Chapter 1. Overview

1-1

INTRODUCTION
Welcome to Gundersen Child Care Center. The Center has a licensed capacity for 101 children and provides care for children between the ages of 6 weeks and 12 years. We are pleased that you and your child will be participating in our program.

This booklet is intended to explain our program to you. We hope you will read it and keep it for your reference. All operating policies are included in this handbook and are available at the front desk of the center and in each classroom along with a copy of the State of Wisconsin Licensing Rules for Group Child Care Centers.

We welcome your comments and suggestions and solicit your support and cooperation.

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WHO WE ARE

MISSION
We distinguish ourselves through excellence in care and education to young children, and through ongoing education to families and childcare providers in the communities we serve.

VISION
We will be a Child Care Center of excellence, nationally recognized for improving the quality of care we deliver to our children.

VALUES
Integrity – Perform with honesty, responsibility and transparency.
Excellence – Achieve excellence in all aspects of delivering childcare.
Respect – Treat children, families, and coworkers with dignity.
Innovation – Embrace change and new ideas.
Compassion – Provide compassionate care to children and families.
What We Believe

Our Philosophy of Child and Family Centered Care
At the heart of child and family centered care is the belief that the child, the family, and the child care team are partners. This partnership will enhance the overall child care provided to the child.

Dignity and Respect
We treat children and families with dignity and respect. We respect each family’s values, beliefs, and religious and cultural backgrounds.

Definition of Family
We accept each parent’s right to define their own family. Families include persons related through birth or choice.

Family Strengths
Families know their children best. We will build on their strengths with honor and respect.

Participation
Families can participate in the care and decision-making when their child is in the child care setting. We want them to be involved as valued members of the child care team.

Information Sharing
We listen with care to children and their families. Our goal is to explain all aspects of the care we provide in language they can understand.

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What We Do

The staff of Gundersen Child Care Center recognizes that quality childcare is a vital need. Our services are based on the best available knowledge of child growth and development. Our developmentally appropriate program spans all hours of operation.

A. Because we are a developmental program, we offer the enrolled child varied opportunities to develop physically, socially, emotionally, aesthetically, and intellectually. Although the program always appears very informal and flexible, the curriculum and environment are the result of careful and detailed planning by a team of professionals. We consider the group requirements of the children, but are ever mindful that each child is a distinct individual with unique needs, ideas and interests.

B. Because we know that young children learn best through activity and experimentation with concrete objects, the major emphasis is on learning through play. Large blocks of free, uninterrupted time are made available when each child is free to choose from a wide variety of thoughtfully chosen materials and experiences. Warm and understanding staff is always available to give support. There are opportunities for vigorous activities such as running, jumping, singing, climbing, digging, and building. There are materials for self-expression such as blocks, clay, paints, paper and paste, water, sand, and mud. There are activities and materials available that will enable the child to develop basic foundation skills in the academic areas of language arts, science, social studies, and mathematics. Singing, dancing, puzzles, stories, games, and many more activities are available each day.

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HOURS OF OPERATION

A. Gundersen Child Care Center
700 Bennora Lee Court
La Crosse, WI  54601
(608) 775-4714
Childcarecenter2@gundersenhealth.org

600-1800  Monday – Friday, January – December

PLEASE NOTE: The Center will open when the first scheduled child arrives and will close when the last scheduled child has gone home.

B. Center Closings: The Center will follow Gundersen Clinic’s holiday schedule. (If a parent needs a copy of this schedule, it may be requested from the administrative staff.) The Center may also close when the census is extremely low.

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PARKING

Parking is provided in front of the Center. Patrons are asked to not park in the handicap accessible spaces unless authorized to do so.

PARENTS, PROTECT YOUR CHILDREN. TURN OFF YOUR ENGINE. LOOK BEFORE BACKING UP. PLEASE DRIVE SLOWLY.

ADMINISTRATIVE STRUCTURE

Please feel free to contact the administrative staff of the center with questions or concerns regarding the care of your child. If you need further assistance, please contact the Executive Director of Human Resources, Gundersen Health System.

CHILD ABUSE/NEGLECT REPORTING

All staff at the center are considered mandatory reporters of child abuse or neglect. As such, it is our responsibility to report children who are, or appear to be abused or neglected, to the County Department of Social Services, the Child Protection Agency, or the Police Department.

CONFIDENTIALITY

All matters relating to children and their families are confidential. Information will be handled on a need to know basis.

CHILD ACCOUNTABILITY

It is the responsibility of each teacher to know the children assigned to their care and their whereabouts at all times, including during center-provided transportation.
Chapter 2. Policy

2-1

ELIGIBILITY

A. The Gundersen Child Care Center will accept children regardless of race, color, sex, creed, religion, political persuasion, national origin, or ancestry.
B. The Child Care Center is corporate sponsored for the employees of Gundersen Health System. The public is welcome as space is available.
C. Children six weeks through twelve years are eligible for care. Children must have documented age appropriate immunizations as determined by s. 140.05(16), Stats. and ch. HSS 144.
D. Children with special needs will be accepted upon recommendation of the Center Director, the health consultant or social services advisor; however, resources must be available to enable the child to function successfully within the program.

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WAITING LIST

A. Gundersen parents seeking full-time enrollment for their child/ren will be assigned to a prioritized waiting list when space in a particular age group is unavailable. As space in each home base and the ranges of time and days are identified, the Director/designee will try to match children from the waiting list in the order signed up with priority as shown below:
   1. Gundersen families already having one or more children regularly enrolled in the Center.
   2. A Gundersen family’s inquiry date regarding enrollment at the Center.
B. Families who have been selected will be notified by phone or in writing to confirm their acceptance and to set up a registration meeting.

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REGISTRATION

A. You can obtain an enrollment packet either in person or by phone during business office hours, Monday – Friday, 8:00a.m. – 5:00p.m. Once the paperwork is completed, call for an appointment to meet with center administrative staff. The packet includes the following forms:
   1. Medical examination and immunization forms
   2. Health insurance statement
   3. Enrollment form
   4. Hold harmless agreement
   5. Child Care Information Record
   6. Authorization for Pick-up form
   7. Work schedule/child care schedule

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B. Prior to the admission of an infant or toddler, the teacher will meet with the parent/guardian to obtain written information which will aid the child care staff in individualizing the program of care for each child. Information will include:
   1. Schedule of meals and feedings
   2. Types of food introduced and timetable for new foods
   3. Toilet and diapering procedures
   4. Sleep and nap schedule
   5. Child’s way of communicating and being comforted
   6. Developmental/health history

**Childcare staff and parents will discuss the child’s development, routines and health history with revisions noted in writing every 3 months. This information will be kept in a binder in each classroom that is accessible to all staff assigned to care for the child.**

C. A center orientation/tour will be conducted during the enrollment meeting.

D. Registration forms may be picked up at the Center during normal business hours, Monday - Friday, 0800-1700 or by special arrangement.

E. All children must have a physical examination within thirty (30) days of admission.

F. Children’s records must be updated as needed and at least annually. **It is the parent’s responsibility to keep phone numbers, etc., current on file.**

G. During the registration process, your child/ren will be registered in a particular category, which will be stated on the Parent Contract.
   1. **Full-time Enrollment** is defined as five days, Monday – Friday, 5 – 10 hours daily.
   2. **Drop-In Enrollment** is defined as space available. Requests for drop-in care can be done in several different ways. Parents/guardians can make inquiries by calling during the week for which they are seeking care. Parents/guardians can make requests in writing the week prior to which they are seeking care. Drop-in care will only be considered after the Weekly Master Schedule is printed. Parents/guardians can contact the Center on Friday to see if their request has been approved. All requests will be approved on a space-available basis.

