wide expectations

Policies and procedures are created, maintained, supported and communicated to parents and staff by:

- Parent / staff handbooks
- ProCare App
- Newsletters (weekly and monthly)
- Staff Meetings utilized as trainings
- Changes are emailed or posted in the lobby

Teachers/staff are trained on positive behavior and guidance and implemented by:

- o -Orientation for new staff
- o -Continuing education courses taken throughout the year
- o - Specific staff meetings for new trainings / program wide implementations
- o - Lead teachers are encouraged to take the training on PBIS
- o At least one staff member has taken TPITOS & TPOTS & Practiced Based Coaching to help coach other staff members and offer supports

- o PBIS policies and procedures will be reviewed at least once a year

If we have challenging behaviors or situations, we will get help from:

- PBIS behavioral coach
- Leadership team or Directors
- Keystone or other professionals

Major Behavioral Situations

Crisis: A time of intense difficulty, trouble or danger such as: when a child is severely injuring themselves, another child or staff member.

- Separate child from peers
- Visuals
- Redirection
- Calm down corner

If you call the office/crisis team: staff will try to redirect and calm down the child in the classroom before removal

- Behavior continues: child will be removed

Minor Situations for De-escalation or Defiance

- Independent Unprompted OR group instruction
- Give individual instruction verbally
- Show cue cards of what was is being asked
- Will the child allow you to do the task hand-and-hand?
 - o Yes-do it with them and move along
 - o No, give wait time & keep other child's routine moving along
 - o Do they need the calm down corner or something else to help them?

These are suggestions and not a one-time fix.

Before you pick up the phone and call for help think about these:

Are they harming themselves or others?

Are they putting themselves or others in danger/harm's way?

Elopement-CALL or YELL immediately

Can this be solved in the classroom?

- If an incident occurs, the staff who is most involved will write up an incident report. This report will be shared with and signed by the parents on the day of the event. The parent is welcome to a copy but the original will be kept in the child's file.
- Staff will work with parents if the behavior is recurring.
- A director, staff member or PBIS team member will write up a plan of action / contract to go over with the family and child if appropriate.
- The staff and a director or PBIS team member will schedule a meeting to discuss the child's behaviors.
- A BIRs (Behavior Incident Report System) will be filled out to collect and analyze data if the behavior qualifies. These include physical aggression, non-compliance, repetitive behaviors, disruption/tantrums or social withdrawal or isolation.

This policy is shared with parents during tours, open houses, and on our website.

Biting Policy

Biting is a common developmental behavior for children in the infant through the 2 year old classrooms. Parents/guardians with children in these classrooms should expect that their children may bite or be bitten by another child. The staff understands that parents are concerned and can be upset when their child is involved in a biting incident. We ask that you remember this is a developmentally normal behavior, and that the staff will try to identify situations which provoke or elicit this behavior so it can be prevented in the future. The staff will not punish or harshly discipline children in the younger

classrooms for biting behavior. They will redirect the children to different activities in separate areas of the classroom. Parents/guardians are expected to work with staff to identify methods and strategies to reduce this behavior.

If a child has bitten another child, the biter will be removed from the situation immediately. For the child who was bitten, the area will be cleaned with warm, soapy water. Ice will be applied to the affected area and TLC will be given. A bandage will be used if necessary.

Children 3 and over may occasionally be involved in a biting incident. For children in this age group who bite, the staff will use appropriate discipline procedures, as well as observe the child to determine what provokes or elicits this behavior. Parents/guardians are expected to cooperate with staff to help their child reduce this behavior.

Parents/guardians will be notified by incident/accident report that a biting incident occurred. The staff may not discuss with either parent the identity of the other child involved in the incident. This information is considered to be confidential and cannot be disclosed. If biting is a continuous behavior, staff will log each incident to try to determine a pattern so the behavior can be modified. If skin is broken due to a bite, we will follow the Blood Exposure Plan.

Meals / Food / Breast Milk / Formula / Baby Food

All meals served at Young-uns meet the nutritional guidelines and meet each child's daily dietary requirements set by the Department of Human Services. See a rate sheet for the current cost of meals.

A.M. snack is served at 8:45

Lunch is served at 11:45

P.M. snack is served at 2:30

Children coming after the scheduled time should be fed before arriving. If parents would like to bring a snack or a birthday treat, please notify the staff to find out how many children will be in attendance for that day. Parents are allowed to bring food from home as long as all nutritional guidelines are followed. If your child has a special diet, you will need to bring your own snacks and lunches. We want to ensure the safety of your child, and feel it is best for you to provide his/her meals. Our food sources come from many sources including but not limited to Aldi, Performance Foods, Wal-mart and Sam's Club. With all of the supply chain issues we are not able to be consistent with our orders and therefore need to substitute foods often. We have asked our providers for specific ingredients lists, and they are extremely inconsistent. This causes us to feel uncomfortable with all of the individual needs of each child.

If your child still drinks the milk we provide, we can change your weekly bill to an only milk charge. We will remove the lunch charge from his/her billing. It is required that you provide all of the food groups (Protein, fruit, grain and vegetable) Please make sure not to include treats, candy, etc. IF you have any questions, please contact our lead cook.

Reminder - we are a peanut/tree nut safe facility!

Nursing mothers are welcome to bring labeled breast milk. Refrigerators are available in all rooms. All formula and baby food must also be provided by parents. Infant and toddler staff are trained on storage and handling of breast milk, formula and baby food. Parents are responsible to make sure there are enough supplies for their child. Staff will try to write notes as supplies run low. Breastfeeding mothers are welcome to come during the day. A private feeding room is available.

