



**RAMSEY COUNTY FAMILY CHILD CARE  
PROVIDER POLICIES  
(9502.0405, Subp. 3A-P)**

Family & Childrens Services  
Child Care

|                                      |  |      |
|--------------------------------------|--|------|
| Name of Provider<br>Roxanne Williams | Address<br>1558 Westminster St. Paul, MN 55130 | Date |
|--------------------------------------|--|------|

The provider shall have the following written information available for discussion with parents or the agency:

**Ages and numbers of children in care (including the provider's own children): (9502.0405, subp. 3A)**

|  |  |
|--|--|
| <input type="checkbox"/> Infants <u>1</u>  | <input type="checkbox"/> Preschoolers <u>4</u> |
| <input type="checkbox"/> Toddlers <u>2</u> | <input type="checkbox"/> School Age <u>5</u>   |

**The hours and days of operation: (9502.0405, subp. 3B)**

Hours 5:30AM to 5:30AM  
Days Sunday through Sunday

**Meals and snacks to be served: (9502.0405, subp. 3C and 9502.0445, subp. 3 A - D)**

|                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Breakfast  | <input type="checkbox"/> Lunch      | <input type="checkbox"/> Dinner               |
| <input type="checkbox"/> A.M. Snack | <input type="checkbox"/> P.M. Snack | <input checked="" type="checkbox"/> Eve Snack |

**Food, lunches, and bottles brought from home must be labeled with the child's name and refrigerated when necessary. Bottles must be washed after use. (9502.0405, subp. 3D, and 9502.0445, subp. 3D)**

**Sleeping and rest arrangements: (9502.0405, subp. 3E, 9502.0415, subps. 5B, 7, 9, and 9502.0425, subp. 9)**

***\*Infants: must be napped individually in approved cribs or porta- cribs.***

☐ Crib    ☐ Porta-crib    ☐ Approved Crib Safety Inspection Form

Wooden or metal crib slats must be no farther apart than 2-3/8 inches. **Drop-sided mesh portacribs and playpens must not be used for the care or sleeping of newborns or infants.**

***\*Toddlers / Preschoolers:***

☐ Mat    ☐ Crib    ☒ Cot    ☐ Bed    ☐ Sofa    ☐ Sleeping Bag    ☐ Playpen

Bedding: Clean, separate bedding must be provided for each child in care.

**NON-DISCRIMINATION PRACTICES: (9502.0405, subp. 3F and 9502.0405, subp. 6)**

Provider shall not discriminate in relation to admissions on the basis of race, creed, color, national origin, religion, or sex.

**THE CARE OF ILL CHILDREN: (9502.0405, subp. 3G and 9502.0435, subp. 16)**

The provider shall notify the parents immediately when a child in care develops any of the following symptoms:

1. Underarm temperature of 100 degrees Fahrenheit or over, or an oral temperature of 101 degrees Fahrenheit or higher;
2. Vomiting;
3. Diarrhea; or
4. Rash, other than mild diaper or heat-related rash.

#### Additional provider policies on the care of ill children:

Provider is unwilling to accept a child who is: Running fever of 100, vomiting, diarrhea, unusual rash, not able to participate in daily activities, overly whinny/clingy, unusual discharge, etc.

Provider is willing to accept a sick child under the following circumstances: NONE

#### Medical Release Policy:

Following surgery, a significant medical procedure, serious illness or accident, parents must provide a physician's statement that the child is capable of returning to child care. If a child has a chronic condition that may require special care, written instructions from the physician need to be given to the provider.

#### Serious Contagious Illness or Parasitic Infection Reporting:

The provider shall require that a child's parent notify the provider immediately of the diagnosis of a serious contagious illness or parasitic infestation listed below, and the **provider shall report such diagnosis immediately by telephone:**

- Anthrax (*Bacillus anthracis*)
- Botulism (*Clostridium botulinum*)
- Brucellosis (*Brucella* spp.)
- Cholera (*Vibrio cholerae*)
- Diphtheria (*Corynebacterium diphtheriae*)
- Hemolytic uremic syndrome
- Measles (rubeola)
- Meningococcal disease (*Neisseria meningitidis*) (all invasive disease)
- Orthopox virus
- Plague (*Yersinia pestis*)
- Poliomyelitis
- Q fever (*Coxiella burnetii*)
- Rabies (animal and human cases and suspected cases)
- Rubella and congenital rubella syndrome
- Severe acute respiratory syndrome (SARS)
- Smallpox (variola)
- Tularemia (*Francisella tularensis*)