H. Parents will be charged the annual registration fee at the time of enrollment and each January thereafter.

I. A child is considered officially registered/enrolled when:
   1. All forms are completed
   2. Any outstanding tuition from a previous registration has been paid
   3. The annual registration fee is paid
   4. The child has attended the center at least once during the current year.

**The child is considered enrolled for the entire year and will only be taken off the enrollment list at the next annual registration time if the child has not attended.**

J. Confidentiality – All records pertaining to an individual child and their family are confidential and are available to the parent on request.
K. Center policies are included in the Parent Handbook, which is part of the registration packet. Policies and Licensing Rules are located at the front desk and in each classroom. The Center License and any information regarding licensing violations are posted in the Center front hallway by the payment and schedule boxes.

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DAILY ADMISSION AND RELEASE

A. Admission
   1. Teachers will sign in each child upon arrival in the classroom. Parents are responsible for providing any special instructions in writing, and these instructions must be discussed with the teacher in charge of your child’s classroom. If parents are at a different contact phone number for the day, please notify staff in writing.
   2. Parents must accompany their child/ren to the classroom. Please do not drop them at the front door. If you have more than one child, please make sure that you accompany each child to his/her classroom. Younger children will need to be assisted in removing and storing outer clothing. Diaper bags must be labeled and placed in the appropriate area. Alert the teacher that your child has arrived, as an adult-directed activity may be in progress. Teachers are responsible for knowing the number, names, and location of children in attendance at all times.
   3. If you are keeping your child home for the day or are running more than 15 minutes late, call the center. If we do not hear from you, we will be calling to verify your child’s attendance.
   4. Ensure your child’s clothing is clearly labeled and that an extra full set of seasonally appropriate clothing is available regardless of your child’s age. The daily schedule often includes messy activities such as painting and water play.

B. Release
   1. Teachers are required to sign each child out of the Center.
   2. Parents must inform the teacher when each child departs. Children may not be picked up at the door.
   3. Unless prior written arrangements have been made with the center, only parents or legal guardians may take a child from the center program.
   4. If you ask an individual on your designated pick-up list or any other person or agency to be responsible for checking your child out of the Center, you must give prior written permission, and ensure that all policies regarding admission and release are followed. All persons not known to the staff will be required to show a valid and legal photo I.D.
   5. A child will not be denied release to a natural parent unless a copy of the custody agreement or court restraining order that relinquishes such
rights is on file in the Center. We will follow the restraining order unless otherwise notified.

2-5

LATE RELEASE PROCEDURES

A. In the event that a child remains in the center past the close of business, the following procedures will be followed:
   1. Call the parents of the child at close of business. Staff will attempt every 10 minutes for up to 30 minutes.
   2. Call all emergency notification designees. If they are willing to pick-up the child, said child will be released to the emergency designee.
   3. In the event that after 30 minutes contact cannot be made with parents or emergency contacts, the Director/designee will contact the County Department of Social Services, the Child Protection Agency, or the Police Department.

B. An overtime penalty fee of $5 will be charged for every quarter hour or portion thereof beyond the child’s scheduled time.

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OVERTIME FEE

Per 2-5, B. above, an overtime fee will be administered if a child remains in care beyond his/her scheduled number of hours for the day, which includes being dropped off before the scheduled arrival time or being picked up after the scheduled departure time. Deliberate falsification of arrival and departure times will be grounds for termination of enrollment.

2-7

SPECIAL CIRCUMSTANCES

We understand there are special circumstances that may arise. Please see the Center Director regarding your special circumstance.

2-8

PAYMENTS

A. All Parents/guardians are charged bi-weekly for services rendered during the 14-day period, which is defined from Monday at 6 a.m. through Friday at 6 p.m., and are consistent with Gundersen’s non-exempt pay periods. Charges are made in accordance with the Tuition and Fees schedule.

B. Bills will be posted one week after the end of the billing period. Statements will be mailed or sent by email according to parent preference and noted on the Child Enrollment Form.
C. Tuition payments will be due by the following Monday. Gundersen Child Care Center reserves the right to assess a late payment fee, see current Tuition and Fees schedule, for any payments made after the due date.

D. Enrollment may be terminated for families that carry an outstanding debt for longer than one (1) month. The outstanding account will be forwarded for collection.

E. WI Shares Payment information issued from the State of WI will be applied to the appropriate accounts: **Max Weekly or Gross Amount** to the appropriate child and **Young Star Amount** to the Child Care Center.

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TERMINATION OF ENROLLMENT

A. Termination of Enrollment: The contract may be terminated for no cause by either party. Termination forms are available to all parents at the front desk. The center reserves the right to terminate the enrollment of a child without notice to the parent or guardian if the center feels in its sole discretion that the retention of the child may prove to be detrimental to any or all involved. Other reasons for termination can be, but are not limited to: a direct non-compliance of center policies/rules, or licensing rules, non-payment of fees, violation of the contract, failure to complete required forms, abusive language, sexual harassment, or intimidation of staff.

B. Withdrawal and Re-Enroll: Parents may withdraw their child in accordance with the termination paragraph and re-enroll as long as they have left in good standing, their previous bill has been paid in full, and space is available.

Chapter 3. Scheduling

3-1

SCHEDULING FOR CARE

Scheduling is essential to Center operations. The scheduling week starts on Monday and ends Friday. Only a specific number of children can be accepted in each room due to safety, staffing, fire, and building regulations.

Administrative staff is available to help you with your scheduling needs during business office hours, Monday – Friday, 8:00a.m. – 5:00p.m.

During the registration process, the Director or designee will help you choose the type of enrollment that best meets your scheduling needs. Categories include:

1. **Full-time Enrollment** – defined as five days, Monday – Friday, 5 – 10 hours daily.

2. **Drop-in Enrollment** – defined as space available. Requests for drop-in care can be done in several different ways. Parents/guardians can make inquiries by calling during the week for which they are seeking care. Parents/guardians can make requests in writing the week prior to

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which they are seeking care. Drop-in care will only be considered after the Weekly Master Schedule is printed. Parents/guardians must contact the Center on Friday to see if their request has been approved. All requests will be approved on a space-available basis.

3-2

SCHEDULING ADJUSTMENTS

Parents/guardians are responsible for payment of all hours scheduled. If you have a family emergency, please see the Director.

3-3

SCHEDULING OF STAFF

The Center always maintains required staff to child ratios, IAW DCF 251, Licensing Rules for Group Child Care Centers. When 8 or fewer children are present in the center, there is a second adult available within 5 minutes for emergencies.

Chapter 4. Health Care

4-1

HEALTH REQUIREMENTS

A. All children must have on file a completed child health assessment.
   1. Each child under 2 years of age shall have an initial health examination not more than 6 months prior to nor later than 3 months after being admitted to the center, and a follow-up health examination at least once every 6 months after admission.
   2. Except for a school-age child, each child 2 years of age and older shall have an initial health examination not more than one year prior to nor later than 3 months after being admitted to the center, and a follow-up health examination at least once every 2 years after admission.
   3. The health examination report shall be on a form provided by the department and shall be signed and dated by a physician, physician assistant, nurse practitioner, or Health Check provider.
   4. Failure to provide the required health assessment will result in termination of enrollment.