Safe Sleep Policy

- Infants up to twelve months of age should be placed for sleep in a supine position (wholly on their back) for every nap or sleep time unless the infant's primary care physician has completed a signed and dated waiver with an expiration date indicating that the child requires an alternate sleep position. Infants who can roll from back to stomach and from stomach to back can be allowed to remain in the sleep position they assume after first being placed to sleep on their back.

- Infants should be placed for sleep in safe sleep environments; which includes: a firm crib mattress covered by a tight-fitting sheet in a safety-approved crib (the crib meets the standards and guidelines reviewed/approved by the U.S. Consumer Product Safety Commission [CPSC] and ASTM (American Society for Testing and Materials) International. No other items should be in a crib occupied by an infant except for a pacifier.
- Owlets have been provided for the Chick Room and the Koala Room. They monitor heart rate and oxygen level. In the Chick Room, the Owlet will be placed on a child's foot upon arrival and will remain on the child until departure. In the Koala Room, the Owlet will be placed on the child during nap. Our staff will monitor the Owlets through an app. Parents will be notified if there are concerning levels.
- Infants will not nap or sleep in a car safety seat, bean bag chair, bouncy seat, infant seat, swing, jumping chair, playpen or play yard, highchair, chair, futon, or any other type of furniture/equipment that is not a safety-approved crib (that is in compliance with the CPSC and ASTM safety standards) (4);
- If an infant arrives at the facility asleep in a car safety seat, the parent/guardian or caregiver/teacher will immediately remove the sleeping infant from this seat and place the child in the supine position in a safe sleep environment (i.e., the infant's assigned crib)
- If an infant falls asleep in any place that is not a safe sleep environment, staff will immediately move the infant and place them in the supine position in their crib
- Only one infant will be placed in each crib. Every crib will be labeled with the child's name on it and ability to roll or not to roll. Every crib will also have the manufacturing certificate under the mattress. The owner's manual is kept in the office.
- Staff will do a visual check of children a minimum of every 5 minutes while sleeping
- Soft or loose bedding will be kept away from sleeping infants and out of safe sleep environments. These include, but are not limited to: bumper pads, pillows, quilts, comforters, sleep positioning devices, sheepskins, blankets, flat sheets, cloth diapers, bibs, etc. Also, blankets/items will not be hung on the sides of cribs. Swaddling infants is not allowed, but rather one-piece sleepers should be used (see Standard 3.1.4.2 for more detail information on swaddling)
- Toys, including mobiles and other types of play equipment that are designed to be attached to any part of the crib will be kept away from sleeping infants and out of safe sleep environments
- When caregivers/teachers place infants in their crib for sleep, they will check to ensure that the temperature in the room is comfortable for a lightly clothed adult, check the infants to ensure that they are comfortably clothed (not overheated or sweaty), and that bibs, necklaces, and garments with ties or hoods are not allowed and have been removed and sent home if a child comes in with these items.
- Clothing sacks or other clothing designed for sleep can be used in lieu of blankets.
- Infants will be directly observed by sight and sound at all times, including when they are going to sleep, are sleeping, or are in the process of waking up. The lighting in the room must allow the caregiver/teacher to see each infant's face, to view the color of the infant's skin, and to check on the infant's breathing and placement of the pacifier (if used).
 - Pacifiers are only used with parent permission and will not be attached to anything
- Bedding is changed between children. Cribs are disinfected weekly with an appropriate solution. Soiled cribs will be disinfected immediately. Crib sheet will be laundered a minimum of weekly or with any change in occupancy.

A caregiver/teacher trained in safe sleep practices and approved to care for infants should be present in each room at all times where there is an infant. This caregiver/teacher should remain alert and should actively supervise sleeping infants in an ongoing manner. Also, the caregiver/teacher should check to ensure that the infant's head remains uncovered and re-adjust clothing as needed.

Parents, caregivers and staff are notified of the safe sleep policy through tours, lead teachers and handbooks.

Transporting Children

- The vehicles will be licensed according to state law.
- The vehicles will be insured for the type of transport being provided.
- The vehicle will be equipped with a first aid kit and emergency information for all children being transported.
- Staff driving children in a bus owned by Young-uns will have a special chauffeur's license designed for that purpose.

- All children will be placed in certified seatbelts.
- Car seats are not required and will not be used.
- All children traveling with Young-uns will be required to have a release form signed by a parent/guardian.