The provider shall require that a child's parents notify the provider within 24 hours of the diagnosis of a serious contagious illness or parasitic infestation listed below, and the **provider shall report such diagnosis within 1 working day:**

|  |   |  |
|--|---|--|
| Amebiasis  | Hepatitis (all primary viral types including A, B, C, D, and E)   | Shigellosis  |
| Anaplasmosis   | Histoplasmosis  | Staphylococcus aureus (only vancomycin-intermediate Staphylococcus aureus (VISA), vancomycin-resistant Staphylococcus aureus (VRSA), and death or critical illness due to community-associated Staphylococcus aureus in a previously healthy individual) |
| Arboviral disease, including, but not limited to, LaCrosse encephalitis, eastern equine encephalitis, western equine encephalitis, St. Louis encephalitis, and West Nile virus disease                       | Human immunodeficiency virus (HIV) infection, including acquired immunodeficiency syndrome (AIDS)                                     | Streptococcal disease (all invasive disease caused by Groups A and B streptococci and <i>S. pneumoniae</i> )   |
| Babesiosis   | Influenza (unusual case incidence, critical illness or laboratory confirmed cases)  | Syphilis   |
| Blastomycosis  | Kawasaki disease  | Tetanus  |
| Campylobacteriosis   | Kingella spp. (invasive only)   | Toxic shock syndrome   |
| Cat scratch disease (infection caused by Bartonella species)   | Legionellosis   | Toxoplasmosis  |
| Chancroid  | Leprosy (Hansen's disease)  | Transmissible spongiform encephalopathy  |
| Chlamydia trachomatis infections   | Leptospirosis   | Trichinosis  |
| Coccidioidomycosis   | Listeriosis   | Tuberculosis ( <i>Mycobacterium tuberculosis</i> complex) (pulmonary or extrapulmonary sites of disease, including laboratory confirmed or clinically diagnosed disease). Latent tuberculosis infection is not reportable                                |
| Cryptosporidiosis  | Lyme disease  |  |
| Cyclosporiasis   | Malaria   | Typhus   |
| Dengue virus infection   | Meningitis (caused by viral agents)   | Varicella zoster disease:  |
| Diphyllobothrium latum infection   | Mumps   | (a) primary (chickenpox): unusual case incidence, critical illness, or laboratory-confirmed cases. and   |
| Ehrlichiosis   | Neonatal sepsis (bacteria isolated from a sterile site, excluding coagulase-negative Staphylococcus) less than seven days after birth | (b) recurrent (shingles): unusual case incidence or critical illness.  |
| Encephalitis (caused by viral agents)  | Pertussis (Whooping Cough)  | Varicella zoster disease in addition to reportable disease under subitem (56), effective upon the commissioner's determination that the disease is reportable under part 4605.7042   |
| Enteric Escherichia coli infection ( <i>E. coli</i> O157:H7, other enterohemorrhagic <i>E. coli</i> , enteropathogenic <i>E. coli</i> , enteroinvasive <i>E. coli</i> , and enterotoxigenic <i>E. coli</i> ) | Psittacosis ( <i>Chlamydia philippsii</i> )   | Vibrio spp   |
| Enterobacter sakazakii in infants under one year of age  | Retrovirus infections   | Yellow fever   |
| Giardiasis   | Reye syndrome   | Yersiniosis, enteric   |
| Gonorrhea ( <i>Neisseria gonorrhoeae</i> infections)   | Rheumatic fever (cases meeting the Jones criteria only)   |  |
| Haemophilus influenzae disease (all invasive disease)  | Rocky Mountain spotted fever  |  |
| Hantavirus infection   | Salmonellosis, including typhoid  |  |

The provider shall inform a parent of each exposed child the same day the provider is notified that a positive diagnosis has been made for any of the illnesses or parasitic infestations listed on page 2. **(9502.0405, subp. 3G and 9502.0435, subp. 16D)**

The provider shall notify the health officer or the Minnesota Department of Health of any suspected case of reportable disease as specified above by calling 651-201-5414. **(9502.0405, sp 3G and 9502.0435, sp16E)**

Immunization records must be kept for each child in care and updated according to the rule, using the forms provided by the County. **(9502.0205, subp. 3G and 9502.0405, subp. 4C)**

The provider shall obtain written permission from the child's parents prior to administering medicine, diapering products, sunscreen lotions, and insect repellents. **(9502.0405, subp. 3G and 9502.0435, subp. 16F / 1)**

The provider shall obtain and follow written instructions from a licensed physician or dentist prior to administering prescription medicine. Medicine with the child's name and current prescription information on the label constitutes instructions. **(9502.0405, subp. 3G and 9502.0435, subp. 16F / 2)**

The provider has made emergency, fire and storm drill plans, and keeps a log of monthly fire and storm drills on file. **(9502.0405, subp. 3H and 9502.0435, subp. 8F)**

#### **TRANSPORTATION PLANS (9502.0405, Subp. 3I, 9502.0435, Subp. 9, AND 245A.18, Sd. 1, 2)**

Each child will be securely fastened in an appropriate passenger restraint system as described in the Child Care Rules.