B. Immunizations and immunization records must be current. Verification of immunizations must be presented (i.e., shot record card) to the center for recording on the child’s enrollment record. This information must be updated on a routine basis as children receive their immunizations. Failure to provide the required immunization information will result in termination of enrollment.

C. Observation:
1. Each child, upon arrival, is observed by a staff person for symptoms of illness. If such symptoms exist, the staff person will speak to the parent/guardian immediately. If it is determined by the Center staff that the child is not in good health, the parent/guardian may not leave the child at the Center.

2. Staff members will observe children throughout the day for any evidence of unusual bruises, contusion, and lacerations, etc. If such injuries are observed, they will be reported immediately to the Director. The Director will take appropriate steps, as required by law, in reporting injuries. Any such action or observation is recorded in the medication and injury logbook.

3. Any allergies are to be reported by the parent/guardian to the Director. Information regarding intake or exposure limitations of the child will be recorded in the child’s file and all staff will be notified.

D. Ill Child procedure:

1. Staff will closely monitor children who appear to be ill or show visible signs of fever.

2. The child will be isolated as best as possible from the other children. After the child has been made comfortable, the child’s parent/guardian, or designated person (when the parent cannot be reached) is contacted. Arrangements are then made to remove the child from the Center when necessary.

3. All attempts will be made to keep the child calm and comfortable until someone arrives to pick them up.

4. Children will be sent home when presenting with these symptoms or meeting these criteria:

   a. The child is unable to participate in activities.
      i. Child shows significant behavior changes and is unable to follow normal routine.
      ii. If administrative staff comes to observe the child, the child’s behavior should be significantly altered that they would agree that the child is unable to participate.
      Examples: Child is on the floor, not participating for a substantial period of time. Child is constantly crying in a manner inconsistent with his/her normal behavior

   b. Illness results in care that is greater than staff can provide without compromising health and safety of other children.
      i. Child needs excessive one-on-one care, preventing staff from being able to provide routine care for rest of children.
      ii. Child is requiring potty visits/diapering at such excess that care for other children is compromised.

   c. Child represents a significant risk of spreading a communicable disease.
i. Most of the disease specific criteria would require a doctor’s diagnosis. Please refer to the chart on the back of the ill child form for diagnosed illnesses.

ii. For most of these symptoms, it is likely that the child would also meet the exclusion criteria listed above.

iii. For symptoms that we can observe, please refer to the Infection Control Policy (GL-9030) on the Child Care Center’s website for additional information.

5. This procedure is followed for all children who have a sore throat, inflammation of the eyes, fever (100.4°F or above), diarrhea, nausea, lice, rash or any other condition that indicates illness. An illness form documenting specific symptoms shall be written by a staff member to be given to the parent upon pick up of the child (copy kept on file).

6. In the case of an injury or life threatening illness, the emergency medical system will be activated and the parent notified immediately. The child will be transported to the nearest medical facility, which is Gundersen Health System unless otherwise instructed by the parent. Staff will complete the appropriate paperwork; Accident/Incident Report, and record the information in the Center Medical Log which is located in the classroom. The Center Director will be notified as soon as possible. Procedures for reporting to the State; DCF 251.04(3) (a), will be implemented.

E. Communicable Disease:

1. A communicable disease chart, listing common symptoms, is posted at the Center and on the Child Care Center’s website.

2. The County Health Department will be notified if a staff member suspects that a child has a communicable disease or condition such as, but not limited to: chicken pox, myelitis, lice, ringworm, scarlet fever, whooping cough, diphtheria, or meningitis.

3. Parents/guardians are asked to have the child’s condition diagnosed by a physician before returning to the Center.

4. When a diagnosis of a communicable disease is made, the parent/guardian will contact the Center.

5. A sign is posted letting other parents/guardians of exposed children know the date of the exposure, symptoms to watch for, and the incubation period of the disease.

6. A child may be readmitted to the Center without a statement from a physician only after they have been absent for the longest usual incubation period for the disease as designated by the health department. Please refer to the Infection Control Policy (GL-9030) on the Child Care Center’s website for additional information.

F. Children must be well enough to participate in usual classroom activity, including spending time outdoors, to be in the center.
SUDDEN INFANT DEATH SYNDROME (SIDS) RISK REDUCTION METHODS

A. Infants under 12 months of age shall be placed on their backs on a firm tight-fitting mattress for sleep in a crib.
B. Waterbeds, sofas, soft mattresses, pillows, and other soft surfaces shall be prohibited as infant sleeping surfaces.
C. All pillows, blankets, quilts, comforters, sheepskins, stuffed toys, and other soft products shall be removed from the crib.
D. Parents are encouraged to provide a “sleep sack” for their infant to use. A light-weight blanket may also be used. The blanket must be large enough to tuck tightly under the sides of the crib mattress.
E. The infant’s head shall remain uncovered during sleep.
F. Unless the child has a note from a physician specifying otherwise, infants shall be placed in a supine (back) position for sleeping to lower the risk of Sudden Infant Death Syndrome (SIDS).
G. When infants can easily turn over from the supine to the prone position, they shall be put down to sleep on their back, but allowed to adopt whatever position they prefer for sleep.
H. Unless a doctor specifies the need for a positioning device that restricts movement within the children’s crib, such devices shall not be used.

MEDICATION

A. No prescriptive medication or non-prescriptive medication including, but not limited to, acetaminophen, cough medicine or nose drops, may be administered to a child or allowed in the Center except under the following conditions:
   1. Written authorization that includes the child’s name and birth date, name of medication, administration instructions, medication intervals and length of the authorization dated and signed by the parent or guardian is required on form CFS-0059, Authorization to Administer Medication. Blanket authorizations that exceed the length of time specified on the label are prohibited.
   2. Each time medication is administered at the Center, a written record will be made on the same day that the medication is administered in the medication and injury logbook located in the classroom. The log shall be in a book with stitched binding with pages that are lined and numbered. The pages may not be removed or lines skipped. Entries shall be made in ink on the date administered. The entry will include type of medication given, dosage, time, date and the name or initials of the person administering the medication.
   3. The physician or parents will administer the first dosage of any medication.
   4. Prescription medication must be:
a. In the original container with a childproof cap.
b. Dated with the physician’s name and instructions for use.
c. Labeled with the child’s name, name of medication and dosage strength.
d. Instructions must include amount of dosage (HOW MUCH), number of times to be given each day (HOW OFTEN), starting date and length of time the medicine will be given (HOW LONG). For example: 1 tsp., 3 times a day, for 10 days or until gone.

5. Non-prescription medication must be:
a. In the original container with a childproof cap.
b. Labeled with the child’s name.
c. The dosage and directions for administering will comply with manufacturing recommendations. ANY VARIATIONS REQUIRE PHYSICIANS ORDER.

6. Parents will be contacted if medicine dosage is missed or there is any other error in distribution.

7. Medications are stored so that they are not accessible to children.

8. Refrigerated medications are kept in the kitchen or classroom refrigerator in a covered labeled container separate from the food. Non-refrigerated medications are kept in the administrative office or in the classroom in a covered labeled container.

9. Sunscreen and insect repellent may only be applied upon the written authorization of the parent. The authorization will include the brand and ingredient strength of the sunscreen or repellent. Authorizations will be reviewed every 6 months and updated as necessary.