Health and Safety Standards for the Children

1. Each child must have an annual physical exam or a statement of health condition, and his/her up-to-date immunization card on file at the center.
2. It is up to the parents to keep track of physicals and immunization records and keep all health information current and documented at Young-uns. If the parent fails to do so, Young-uns will give a notification.
3. Each child, including infants, is required to have on file their child(ren)'s dental and medical health care provider and provide written consent for Young-uns to obtain emergency care.109.10(2)
4. Good health and nutritional habits are encouraged by washing hands before meals and snacks, after toileting or diapering, coming in from outside, upon entering a room, and after wiping a nose or coming in contact with any bodily fluid. This is required for all staff and children.
5. Children or staff showing signs of illness, should not be at the center. Staff will make every effort to keep the center as clean and germ free as possible. Any child whose temperature exceeds 101 degrees, has two or more loose stools, or vomits will be sent home. If there is a communicable disease going around the center, it will be written on the white board outside the child's room.109.10 / 1.046
6. Every day, a trained staff member should conduct a health check of each child. This health check should be conducted as soon as possible after the child enters the child care facility and whenever a change in the child's behavior or appearance is noted while that child is in care. The health check should address:
 - a. Reported or observed illness or injury affecting the child or family members since the last date of attendance;
 - b. Reported or observed changes in behavior of the child (such as lethargy or irritability) or in the appearance (e.g., sad) of the child from the previous day at home or the previous day's attendance at child care;
 - c. Skin rashes, impetigo, itching or scratching of the skin, itching or scratching of the scalp, or the presence of one or more live crawling lice;
 - d. A temperature check if the child appears ill (a daily screening temperature check is not recommended);
 - e. Other signs or symptoms of illness and injury (such as drainage from eyes, vomiting, diarrhea, cuts/lacerations, pain, or feeling ill). 3.1.1.1 / .109.1(4)
7. If a child becomes ill at the center, a director will notify the parent/legal guardian immediately by phone or e-mail; arrangements will be made for someone to pick him/her up as soon as possible. The child will be removed from the programming area and from direct contact with other children, if possible. The child will be placed in a secluded area with a staff or director.109.10(6) / 3.084/ 3.085 / 3.087 / 3.088 / 8.011(e)
8. If a child is ill at home, a parent is responsible to call the center to make us aware of the illness. The director will make the lead teacher aware of the illness. The teacher will post the illness and the director will log it in the ProCare document. We will use Iowa Department of Public Health as a resource. 8.011(e) / 3.084
9. Please keep directors informed of any changes in a child's health status and/or eating habits (i.e., a child who develops an allergy to a particular food).
10. Recording incidents: Parents shall be notified on the day of the incident involving a child that includes:
 - Minor injuries.
 - Minor changes in health status.
 - Minor behavioral concerns.
 - Incidents resulting in injury to a child.
 Parents shall be verbally notified immediately when there is:
 - A serious injury to a child.
 - An incident resulting in significant change in health status.
 - An incident includes child being involved in inappropriate, sexually acting out behavior. A WRITTEN report, fully documenting every incident, shall be provided to the parent or authorized person. This should be completed by staff that witnessed the incident and retained in child file. Serious injuries and deaths must be reported to the Department within 24 hours.109.(10) / 8.022
11. A 1st aid kit is on-hand for minor scrapes, cuts and burns. It includes band-aids, gauze, tape, scissors, nail clippers, latex-free gloves, tweezers, thermometer, and sunscreen. 1st aid kits are located in the office and smaller ones in individual rooms.

12. Disposal of body excrement or discharge, including blood and breast milk will be placed in a separate plastic bag, and disposed of in a bio-hazard labeled waste container located in the office. 109.10 (5)
13. Diaper changing procedures are placed above all changing tables. We practice good hand washing for the child and adult after every change. There is a paper towel placed under the child when changing his/her diaper, and the table is disinfected after each use. All soiled diapers are separately placed in a plastic bag, wrapped and then disposed of in the diaper can. To disinfect, the surface will be sprayed until glossy. The solution will be left on for at least 1 minute before it is wiped off with a clean paper towel, or it may be allowed to air dry. Appendix D.109.10(5)
14. Individual paper towels are used after every hand-washing for drying the children's hands.
15. Young-uns is a smoke-free environment. There is no smoking allowed in the building or on any part of Young-uns property.
16. Cribs and cots shall be disinfected weekly with an appropriate solution. Soiled cribs and cots shall be disinfected immediately.
17. Crib sheets and cot sheets shall be laundered a minimum of once a week or with each change in occupancy.
18. All soiled diapers will be double bagged and placed in a separate diaper container.
19. The staff shall check expiration dates for milk, infant formula, and baby food. Any expired items shall be properly disposed of. Breast milk soiled items will be treated as bodily excrement and double bagged and placed in a separate container or sent home with parents.
20. Individual towels, cups, and toilet articles shall be used.
21. The staff shall replace towels, soap refills, gloves, tissues, plastic bags, toilet paper, and first aid items when necessary.
22. The contents of spray bottles will be indicated by a marked label.
23. Any blood soiled items will be double bagged and placed in a bio-hazard container for proper disposal.
24. Children will not be allowed to remain at Young-uns if temperature exceeds 101, if diarrhea is present, if the child has vomited, or if the child has a communicable disease and has not been on an antibiotic for at least 24 hours. The director will make the final determination if the child should be asked to leave the center.3.065 / 8.011 (b)

Strangulation Prevention Policy

In order to prevent strangulation, these things have been implemented

- Strings and cords long enough to encircle a child's neck are not accessible
- Items from home with cords are not allowed and parents will be asked to take the items home
- Cordless blinds or no window coverings are currently in all classrooms
- Tension or tie down devices are not needed because there are no blinds with cords in child occupied areas
- Dramatic play items with handles or straps will be removed or shortened
- Ties, scarves, necklaces and boas used by children under 3 will be directly supervised
- Pacifiers will not be used if connected to any attachments
- Parents will be asked to remove hood and neck strings from children's clothing
- Any lanyard utilized by children and staff will be the breakaway type

Tobacco- Free / Nicotine-Free Policy

Young-uns Preschool and Childcare Center facilities and grounds including employee vehicles, Young-uns vehicles which are used to transport children, are off limits for tobacco and nicotine use including but not limited to cigarettes, cigars, chewing tobacco, snuff, pipes, snus, Electronic Smoking Devices (ESD) and nicotine products that are not Food and Drug Administration (FDA) approved for tobacco cessation. This requirement extends to students, employees and visitors. This policy applies at all times, including Young-uns sponsored events. Persons failing to abide by this policy are required to extinguish their smoking material, dispose of the tobacco/nicotine product or leave Young-uns premises immediately. It is the responsibility of the administration or upper management to enforce this policy. Staff are prohibited from wearing clothing that smells of smoke while working.