Written permission to transport children must be obtained from parents.

No child is permitted to remain unattended in any vehicle.

Provider has obtained required child passenger restraint system training as described in the Child Care Rules.

Describe the circumstances under which a child will be transported: Emergencies, run errands, field trips, etc.

#### **INSURANCE COVERAGE (9502.0405, Subp. 3O and 9502.0355, Subp. 4)**

- ☐ The provider has child care liability coverage for bodily injury in the amount of at least \$100,000 per person and \$250,000 per occurrence, or
- ☐ The provider has child care liability insurance less than the amount of \$100,000 per person and / or \$250,000 per occurrence, or
- ☐ The provider carries no child care liability insurance

#### **FEES (9502.0405, Subp. 3J)**

Full time (1 minute or more hours per day constitutes full time)  
\$ \$235 per Week for infants (6 weeks - 16 months)  
\$ \$175 per Week for toddlers (17 months - 33)  
\$ \$155 per Week for preschoolers (2 years - 5 years)  
\$ \$155 per Week for school-agers (5 years - up)

Part- time (less than N/A hours per day)  
\$ N/A per N/A

Overtime Charges: A \$10.00 late fee (per child) will be enforced every 15 minutes past your scheduled pick up time and a \$1.00 fee every minute thereafter. A \$5 late fee will be added to your payment every day past your scheduled due date. Your child(ren) cannot return to daycare until all payments and late fees are paid in full.

### TERMINATION AND NOTICE PROCEDURES (9502.0405, Subp. 3K)

\_\_\_\_\_ 2 weeks \_\_\_\_\_ notice will be given to the parent if the provider plans to discontinue care of a child. The parent will give \_\_\_\_\_ 2 weeks \_\_\_\_\_ paid notice when taking a child out of care.

### HELPERS AND SUBSTITUTES (9502.0405, Subp. 3L, 9502.0315, Subps. 14, 29, and 9502.0365, Subp. 5)

“Helper” means a person at least 13 years of age and less than 18 years of age who **assists** the provider with the care of children. An adult caregiver must always be present to supervise a helper.

“Substitute means an adult at least 18 years of age who assumes the responsibility of the provider. The use of a substitute caregiver must be limited to a cumulative total of not more than 30 days in any 12 month period.

☐ **Provider** will arrange for a substitute for provider’s vacations and holidays.

☒ **Parent** will arrange for a substitute for provider’s vacations and holidays.

**Provider** will make the following arrangements for emergencies: \_\_\_\_\_ I will arrange for an approved emergency back up provider to be present in my absents. \_\_\_\_\_

### SMOKING (9502.0405, Subp. 3P and MN Statutes Section 144.414, Subd. 2)

Under the 1984 Minnesota Clean Indoor Air Act and the 2007 Freedom to Breathe Act, smoking is not allowed in the child care residence during child care hours.

☐ Provider does smoke\* ☒ Provider does not smoke\*

\*During child care hours, the provider must smoke outdoors, and the children must be properly supervised indoors when the provider is outdoors smoking.

Smoking ☐ is ☒ is not permitted in the residence during non-childcare hours.

\*Under the 2007 Freedom to Breathe Act, providers who allow smoking in the childcare residence during non-childcare hours are required to post a notice in a conspicuous location stating that smoking is allowed when no children are in care.

### PETS IN THE RESIDENCE (9502.0405, Subp. 3M and 9502.0435, Subp. 12)

All pets housed within the residence shall be maintained in good health and limited to dogs, cats, fish, guinea pigs, gerbils, rabbits, hamsters, rats, mice and birds.

Rabies shots and tags must be current for all dogs and cats.

☐ There are no pets in the residence.

☒ The following pets are in the residence: small dog in residence not apart of daycare

**A COMPLETE COPY OF THE DEPARTMENT OF HUMAN SERVICES LICENSING OF CHILD CARE FACILITIES, CHAPTER 9502 IS AVAILABLE TO READ (9502.0405, Subp. 2 and 9502.0405, Subp. 3N).**