10. All outdated medication left at the center will be returned to the parent or discarded.

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MINOR INJURIES

A. If an injury does not require immediate professional attention, the following procedures will apply:

1. The staff member is to give assistance to the child who was injured.
2. The Director or designee will be notified of the accident.
3. In the case of a head injury or other major injury, the parent/guardian or designated responsible person (if the parent cannot be reached) is contacted and the staff person who observed the accident makes a verbal report.
4. An accident/injury report form is filled out in duplicate. The parent receives the original and the Director reviews the copy before it is placed in the child’s file.
5. The type of accident, extent of injury, date, time, treatment used, and the signature of the attending staff member are recorded in the medical logbook at the Center.

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ii. Treatment of minor injuries such as, but not limited to; scrapes, minor cuts, bruises, nosebleeds, or bumps.
   1. Staff members receive CPR training. Care is provided consistent with these training sessions.
   2. First aid kits are available at the Center. Bandages, band-aids, and tape may be used to cover a wound.
   3. All skin abrasions are washed with soap and water immediately and then bandaged if necessary.
   4. Children who receive a blow to the head are observed for signs of concussion, dizziness, nausea, sleepiness, or confusion.
   5. Records of accidents are reviewed periodically by the Director in order to determine that all possible preventative measures are being taken.
   6. Center equipment that appears hazardous because of wear is reported to the Director and it is not used until it is repaired.

4-5

PERSONAL CLEANLINESS

A. Children and adults will wash hands when entering the child’s classroom and again at the end of the day when going home.
B. Children’s hands are washed with soap and warm running water before and after eating, after toileting, and before and after certain classroom activities.
C. All staff members wash their hands with soap and water before starting work and before going home, before and after handling food, after toileting or assisting children with toileting, after wiping body secretions from a child with a disposable tissue and after assisting an ill or injured child.
D. Wet or soiled clothing is changed promptly. A change of clothes is provided from home but extra clothes are also kept on hand at the Center. Soiled clothing is wrapped in plastic and put in a soiled linen bucket within the classroom to be taken home at the end of the day.
E. Cups, eating utensils, toothbrushes, pacifiers, combs and towels may not be shared and shall be kept in a sanitary condition.

4-6

PETS

A. Parents will be notified in writing when pets visit or are kept on the premises of the Center. Currently, we have fish.
B. Pets shall be kept and handled in a manner that protects the well-being of both children and pets. All contact between pets or animals and children will be under the close supervision of a child care worker who is close enough to remove the child immediately if the pet or animal shows signs of distress or the child shows signs of treating the pet or animal inappropriately.
C. No pets may be in the food preparation area.
D. Dogs and cats visiting the center shall be vaccinated against rabies and shall be tolerant of children.
Chapter 5. Emergencies

5-1

EMERGENCY PREPAREDNESS PLAN

The Gundersen Lutheran Emergency Response Plan is followed at the Child Care Center. The red Emergency Manuel is located at the front desk. The Plan addresses: Evacuation Procedures, Dept. Disaster Call List, Medical Response Plans, Security Alert, Severe Weather Alerts and Advisories, Missing Person, Utility Failure Response Plan, Code Fire Alarm, Emergency Alert (Medical/Chemical/Trauma), and Hazardous Material Spill Response Plan.

5-2

FIRE EVACUATION

Fire Evacuation Procedures:
1. The fire alarms will be sounded.
2. The children are to be taught that they are to stop what they are doing when they hear the signal and to meet the teacher nearest them. Children are also to be taught not to cover their ears, so that they can hear instructions.
3. The building is evacuated regardless of the apparent size of the fire or the amount of smoke. Staff and children do not stop to take clothing, toys, etc. All two-year-old, preschool and school-age teachers and children will meet at the southern corner of the playground. All toddler and infant teachers and children will meet on the sidewalk in front of the center.
4. Teachers assigned to classrooms during rest or nap time will immediately waken children and begin their evacuation.
5. Exits, hallways, and other evacuation routes are to be kept clear at all times, and exits are not to be planned through the kitchen, laundry, or lounge hallway.
6. All lights are turned on and all doors are closed to enable fire fighters to see better, and help to contain the fire.
7. All bathrooms, closets, office areas, and cubby areas are checked to make sure all children and adults have left the building.
8. The sign-in sheet and child information binder are taken outside.
9. After the children are assembled outdoors, attendance is taken to check the completeness of the evacuation. Staff must not reenter the building to search for missing children. This is the responsibility of the fire department.
10. Staff with fire extinguisher training may attempt to extinguish fire or source of smoke if they are not needed to evacuate children.
11. Supervisor informs fire personnel of evacuation.
12. If necessary, staff may lead children to the garage area for safety.
13. Unless blocked, teachers will exit children through the door leading directly to the playground.
TORNADO/SEVERE STORM

Tornado/Severe Storm Procedures:
1. The Child Care Center will be notified of severe weather conditions by Gundersen Security. Additionally, the center has a working weather radio.
2. If a tornado warning is issued and parents have not picked up their children, the following procedures will be followed.
   a. Child Care Center staff will remain calm and escort children to designated areas without windows; bathrooms, interior halls/walls where there is no glass or windows. Children will kneel down and place arms over heads.
   b. Infants and toddlers will be placed in evacuation cribs and taken to designated bathrooms, interior halls/walls. Blankets will be used to cover the cribs.
   c. If interior halls cannot accommodate all the children or are nonexistent, then Child Care Center staff will push tables to the center of the rooms and have the children get under tables with arms over their heads.
   d. Staff and children will remain in safety positions and safe areas until all clear is given or notified by Gundersen Security.

MEDICAL EMERGENCIES

A. Written permission from the parent/guardian to call the physician or refer the child for medical care, in case of an accident or emergency, is kept on file at the Center. All medical emergencies will be transported to Gundersen Health System unless otherwise instructed.

B. Medical Emergency: Child On-site
1. Begin immediate first aid as needed.
2. Notify director or supervisor and emergency contact person.
3. CALL SECURITY, EXT. 911 AND NOTIFY OF MEDICAL EMERGENCY.
4. One staff member stays with ill/injured child while other staff cares for other children in room.
5. Accompany child to hospital if emergency contact person is delayed in arriving. Bring child’s file to hospital. Stay with child until emergency contact person arrives.
6. Staff will not transport a child to the hospital in a staff vehicle.
8. Record the accident in the classroom Medical Log indicating type of accident, extent of injury, date, time, treatment used (if known), and
the signature of the attending staff member. Give both forms to the Director.

9. The Director will report the accident to the State Licensing Specialist IAW DCF 251.04(3) (a) and appropriately within the Gundersen system using the incident reporting flow chart on the back of the Gundersen Quality Assurance Incident Report.

C. Medical Emergency: Child Off-site
   1. Begin immediate first aid as needed.
   2. Additional staff members take charge of all remaining children. Children will be seated, out of harms way but relatively close to where the injured child is located. If there is at least three staff present, one will stay with the children. If not, the staff person rendering first aid will supervise.
   3. One staff person will summon help in order to activate the emergency medical system, 911, and notify the Center Director or supervisor of the accident.
   4. Refer to B above and follow procedures 5-9.