Playground Equipment and Fall Surfacing Policy

Our staff are trained in playground safety through our orientation process which includes but is not limited to on-line training as well as lead teacher communication. Playground safety is reviewed annually at staff meetings.

- All of our playground equipment and fall surfacing was installed according to the manufacturer's instructions that includes anchoring and by ATSM certified playground specialists.
- All fall surfacing on both playgrounds exceeds minimum recommendations set by the manufacturer. It consists of poured rubber and turf surfaces as well as a riding track on the lower playground for older children. There is no loose materials on any outdoor playground area.
- Monthly logs are kept of the playground inspection forms and filed in the office. If anything needs attention, it is given directly to a director so it can be taken care of.
- If maintenance is needed, we contact the playground specialists at Park Planet at 877-473-7619 to inspect and / or repair the surfacing. If they cannot come immediately, the area would be roped off so children would not play in the area until it was deemed safe.
- Any materials in disrepair are removed immediately and either thrown away or brought to the office to be fixed or removed
- Staff do daily visual inspection and look for any unsafe items including but not limited to:
 - Missing or broken parts
 - Surfacing wear and tear and deterioration
 - Protruding nuts or bolts
 - Rust and chipping or peeling paint
 - Sharp edges, splinters and rough surfaces
 - Stability and handholds
 - Visible cracks
 - Stability of non-anchored large play equipment
 - Broken bottles, discarded cigarettes, stinging insect nests

Reporting Illness to the Health Department 3.088 / 8.011 / 8.022

All communicable diseases shall be reported to the health department / VNA at 556-6200. When a confirmed or suspected case of these diseases, or outbreaks of other communicable diseases occurs, a director will make the report to the health department. If staff have suspicion of a communicable disease they are to contact the director. Here are common illnesses found in group settings that apply to children and staff:

6.011-6.039 (CFOC)

ILLNESS	EXCLUDE	RETURN TO CHILD CARE / SCHOOL
Chicken Pox	Yes	When all blisters are crusted with no oozing (usually 6 days) and resolution of exclusion criteria
COVID-19: K-12	Yes, for 5 days from positive test (if no symptoms) or symptom onset. Those who are unable to wear a mask, choose not to wear a mask, have moderate or severe COVID-19 illness, or are immunocompromised exclude for 10 days.	On day 6 if fever free for 24 hours without the use of fever-reducing medication and if symptoms have improved. Per CDC guidance, should wear a mask from days 6- 10. OR if you have access to antigen tests, you should consider using them. With two sequential negative tests 48 hours apart, you may remove your mask sooner than day 10. On day 11 if fever free for 24 hours without the use of fever-reducing medication and if symptoms have improved.
COVID-19: Child Care If	If >2 years and able to wear a mask correctly and consistently, exclude for 5 days from positive test (if no symptoms) or symptom onset. If < 2 years of age, unable to wear a mask, choose not to wear a mask, have moderate or severe COVID-19 illness, or are immunocompromised exclude for 10 days.	On day 6 if fever free for 24 hours without the use of fever-reducing medication and if symptoms have improved. Per CDC guidance, should wear a mask from days 6- 10. OR if you If you have access to antigen tests, you should consider using them. With two sequential negative tests 48 hours apart, you may remove your mask sooner than day 10. On day 11 if fever free for 24 hours without the use of fever-reducing medication and if
Diarrhea (infectious)	Yes (there are special exclusion rules for E.coli 0157.H7, Shigella and cryptosporidiosis).	When diarrhea stops and health care provider and public health official states the child may return.

Diarrhea (non-infectious)	Yes, if stool cannot be contained in the diaper, or if toileted child has 2 or more loose stools in 24 hours, or blood in stool.	When diarrhea stops and resolution of exclusion criteria.
Fifth Disease	No. Unless child meets other exclusion criteria.	If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.
Hand and Mouth	No. Unless child meets other exclusion criteria. Or is excessively drooling with mouth sores.	If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.
Head Lice (Pediculosis)	No. Unless child meets other exclusion criteria.	Treatment of an active lice infestation may be delayed until the end of the day. Children do not need to miss school or child care due to head lice. Treatment recommendations can be found here: https://www.cdc.gov/parasites/lice/head/treatment.html
Impetigo	Yes, exclude at the end of the day if blisters can be covered.	After child has been seen by the doctor, after 24 hours on antibiotic, and blisters are covered.
Influenza	Yes	When child is fever free for 24 hours and resolution of exclusion criteria.
Molluscum Contagiosum	No. Unless child meets other exclusion criteria.	Skin disease similar to warts. Do not share towels or clothing and use good hand hygiene
MRSA	No. Unless child meets other exclusion criteria.	Wounds should be kept covered and gloves worn during bandage changes. Do not share towels or clothing and use good hand hygiene.
Otitis Media (ear infection)	No. Unless child meets other exclusion criteria.	If excluded due to presence of other exclusion criteria, resolution of exclusion criteria.
Pertussis (Whooping Cough)	Yes.	Child may return after 5 days of antibiotics and resolution of exclusion criteria.
Pink Eye (Conjunctivitis)	No. Unless child meets other exclusion criteria.	Child does not need to be excluded unless health care provider or public health official recommends exclusion. Resolution of all exclusion criteria
Ringworm	No. Unless child meets other exclusion criteria.	Treatment of ringworm infection may be delayed to the end of the day. Child may be readmitted after treatment has begun. Cover lesion(s) if possible. Do not share clothing, bedding or personal items.
Strep Throat	Yes.	When resolution of exclusion criteria and after 24 hours of antibiotic.
Vomiting	Yes.	When vomiting has resolved and resolution of exclusion criteria

Our center will follow Iowa Department of Public Health and local health offices for all other illnesses including and not limited to pertussis, streptococcal, varicella, skin infections (head lice, scabies, ringworm), Infections of the gastrointestinal tract and hepatitis A virus, Haemophiles, Parvovirus (fifth disease) measles, and tuberculosis, etc. 3.085 / 3.087. Young-uns also works with the VNA and childcare nurse consultants to update, transfer and review immunization certificates.

Universal Precautions

All staff, volunteers, and children should follow the procedure in Standard 3.2.2.2 for hand hygiene at the following times:

- On arrival for the day, after breaks, or when moving from one child care group to another
- Before and after preparing food or beverages

- Eating, handling food, or feeding a child
- Giving medication or applying a medical ointment or cream in which a break in the skin (eg, sores, cuts, scrapes) may be encountered
- Playing in water (including swimming) that is used by more than one person
- After Diapering*
- Using the toilet or helping a child use a toilet
- Handling bodily fluid (mucus, blood, vomit) from sneezing, wiping and blowing noses, mouths, or sores
- Handling animals or cleaning up animal waste
- Playing in sand, on wooden play sets, or outdoors
- Cleaning or handling the garbage
- Applying sunscreen and/or insect repellent 109.10(7) See Appendix B

A. Proper hand washing procedure:

1. Wet hands with clean, warm running water and apply soap.
2. Rub hands together to make lather and scrub all surfaces keeping hands out of the running water.
3. Continue rubbing hands for 20 seconds.
4. Clean-Up:
 - a. Disposable gloves will be worn anytime staff or volunteers need to clean up a blood spill, vomit, or a child who has had a diarrhea-like accident.
 - a. Paper towels will be used for clean ups.
 - a. Changing soiled clothes will take place on a disposable surface or a non-porous surface which can be disinfected.
 - a. Diaper changing area is always disinfected after each use.
 - a. Soiled clothes or wet cloth diapers or other clothing will be put in a plastic bag and tied securely. The bag will be labeled with the child's name and sent home with a parent.
 - a. Sharps: The greatest chance for blood exposure comes from skin punctures from contaminated articles.
 - a. Use a broom and dustpan or tongs to pick up sharp objects like needles or broken glass.
 - a. Dispose of sharp items in puncture resistant containers.
 - a. Blood Materials: Gauze, sponges or towels that have been saturated with blood should be placed in leak proof plastic bags and tied off so they cannot be emptied and reused.

B. Employee/Student Health Status: Employees with open lesions or broken skin should keep these areas covered. Children in a childcare program who have open sores should have these covered by a dressing to keep them from being contaminated, from touching others who may have scratches, or accidentally be contaminated from any oozing or bleeding.

1. Food, Drink, and Cosmetics: Eating, drinking, applying cosmetics, or handling contact lenses should not be done in areas where there is a potential for exposure to blood borne pathogens.
2. Personal Protective Equipment:
 - a. All personal protective equipment will be provided to employees.
 - a. This equipment has been chosen based upon anticipated exposure to blood and other potentially infectious materials.
 - a. The equipment provided consists of disposable protective gloves for use when attending to any situation in which exposure to blood, potentially infectious materials, non-intact skin, and mucous membranes may occur.
 - a. Gloves are available and located throughout the center.

Facility Cleaning Routines 109.4(2)b / 109.14(2)a(1)

1. The facility will be maintained in a clean and sanitary condition. When a spill occurs, the area will be made inaccessible to children, while another staff cleans up the spill
2. When surfaces are soiled by body fluids or other potentially infectious material, they will be disinfected after they are cleaned with soap and water to remove all organic material.

3. Surfaces will be disinfected using the approved center disinfectant made fresh daily by a designated person.

4. To disinfect, the surface will be sprayed until glossy. The solution will be left on for at least 1 minute before it is wiped off with a clean paper towel, or it may be allowed to air dry.

5. All toys that are mouthed during the course of the day will be set aside in an inaccessible container before another child plays with the toy. Mouthed toys will be thoroughly washed with soap and water by hand or by washing in a dishwasher. To wash and disinfect hard plastic toys: soak and scrub the toy in warm, soapy water. Use a brush to get the crevices clean. Rinse in clean water, then immerse the toy in a solution of bleach water. 3.036-3.038 / 6.027

6. Thermometers, pacifiers, teething toys, and similar objects shall be cleaned and reusable parts shall be sanitized between uses. Pacifiers shall not be shared. 3.037

7. Cloth toys for children who are still mouthing toys will be limited to use by only one child and cleaned in a washing machine and dried in a clothes dryer every week, or more often if heavily soiled. 3.036

8. Toys used by children who do not put these objects in their mouths will be cleaned at least weekly and when obviously soiled. Soap or detergent and water followed by clear water rinsing and air drying will be used. No disinfecting is required.

9. All common areas such as hallways and common bathrooms will be cleaned every night by a cleaning service. Otherwise, all classrooms are the responsibility of the staff.

Center Cleaning Chart (Caring for our Children)3.028 Appendix K

Programs may need to sanitize, or disinfect surfaces more often during illness outbreaks and should refer to state, local, tribal, or territorial health authorities and child care licensing for more information.