D. Medical Emergency: Adult
   1. Begin immediate first aid as needed.
   2. Notify Director or Supervisor and emergency contact person (can be found on staff report in staff file).
   3. CALL SECURITY, EXT. 911 AND NOTIFY OF MEDICAL EMERGENCY.
   4. If requested, accompany adult to hospital and stay until emergency contact person arrives.
   5. Bring adult’s file to hospital.
   6. Staff will not transport adult to hospital in staff vehicles.
   7. Refer to B above and follow procedures 7-9.

Chapter 6. Child Guidance

6-1

CHILD GUIDANCE

Gundersen Child Care Center views self-discipline as a developmental goal for all children. Inner control is the most effective and beneficial control for the child. Staff will use positive guidance, redirection of children, enhancement of the child’s self esteem, respect for others, and self control when dealing with behavior issues.

Positive guidance of children is accomplished in the following ways:
   1. Thoughtful analysis is given to the daily routine and room arrangement. If, through observation, it is noted that certain times of the day, or certain areas of the room, seem conducive to misbehavior, they are changed.
2. Teachers are encouraged to model productive behavior and to explain what is expected from the children. These expectations are to be reasonable and should be attainable by the children.

3. Activities and concepts are introduced to the children that relate to identifying and verbalizing feelings, respecting personal rights and controlling excessive behavior.

4. Teachers receive on-going training in effective guidance techniques.

Redirection of children:

1. If a child’s misbehavior is due to frustration, fatigue, boredom, over-stimulation, or other emotional reactions, the teacher will try to direct the child toward a more appropriate activity for his/her developmental level.

2. Teachers have a personal relationship with children that enable them to observe the “warning signals” that children may exhibit prior to misbehavior. If a teacher observes a child getting into a potentially tough situation emotionally, s/he will try to redirect the child before the situation becomes a problem.

3. Discussion will take place with children during the concept development time that deals with emotional reaction. Questions such as, “How do you feel when ____ happens to you? What do you want to do? What else could you do?” will be asked of the children. The emphasis will be placed on non-aggressive behavior.

4. Children who, in the course of play, begin to exhibit signs of belligerence or aggression towards others, such as but not limited to; biting, hitting, kicking, pinching, will be redirected into another play situation, or the teacher will change the play situation through modeling or facilitation.

5. Children will be encouraged to voice their feelings to each other. If a child does not want the aggressive attention of another child, s/he may help redirect the situation through verbalizing her/his refusal to participate until the aggressive behavior ceases.

Development of children’s self-control, self-esteem, and respect of others:

1. At all times, teachers are to show respect for children. This is done through acceptance of their ideas, through speaking to the child intelligently and at their eye level, and through applying guidance techniques without demeaning the child. In all instances, the teacher will let the child know s/he does not accept the behavior, but s/he still accepts the child.

2. Teachers model self control, self-esteem and respect for others through: being in control of their own emotions (no violent outbursts); being proud of themselves and confident of their abilities, and treating all children and other adults with courtesy and kindness.

Revised 11/7/2015
3. Children are warned ahead of time about transitions and the close of activities. They are expected to find a stopping place in their activity and are prepared to move on to something else when the time comes.

4. A good rapport is established between teachers and children through the development of trust. A child learns to depend on the teacher to be fair and consistent in his/her expectations of all children.

5. Common courtesy is encouraged among the children and modeled by the adults, in terms of listening to others and not infringing on someone else’s property or body.

Setting Limits:
1. Rules will be kept to a minimum and the center will provide for the safety and personal rights of each child.
2. Any rules that are established will be communicated to all children and reasons for the rules will be explained. This will be accomplished through discussion so that children have the ability to question, deduce, and assimilate the limits.
3. Center-wide rules will be discussed and agreed upon by the entire staff.
4. Rules and limits will be enforced consistently by the staff, but can be flexible if a child needs special consideration.
5. As children grow, they are encouraged to set their own limits and establish their own sense of control.

Discipline Delegation:
1. Only members of Gundersen Child Care Center’s staff are allowed to discipline the children, and then only after they have shown an understanding of the center’s philosophy and techniques of discipline.
2. Older children, volunteers, and parents are not allowed to take disciplinary action with Center children (unless it is a member of their own family, in the case of a parent only). Corporal punishment is never allowed on the Center premises. Parents, please be advised that even at your request, certain punishments are prohibited. (Note Prohibited punishments below.)
3. Teachers are evaluated on their ability to handle discipline situations, and are encouraged to seek help from other staff members if they have difficulty with a particular child or situation.

Continued Misbehavior:
1. If a child does not respond to positive guidance and redirection, and is posing an emotional problem for him/herself or others, or is a physical threat to others, the following steps are taken:
   a. The child is warned that repeating the behavior will result in his/her separation from the group. Alternatives are suggested to the child.
b. If the child repeats the action, s/he is removed from the group to a private place within sight of a teacher. The teacher tells the child s/he will return to discuss the situation when the child has calmed down. In extreme cases, the child may be removed to the Program Director’s office.

c. In a few minutes (not more than 5) the teacher returns to the child to discuss what happened, why it was unacceptable, and what the child must do to control his/her behavior. Children are encouraged to verbalize each of these points, as appropriate to their developmental level.

d. Use of time-out periods is prohibited for children less than 3 years of age.

e. The child is invited to return to the group when s/he is ready. If the child needs or wants more time alone they may take it.

f. When the child returns to the group, the teacher welcomes him/her back into the group and tries to make the transition as smooth as possible.

2. If a child exhibits unusual behavior for a period of time, the teacher contacts the parent to make inquiries about the child’s behavior at home, possible reasons for the behavior, and to suggest consistent techniques that could be applied between home and the Center. Children will not be permanently expelled from the Center for a behavior problem that may be outgrown or overcome with cooperation between parent and center staff.

Prohibited punishment: This includes all punishment that is humiliating or frightening to a child, such as but not limited to:

1. Spanking, hitting, pinching, biting, shaking, or inflicting any other form of corporal punishment.

2. Verbal abuse, threats or derogatory remarks about the child or the child’s family.

3. Binding or tying, to restrict movement, or enclosing in a confined space, such as a closet, locked room, box or similar cubicle.

4. Withholding or forcing meals, snacks, or naps.

5. Punishing for lapses in toilet training.

6. Excessive or long term exclusion from group activities.

Guidance techniques vary to some degree with the age of the child. As children grow older they are asked to assume more responsibility for their own behavior, and to practice more self-control.

Staff members who punish children in a prohibited manner, or who do not first apply proactive, rather than reactive, techniques will jeopardize their employment with Gundersen Child Care Center. Grounds for dismissal will be if a staff member uses any of the above listed “Prohibited Punishments.” Any infractions
of this discipline policy reported by parents/guardians, or other staff members will be investigated.

Chapter 7. Nutrition

7-1

MEALS & SNACKS

A. Children enrolled for childcare are served the planned meals at no separate charge and without regard to race, sex, color, handicap, age, or national origin. Breakfast, lunch and snack are served daily. Gundersen Child Care Center follows the guidelines of the United States Department of Agriculture (USDA) Child Adult Care Food Program (CACFP). All meals and snacks served meet the minimal nutritional requirements of the USDA Food Program (see Appendix B for additional information regarding these requirements). Weekly menus are posted next to the kitchen. CACFP meal pattern requirements will be followed for all children unless a current physician signed diet variation form is on file at the center.