Reducing the risk of infection also involves proper ventilation and air filtration, as some infectious diseases (viruses) are spread through the air and not on surfaces

Regular hand washing is one of the best ways to remove germs and prevent the spread of illness to others

Surface Area	Method			Timing				Comments
	Clean	Sanitize	Disinfect	Before Each Use	After Each Use	Daily (End of Day)	Weekly	
Food Preparation and Meal Service Areas: Use an EPA-registered product that is safe for surfaces that touch food.								
Food preparation surfaces and countertops CFOC 4.9.0.9; 4.9.0.10	X	X		X	X			<ul style="list-style-type: none"> Use a microfiber cloth or disposable paper towels. Do not use sponges.
Eating utensils and dishes CFOC 4.5.0.2; 4.9.0.11; 4.9.0.12; 4.9.0.13	X	X			X			<ul style="list-style-type: none"> Wash, rinse, and sanitize by hand OR Use dishwasher; set on sanitize setting.
Bottle feeding equipment CFOC 4.3.1.10	X	X			X			<ul style="list-style-type: none"> Wash, rinse, and sanitize by hand OR Use dishwasher; set on sanitize setting. Squeeze water through nipple hole to be sure it is clean
Highchair trays CFOC 4.5.0.2; 9.2.3.12	X	X		X	X			<ul style="list-style-type: none"> Also, clean legs and frame when soiled.

Mixed-use tables CFOC 4.9.0.9	X	X		X	X			<ul style="list-style-type: none"> • Also, clean legs and frame when soiled.
Food preparation equipment CFOC 4.9.0.9	X	X			X			<ul style="list-style-type: none"> • Wash, rinse, and sanitize by hand OR • Use dishwasher; set on sanitize setting.
Child Care / Classrooms Areas								
Pacifiers: Used by one child CFOC 3.1.4.3	X			X	X			<ul style="list-style-type: none"> • Sanitize if dirty or used by another child. ✓ Use sanitizer safe for food contact OR ✓ Boil for 1 minute and air-dry OR ✓ Use a dishwasher. • Squeeze water through nipple hole to be sure it is clean
Mouthed toys: Used by one child CFOC 3.3.0.2	X			X	X			<ul style="list-style-type: none"> • Sanitize if used by another child. ✓ Use sanitizer safe for food contact OR ✓ Use dishwasher
Washable cloth toys: Used by one child CFOC 3.3.0.2	X						X	<ul style="list-style-type: none"> • Machine wash and dry completely before use by another child.
Classroom toys CFOC 3.3.0.2; 5.3.1.4; 6.4.2.2	X						X	<ul style="list-style-type: none"> • Follow label directions for cleaning of wooden toys
Play activity centers CFOC 5.3.1.4	X					X		
Counters and shelves CFOC 5.3.1.4	X					X		
Mixed-use tables for activities CFOC 5.3.1.4	X				X			<ul style="list-style-type: none"> • Sanitize if used for food preparation, meals, or tooth-brushing.
Dress-up clothes (washable)	X							<ul style="list-style-type: none"> • Machine wash and dry completely. • Machine wash if soiled with body fluids.
Drinking fountains CFOC 5.2.6.10	X		X			X		<ul style="list-style-type: none"> • Clean frequently throughout the day. • Disinfect at the end of the day.
Water tables and water equipment CFOC 6.2.4.2	X		X		X			<ul style="list-style-type: none"> • Staff/children wash hands before/after use. • Change water, clean, then disinfect water table, and toys before a new group begins water play or at the end of the day. • Children with open cuts or sores should not join in water play. • Do not use it during illness outbreaks.

Animal areas: feeders, fish tanks, or animal cages CFOC 3.4.2.3	X		X					<ul style="list-style-type: none"> Disinfect these areas after cleaning activity is finished.
Floors CFOC 5.3.1.6; 5.6.0.4	X					X		<ul style="list-style-type: none"> Sweep or vacuum, then damp mop. Microfiber mops ✓ Launder after use. Cotton mop heads ✓ Turn upside down to dry. Disinfect if soiled with body fluids.
Carpets: Washable area rugs are a safer choice than wall-to-wall carpeting. CFOC 5.3.1.A27:I344	X						Clean Area Rugs	<ul style="list-style-type: none"> Vacuum daily (with HEPA filter). Steam clean carpets every 3–6 months. ✓ Spot clean if soiled with body fluids.
High-Touch Surfaces: May need to sanitize or disinfect more often during illness outbreaks. Refer to state, local, tribal, or territorial health authorities and child care licensing for more information								
Doorknobs, handles, and light switches	X					X		<ul style="list-style-type: none"> Clean often throughout the day with a microfiber cloth or disposable paper towels.
Shared computer keyboards, phones	X					X		<ul style="list-style-type: none"> Clean often throughout the day. Use silicone keyboard cover.
Sleeping Areas								
Sheets, blankets, and pillowcases: Used by one child CFOC 3.3.0.4; 5.4.5.1	X						X	<ul style="list-style-type: none"> Label and store each child’s sleep items separately from other children. Follow laundry detergent instructions. Wash laundry at warmest temperature setting, and dry completely. If soiled with body fluids, launder with non chlorine bleach (preferred), or bleach and dry completely.
Cribs, cots, and mats: Used by one child CFOC 5.4.5.1	X				X		X	<ul style="list-style-type: none"> Use fitted sheet to cover sleep surface. Clean sleep surface regularly with a microfiber cloth or disposable paper towels. Disinfect surface if soiled with body fluids. Follow manufacturer’s instructions.

Cribs, cots, and mats: Used by more than one child CFOC 5.4.5.1	X				X			<ul style="list-style-type: none"> • Use fitted sheet to cover sleep surface. • Clean sleep surface with a microfiber cloth or disposable paper towels after use by another child • Disinfect surface if soiled with body fluids. • Follow manufacturer’s instructions.
Toilet and Diapering Areas								
Changing tables CFOC 3.2.1.4; 3.2.1.5; 5.4.2.6	X		X		X			<ul style="list-style-type: none"> • Allow the surface to air dry between uses.
Diaper pails CFOC 5.4.1.8	X		X			X		
Toilets CFOC 5.4.1.7; 5.4.1.8	X		X			X		<ul style="list-style-type: none"> • Disinfect after use if soiled.
Sinks and faucets CFOC 5.4.2.2; 5.4.2.3	X		X			X		
Countertops	X		X			X		
Floors CFOC 5.6.0.4	X		X			X		<ul style="list-style-type: none"> • Use separate mops/mop heads for toilet/diapering areas and other areas. • Use microfiber mops with split bucket (cleaning/rinsing system).

Special Health Needs of Children

1. All children regardless of gender, race, and socio-economic class will be treated equally.
2. Parents are expected to inform and update the center of any special needs. Special needs including food allergies need to be documented on a Care Plan.
3. If a child has a special need, Young-uns will try to meet those needs in a regular classroom if there are reasonable accommodations.
4. If staff or directors think there may be need for further assistance with a child, we will contact the parents/caregivers to assist in the process. We will also work with the family physician, Iowa’s child care nurse consultants and utilize other resources as necessary.
5. We will also make a recommendation for a full screening through Keystone AEA.
6. Young-Uns has a partnership with Dubuque Community School District and Keystone to help further the development of your child. During SWVPP preschool instructional times, Young-un Preschool & Child Care Center follows the rules, regulations, and policies outlined in the Dubuque Community School District Preschool Family Handbook. (<https://dbqschools.b-cdn.net/wp-content/uploads/2024/09/dcsd-preschool-family-handbook-2425.pdf>)
7. There may be a fee for one-on-one assistance.

Medications

1. We encourage parents to administer necessary medications at home, but understand that cannot always be accomplished.
2. All medications shall be stored under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security.
3. All medications must be stored in the original container with physician/pharmacist instructions on the intact label.
4. All medications shall be stored in a sealed container in the child’s room (out of reach), in the refrigerator in a separate container with a lid or in the office when necessary.
5. Medications are to be administered and documented by a paid staff members using appropriate measuring devices provided by the parent.

6. Written permission forms must be completed by the parent before any medications are given. If further instructions are needed, the center may request additional information from the child's doctor.

Free Health Services Available

1. The Lions Club comes in each year to assess children's vision. This is a free service and each parent must sign a consent form for their child to be eligible to participate.
2. The VNA will come into the PK program each year to do a dental screening. This is offered free of charge with a signed parental consent.

Emergency Procedures

Pandemic Flu

If there is an outbreak of pandemic flu, which can last six to eight weeks, Young-uns will be closed indefinitely. Families will be contacted by e-mail, a phone call or news media about the re-opening of the center. We will work with the county health department and the VNA for any needed assistance.

Medical & Dental Emergency Policy

1. Our staff will remain calm and reassure the victim and others at the scene.
2. The lead teacher who is with the child and who has had pediatric first aid training will provide first aid.
3. The lead or assistant teacher will use the phone system to call the director and she will activate the Emergency Medical Services system by dialing 911 when immediate medical help is required. She will take charge of the emergency, assess the situation, and give further first aid as needed.
4. The director will then contact a parent or legal guardian, or if the parent or legal guardian cannot be reached, the alternate emergency contact person will be notified and a course of action will be decided.
5. Young-uns will use the hospital that a parent/guardian has listed on the contract form. Emergency transportation will be provided by an ambulance or other vehicle, if necessary. No member of Young-uns staff will drive unless accompanied by another adult.
6. A director or staff member will stay with the child until a parent assumes responsibility.
7. Young-uns staff will fill out an accident report and put it in the child's file. A parent and director will both sign the accident report and a copy will be given to the parent.

Dental Emergencies – Specific Situations

1. If a child has a toothache, the mouth will be rinsed with warm water. A cold compress will be placed on the child's cheek. The parent will be called and encouraged to go to the dentist.
2. If a permanent tooth has fallen out due to an accident it will be rinsed in cool water and placed in milk to preserve it. The parent will be called and encouraged to go to the dentist.
3. If a tooth is broken, the child's mouth will be rinsed with warm water, a cold compress placed on the child's cheek and the parent will be called and encouraged to go to the dentist. If possible, the broken tooth will be saved and given to the parent upon pick up.
4. If a child bites his/her tongue or lip, the area will be cleaned gently with a clean cloth and direct pressure will be applied. If swelling is present, a cold compress will be applied. If bleeding doesn't stop, a parent will be called and encouraged to go to the dentist.
5. If an object is wedged between teeth, floss will be used to clear it out. If it cannot be dislodged, a parent will be contacted and encouraged to go to the dentist.
6. If there is indication of a jaw fracture, a cold compress will be applied to the child's cheek. A parent will be called and encouraged to go to the dentist.

Intruder

Staff members are instructed to immediately contact a director if they see someone in the building they do not recognize. A director will notify another staff of the situation and will then ask the intruder who he/she is looking for or if they can be helped in any way. If the intruder is harmful, either the director or

the other staff member will call 911 to alert emergency personnel. Young-uns will take all precautions to meet the demand of the intruder in order to protect the staff and children. Our facility is a locked facility and requires notification before a person is allowed to enter the building.