B. Please do not bring your child after mealtime unless s/he has already eaten. Any child scheduled 10 hours or more and who will be here past 5:30 p.m. will be offered an additional snack. The food service schedule is listed below and posted in your child’s classroom.

C. Please indicate on the appropriate forms any allergies or special dietary needs your child may have.

D. Please do not bring any food to the center unless your child requires a substitute for a diet variation. A special diet, including nutrient concentrates and supplements, may be served only upon written instruction of a child’s physician and upon request of the parent.

1. Families will provide their own substitutes for their child if s/he is over the age of one and is unable to eat a menu item(s) scheduled for that day. The substitute will meet the nutritional component of the item that the child is unable to eat. (i.e. If a child is unable to eat strawberries, the family should bring in a piece of fruit as a substitute. If a child is unable to drink milk, the family should bring in soy milk or another substitute that meets the dairy component of the original menu item.)

2. If a substitute has not been provided by the family, administrative staff will call the parent(s) and request that they deliver a substitute as soon as possible. Substitutes will not be provided by the Center for children over the age of one.

3. For safety/choking and allergen purposes, some foods will not be permissible substitutes, such as (but not limited to) nuts, peanut butter, grapes, hot dogs, sausage. If you are unsure of whether a substitute will be appropriate, please ask your teacher or administrative staff.
E. Gundersen Child Care Center strives to be a breastfeeding friendly center. You are requested to indicate in writing whether you will provide your own breast milk or formula, or use the infant formula provided by the Center.

F. Birthday/Holiday Celebrations: We will gladly honor your child on his/her birthday. Only nutritious snacks low in sugar and salt are recommended. We are very sorry but we cannot accept homemade birthday treats. All treats must be commercially prepared and, if possible, labeled with the ingredients. We do have several children with food allergies and would not want to inadvertently cause them harm. Because of this, we are a “Nut Free Zone”. Parents are encouraged to attend and help with the festivities. Balloons are considered a dangerous substance. Our policy does not allow balloons as favors.

G. The cost of scheduled meals is incorporated into tuition fees; no additional charge will be made for meals or snacks. Parents are encouraged to join their children for meals at the Center. Parents must make reservations no later than Monday of the preceding week. A charge of $1.00 per meal will be added to the family’s bi-weekly statement for meals eaten by parents.

H. For children over the age of two, the following will apply:
   1. Food Service
      a. Food Service Schedules:
         1. Breakfast is served at 8:30a.m.
         2. Lunch is served at 11:30a.m.
         3. Afternoon snack is served from 2:30p.m. – 3:00p.m. School-agers arriving after 3:00p.m. are served when they arrive.
         4. Children are informed ahead of time about transitions and the close of activities. They are expected to find an ending place in their activity and be prepared to wash their hands in preparation for eating. Children who are ready ahead of time may participate in a quiet learning activity such as reading a story, singing, finger plays or other circle time activities. Children should not be expected to sit at the table waiting for food to arrive. Once food has arrived, children will wash hands and move to their assigned seat at the table.

b. During mealtime:
   1. Each staff person will sit at the table with their children.
   2. Meals will be served with time allowed for socialization.
   3. Children will be encouraged to serve themselves.
   4. Food will not be used as a punishment or reward and children will not be forced to eat.

2. Meal Provision:

Revised 11/7/2015
a. Breakfast, lunch, and snack are provided at the Center. Meal service is catered from the Gundersen Dietary Department.
b. Breakfast consists of at least one item from each of the following categories.
   1. Fruit
   2. Cereal, whole grain or enriched bread products
   3. Fluid milk
c. Lunch consists of at least one item from each of the following categories:
   1. Meat, poultry, fish, egg, cooked dried peas or beans, cheese, or other meat alternate
   2. Cereal, whole grain or enriched bread products
   3. Vegetables and/or fruit (at least two)
   4. Fluid milk
d. The snack consists of at least two of the following:
   1. Fluid milk
   2. Fruit
   3. Vegetable
   4. Meat or meat alternate
   5. Whole grain or enriched bread/cereal.
e. Children expressing hunger will be offered a snack if there is reasonable belief that the child is in need.

3. Food Preparation:
a. Breakfast, lunch and snack are provided by the Gundersen Dietary Department.
b. Lunch is catered by the Gundersen Dietary Department and served by center personnel.
c. Any changes to the planned daily menu will be recorded on the official menu located on the bulletin board outside the kitchen.
d. All menus are reviewed by nutrition services to ensure that foods offered are age appropriate.

I. For Infants and toddlers, the following will apply:
   1. Food Schedule:
      a. Infants and toddlers are fed according to an individualized schedule obtained from the parents/guardians at admission that is reviewed at least every two months and revised as necessary. Each child’s eating/bottle schedule will be located in the home-base food prep area. Staff will also provide parents with a daily information sheet, which logs the child’s eating and drinking habits.
      b. As children are developmentally ready to eat in a small group, opportunities are provided to eat family style for children whose schedules offer similar eating patterns. Children are encouraged to be as independent as possible, and finger foods are available at appropriate developmental stages to encourage self-feeding.
c. To meet the infant/toddler’s daily nutritional needs, one-third
daily nutritional requirements apply when most foods have
been introduced unless specifically excluded by a physician.
d. Drinking water will be offered to the infant or toddler several
times each day.

2. Provision of Milk:
   a. Nursing mothers are encouraged at the Center. Space is
      available in the Infant area to accommodate breastfeeding.
      Breast milk may be brought to the Center, fresh or thawed, in
      ready to feed plastic bottles. We do not accept frozen milk or
      glass bottles. The bottles will be labeled, dated and
      refrigerated in the infant room food prep area. Refrigerated
      breast milk not used within 24 hours will be discarded.
   b. Parents may elect to decline the Center-offered infant formula
      and supply their own breast milk or formula. However, the
      Center does provide an iron-fortified formula. The center is
      required to obtain written documentation of the parent’s
      decision to decline the offered infant formula.
   c. Parents/guardians who choose to supply their own formula will
      label the formula with the child’s name. It will be stored in the
      home-base food prep area. Opened cans of liquid formula will
      be dated, covered, and refrigerated in the home-base food prep
      area; any formula not used within 24 hours will be discarded.
      Parents will receive written notice when their supply of
      formula is nearly gone.
   d. Milk will be supplied by the Center for infants/toddlers
      receiving whole milk. Milk will be stored in the refrigerator in
      the food prep area. The Center will provide Grade A vitamin
      D whole milk for children under the age of two, and will
      provide Grade A vitamin D skim milk for children over two
      years of age.
   e. Parents/guardians will provide enough bottles and nipples for
      the day. Glass bottles are prohibited. Each bottle will be used
      for one feeding only. Bottles will be labeled with the child’s
      name and dated. The center will have masking tape and a pen
      available.
   f. Bottles that need warming will be placed in a cup/mug labeled
      with the child’s name. Warm/hot water, which has been heated
      in a hot pot, will be poured into the cup. Bottles will not be
      heated with a microwave oven.
   g. A child shall be held whenever a bottle is given. Bottles will
      not be propped.
   h. Empty bottles will be rinsed with hot water and placed in the
      child’s diaper bag or cubby so that they can be taken home and
      properly cleaned. Left over milk or formula shall be discarded
      after each feeding.
3. Food Service
   a. A child too young to sit in a highchair or at the table will be held while being fed.
   b. Highchairs with safety straps are available for infants.
   c. Toddlers will have group seating available. In order to encourage socialization and role modeling, children will be seated at a child-level table to self-feed, or be fed while seated at a low table. Staff will sit at the table with their children. Food will not be used as a punishment or reward and children will not be forced to eat.
   d. Children will be encouraged to self-feed with their hands and spoons. Eating utensils and cups will be scaled to the size and developmental level of children.