Missing Child Policy

To prevent a child from going missing or being overlooked the measures taken include:

- Each classroom is given a weekly classroom schedule to confirm each child's schedule for the week
- Continual communication regarding schedule changes
- An updated daily Google Slide detailing schedule changes
- A biometric check in system utilizing finger prints or an individualized code
- All exterior doors are locked
- Extensive security system to monitor all exterior perimeter and common indoor areas

If a child goes missing:

- Staff call the office immediately or do an all call to get any extra staff in the building
 - The extra staff will search all interior and exterior spaces and sheds outdoors. This includes looking in bathrooms and closets, walking through all classrooms and outdoor areas for 5-10 minutes
 - Move all other children into a safe space
 - The director or person in charge will examine the security cameras
 - If the child is still not found a director or supervisor will:
 - Call 911 and inform them of the situation including location last seen and what the child was wearing and where the child was last seen
 - Call HHS (1-866-448-4605) and inform them of the situation including location last seen and what the child was wearing and where the child was last seen
 - Call the Abuse Hotline (1-800-362-2178) and inform them of the situation including location last seen and what the child was wearing and where the child was last seen
 - Call the parents and share where the child was last seen
 - Complete a full incident report with all the details of the event and will be kept on file and reported and provided to HHS as needed

Intoxicated Parent / Visitor

Indicators

1. glazed eyes
2. scent of alcohol
3. stumbling
4. slurred words

If any indicators are present, staff must contact a director. If the parent leaves with the child, the director will call the police and the Department of Human Services. The center staff will take all necessary precautions to secure the safety of the child.

In the event that the intoxicated person becomes violent, all staff will do whatever necessary to protect the children and themselves, and the police will be contacted.

Fire

Emergency plans for fires are posted by the exit signs and by each door in the individual rooms. Fire drills are practiced monthly, so children are familiar with the procedure and are not frightened. In case of a fire we will evacuate to the lower parking lot of Young-uns. Immobile children will be placed in cribs and wheeled out. The director will take emergency information and a first aid kit, if possible. The director will pull the internal fire alarm to notify all children

and staff. After the evacuation, a director will call 911 and then take a headcount. Parents will be notified by email, phone or by a radio station as soon as the situation is under control and all staff and children are accounted for.

Tornado

Emergency plans for tornadoes are posted by the exit signs and by each door in the individual rooms. Tornado drills are practiced monthly, so children are familiar with the procedure and are not frightened.

If the local tornado warning system goes off or if the warning of a tornado is heard on the radio, all children and staff will be moved to the lower level into the rooms without windows. Immobile children will be carried downstairs by staff members. Once all children are in the area, they will crouch down and protect their heads with their arms. The director will then conduct a head count. The director will access emergency information, a first aid kit, and a flashlight if necessary. The director will keep in contact with up to date weather information as it becomes available. Staff and children will follow directions given by local authorities. Parents will need to follow authorities' requests to ensure the safety of all.

During inclement weather, if the children are on a walk or outside, they need to get to the center as quickly as possible or take shelter in the nearest, lowest place that will provide protection. After the warning signs are off and the storm is over, a director will contact emergency personnel and then the parents. If necessary, the children will be transported by staff members to a safer location.

Earthquakes or Structural Damage

In the event of an earthquake, all children and staff will take cover under the tables in the lower level and will protect their heads and necks with their arms or a heavy book. All immobile children will be carried to the lower level and protected by staff members. If children are outside or on a walk, they are to get to the lower level of the center as soon as possible or seek the nearest shelter. After everybody is safe and secure, the director will take a headcount. If evacuation is necessary due to structural damage, all will move to Giant Laundromat where all children will then be reassured of their safety. The director will take emergency information, diapers, and the first aid kit. The director will then contact parents to immediately pick up their children.

Blizzard

If a blizzard is indicated by emergency personnel, Young-uns will shut down or have an early release and parents will need to pick up their children as soon as possible. The director will contact local news stations to cancel programming or make parents aware of the early release. Young-uns will follow the recommendations made by emergency personnel.

Power Failure/Loss of Utilities

In the event of a power failure, Young-uns has emergency lighting. The director will be in contact with local news reports or the power company to assess the seriousness of the situation. If it is determined that regular programming cannot continue at the center, parents will be notified of the situation by phone. All children will be kept active and safe in the lower level until parents arrive.

Bomb Threats

If there would ever be a threat of a bomb, the police department will be notified immediately. The children and staff would immediately evacuate to Courtesy Coin Laundry and await inspection of the center. If the search does not indicate any danger of a bomb, the staff and children will return to the center, and parents will be called and informed of the incident. If danger exists, all parents will be notified to pick up their children as soon as possible at Giant Laundromat.

Chemical Spill

In the event of a chemical spill, the director will identify the chemical content to assess the imminent danger to staff and children. If there is a release of a hazardous material, the fire department will be notified and appropriate procedures for clean-up will be initiated. If necessary, all staff and children will evacuate to Giant Laundromat.

Flood

Young-uns is not located in a flood plain. In case of water in the lower level, we may need to shift the children to rooms not affected by the water; if the damage is bad enough, we will evacuate to Giant Laundromat and parents will be called. If the water is extremely high and needs to be pumped out, the director will call the fire department. We have an emergency preparedness plan that is practiced, updated and reviewed yearly.

All families are entitled to a copy of this handbook upon enrollment at Young-uns and will be emailed yearly in January.