Chapter 8. Transportation

8–1

General Transportation Guidelines

The Center only provides transportation services through a contract made with a licensed private or public transportation provider. Children are never transported in vehicles owned by Gundersen, a Gundersen employee or volunteer.

School-age children arriving and leaving the center on a school bus contracted by the La Crosse School District will have a form CFS-56, Transportation Permission – Child Care Centers, on file with the center. Center staff, administrative and classroom teachers, will maintain a current schedule of drop off and pick up times to ensure the child is delivered to or received from the bus company as required. **When a bus is at least 15 minutes late**, picking up or dropping off, the center will contact the bus company and/or the child’s school and inform the child’s parents.

8–2

Field Trips

All children are routinely provided with education and recreational experiences outside the center. Children may take short walks near the center or travel to predetermined community locations for a variety of fun activities. Children are transported on field trips by school bus through a contract with a local licensed bus company.

Parents are notified in advance of field trips, other than daily walks. Notices are posted in the classrooms. It is the parents responsibility to read all Center notices, arrange for their child to be at the Center prior to departure time and inform the staff if their child will not be able to participate. If, for any reason, a parent does
not want their child to participate in the scheduled field trip activity, the Center will attempt to find another classroom for the child to join. In the event that there is no room in any classroom for the child, it is the parent’s responsibility to make other childcare arrangements for their child outside the Center. All daily tuition fees remain the same in the aforementioned event. Center staff will have a signed permission slip from each parent. Children will be instructed in safety procedures prior to boarding the bus. A roll call and head count will be taken as the children board the bus. Children will be belted whenever possible. Children will be instructed to remain seated while the bus is in motion. Teachers and adult volunteers will be distributed among the children. There will always be a teacher in the back. When children are ready to depart the bus, a teacher will be at the stairs to help them off. Once all the children are off, the last teacher will make a sweep of the bus, back to front, looking on and under seats to ensure all children are off and that belongings are not left behind. A head count will be taken once all the children are off and before the bus leaves. The teacher will give the all clear to release the bus driver.

8-3

Transporting Children with Disabilities

The Center needs to ensure there is transportation available as necessary to transport children with disabilities enrolled in the program. The Center will identify special transportation requirements for a child with a disability when preparing the child’s individual care plan with the parents. The care plan special transportation requirements are to be followed and include:

1. special pick-up and drop-off requirements;
2. special seating requirements;
3. special equipment needs;
4. any special assistance that may be required; and
5. any special training for teaching staff to include bus evacuation procedures (front and rear).

8-4

Parental Transportation

As child care providers, it is our responsibility to protect the health and safety of the children we serve. Use of alcohol or drugs by adults before transporting children can create an unsafe situation. If, in our opinion, the child cannot be safely transported to or from our center, we will ask the parent/other adult transporting the child not to transport. Instead, one of the following alternatives will be proposed:
1. We will call the emergency contact on the Child Enrollment form to transport the child.
2. We will call a cab to pick up the parent and the child. The parent will pay the cab fee.

***If the parent refuses to agree to one of the alternatives listed above and insists on transporting the child under unsafe conditions we will immediately call Protective Services or the police and report the unsafe driving situation.

Chapter 9. Programs

9-1

OVERVIEW

A. Children learn from imitating those around them and from hands on experiences. The child activity centers become the lesson plans and the total environment becomes the curriculum.

B. Gundersen Child Care Center’s curriculum is based on developmental concepts. Curriculum development is an ongoing process. Developmental milestones for each age group are addressed. The lesson plans designed to meet the curriculum requirements will change with the needs of the individual child.

C. Gundersen Child Care Center uses the Creative Curriculum, aligned with Wisconsin Model Early Learning Standards (WMELS). Based on research and supported by evidence-based practices, the Wisconsin Model Early Learning Standards (WMELS) provide a framework of developmentally appropriate expectations for young children that can guide the creation, evaluation, and improvement of conditions necessary for children’s optimal development and create a common language.

As a result of the combined efforts of families, early care and education professionals, communities, and policymakers, young children have expanded opportunities for positive development and learning experiences.

The Wisconsin Model Early Learning Standards specify developmental expectations for children from birth through entrance to first grade. The WMELS reflect attention to all the domains of a child’s learning and development:

I. Health and Physical Development
II. Social and Emotional Development
III. Language Development and Communication
IV. Approaches to Learning
V. Cognition and General Knowledge
While our teachers use the WMELS in determining curriculum alignment, identifying developmentally appropriate classroom activities, and creating meaningful lesson plans that meet the developmental goals for each child, the WMELS actually recognize that parents are the child’s primary and most important nurturers/teachers. The WMELS create a common language and address all aspects of development, therefore supporting the important partnerships between you (as the children’s parents) and the teachers/program you have chosen for your child at Gundersen Child Care Center.

D. Diversity is integrated into the curriculum.
   1. Learning that diversity values take place naturally – in everyday classroom events and activities that relate to children’s lives at home and at play – which makes sense to children.
   2. Staff use of teaching materials and strategies that integrate respect and human diversity is essential if children are to become self-motivated, problem solvers.

E. Although holidays are not a major focus of our thematic approach to daily planning, we do recognize and provide activities when appropriate.

F. We reserve the right to respond to religious issues when the children raise them. This will be done in a non-denominational manner.

G. Daily schedules and weekly lesson plans are posted in each activity area. Our developmentally appropriate curriculum spans all hours of operation. We strive to meet the individual needs of each child in our program. Children scheduled in the early morning and late afternoon are able to choose from a large assortment of activities that, for the most part, do not duplicate the activities planned for the major part of the program. They are offered opportunities to rest and eat as needed.
INFANT PROGRAM

A. The child uses their body and senses of sight, sound, smell, touch, and taste to learn. Throughout the day, our caregivers will use a routine – interacting, diapering, and eating, rocking, holding -- to foster social, physical, emotional, and cognitive growth. Special planned activities based on the infant’s individual developmental level are also included daily.

B. Outdoor time promotes healthy growth and is an essential part of the infant’s day. It allows the opportunity for discovery and interaction with the outside environment. Children may be taken out each day weather permitting. Refer to inclement weather guidelines Appendix A. Please dress your child appropriately.

C. Infants will be allowed to form and follow their own normal sleep and feeding schedule. Infants will be held for all feedings, unless being fed in a high chair or infant seat. Before leaving, please advise the staff of your own baby’s schedule. Staff will coordinate your home schedule with ours. We recognize that quality time with parents may come at varying times of the day. Written instructions are always helpful.

D. Parents will provide all bottles/nipples. **Glass bottles are not allowed.**

E. Please offer your infant breast milk or formula before arriving since several other infants may be arriving at the same time.

F. Infants should be clean and dry when brought to the Center. Diapers are checked at least every two hours and changed promptly when necessary. Please bring a sufficient supply of disposable diapers and wipes.

G. Please label and date all bottles and tops. Also label blankets, changes of clothing, and diaper bags. Please do not bring toys or anything of sentimental value. The Center is not responsible for anything your child might leave or lose.
TODDLER PROGRAM

A. Children 12 months – 24 months are looking for guidance. They need to feel secure with the adults around them.
B. Toddlers are beginning to discover other people and things. They need a structure they can count on.
C. Toddlers are emotional. They need compassionate understanding.
D. Toddlers are learning to name things in their world. They need freedom to explore. Outdoor time promotes healthy growth and is an essential part of the toddler’s day. It allows for the opportunity to discover and interact with their outside world. Children will be taken out each day weather permitting. Refer to Appendix A for the guidelines.
E. Toddlers are developing according to their own timetable. They need activities that recognize developmental differences
F. Toddlers are learning to put their thoughts into simple words. They need to be challenged so they can move ahead.
G. Toddlers are growing in all directions at once. They need nutritionally healthy food to support this growth. Meals and snacks are served in a family style setting in order to create continued opportunities for social interaction, language development, and independence in a relaxed and informal environment.
H. Clothing worn by toddlers must be comfortable and washable (even though paint shirts are provided for painting, water, and mud play.) Children must not be dressed in anything that will be ruined or stained. An extra set of seasonally appropriate clothes must always be provided. Sturdy rubber-soled shoes are a must, especially once your child has begun to walk. Children easily lose their balance at this age. PLEASE, dress your child in shoes and socks appropriate for active indoor and outdoor play. Label all clothing, shoes, backpacks, etc.
I. Toddlers should be clean and dry when brought to the Center. Diapers are checked often and changed when necessary. Please bring a sufficient supply of disposable diapers and wipes.
J. Naps are a part of the daily routine. Cribs and mats are provided: however, a special blanket or soft toy may be brought to the Center by the parent for your child’s comfort.
K. Please do not send toys or anything of sentimental value with your child. We are not responsible for any items left or lost at the Center.
2-YEAR PROGRAM

A. Children ages 2-3 years old are curious, “into everything,” extreme in moods, and high in energy. The 2’s world centers on self—their wants, needs, family, and home. They seek independence through eating, dressing, toileting, and the expression of feelings, while expressing wants and needs through their emerging language.

B. Staff contributes to this development of independence by preparing an emotional stable environment in which the child can develop his/her social, cognitive, and motor skills as much as his/her age and ability allows.

C. Learning through senses continues to be the primary manner in which 2’s gain information and learn about their world. Age-appropriate activities are provided daily to promote the growth and development of 2’s.

D. Meals and snacks are served in a family style setting in order to create continued opportunities for social interaction, language development, and independence in a relaxed and informal environment.

E. Clothing worn by 2’s must be comfortable and washable (even though paint shirts are provided for painting, water, and mud play.) Children must not be dressed in anything that will be ruined or stained. An extra set of seasonally appropriate clothes must always be provided. Sturdy rubber-soled shoes are a must. Please dress your child in shoes and socks appropriate for active indoor and outdoor play.

F. Children should be clean and dry when brought to the Center. Diapers are checked every two hours and changed when necessary. Please bring a sufficient supply of disposable diapers, pull-ups, wipes, and underwear for those who are potty training.

G. Outdoor play is an important part of your child’s day and essential for healthy physical growth and development. Special activities are planned for the outdoor environment. Children will be taken outside each day, weather permitting. Refer to Appendix A for the guidelines. Children must be sent with appropriate clothing for weather conditions.

H. Naps are a part of the daily routine. Mats are provided; however, a special blanket or soft toy may be brought to the Center by the parent for your child’s comfort.

I. Please do not send toys or anything of sentimental value with your child. We are not responsible for any items left or lost at the Center.
PRESCHOOL PROGRAM

A. As the child enters their third, fourth, or fifth year, their focus is on other children and extends beyond themselves and the home. Preschool children are growing in their ability to use their bodies skillfully in activities such as walking, climbing, sitting, and running. Language skills are more conversational and communication with peers and adults becomes fully developed. Our daily program is thoughtfully planned to provide opportunities for young children to gain self-esteem and confidence.

B. Our teachers set up learning centers and plan activities that offer “can do” learning experiences: art, block play, manipulative toys, music, motor activities and games, dramatic play, reading, math, and science, cooking, and sand and water play. These centers enable the children to make choices, to move freely and independently, and to grow in areas of need. They provide hands-on opportunities for children to learn individually.

C. Outdoor activities in which large muscles are used are beneficial to a child’s health. Program schedules include daily outdoor activities unless the weather is severe. Refer to Appendix A for the guidelines. Please make sure your child is dressed appropriately.

D. All children in the preschool program should be toilet trained. Preschool classrooms do not have diapering facilities. A seasonally appropriate change of clothing is required for all children. Please dress your child in shoes and socks appropriate for active indoor and outdoor play. Label all clothing, shoes, backpacks, etc.

E. Rest time is a part of the daily routine. DCF 251.07(4)(a) requires a child under 5 years of age in care for more than 4 hours to have a nap or rest period. Mats are provided; however, a special blanket or stuffed animal may be brought to the Center by the parent for your child’s comfort. A child who does not sleep after 30 minutes and a child who awakens are permitted to have quiet time through the use of equipment or activities that will not disturb other children, DCF 251.07(4)(b).

F. Other toys must not be brought from home except for scheduled “Sharing Time.” We are not responsible for any items left or lost at the Center.
SCHOOL-AGE PROGRAM

A. Our School-Age program offers, on a year-round basis, care for children 6 years through 12 years before and after school, during summer and school vacations and during school closings.

B. Our program is child-oriented. Activities are designed to enrich each child’s social, physical, emotional and cognitive growth and development.

C. A qualified staff coordinates well planned activities.

D. School-age children need a full and varied program. They need challenges, interesting materials, and caring adults who will listen. These children have talents and skills to explore, personalities to develop, and boundless energy to use. They have creative, new ideas to try, know what they like, and can take an active part in planning a program to match their interests and skills.

E. Choices must be made available to draw, paint, organize a club or read a book. These children are growing more independent. They still need adult supervision, but in different ways than younger children. The caregivers provide materials and new ideas for challenging projects or activities and the “know-how” or expert advice to learn new skills. Our program is planned to help children become independent and make choices based on their own individual needs and interests. A full range of activity choices will be available that provide a change of pace between elementary school and our program (e.g., art, music, movement, drama, outdoor recreation, cooking, field trips.)

F. Family style dining provides nutritious meals in a relaxed social setting for school age children in attendance during mealtime. Children eat in small groups and serve themselves. Children attending before and after school care will be provided with early breakfast and an afternoon snack.

G. Outside time is an important part of the school-age program. They will be outside every day they are here, weather permitting. Refer to Appendix A for the guidelines. Please make sure your child is dressed appropriately for weather conditions.

H. Even school-ageers have accidents. Please provide a complete change of seasonally appropriate clothes for your child. Please dress your child in shoes and socks appropriate for active indoor and outdoor play. Label all clothing, shoes, backpacks, etc.

I. Toys must not be brought form home except for scheduled sharing time. The Child Care Center is not responsible for anything lost or left at the center.
Chapter 10. CLOTHING

10-1

CLOTHING

A. Children attend childcare to participate in active, busy play, to explore the world freely, and to experiment with many kinds of materials. The clothing they wear can add to or detract from their enjoyment of childcare. We strongly suggest the following guidelines in choosing clothes.

1. Be simple enough so that the child can put it on and take it off (front openings, long slits, large buttons, elastic waists, etc.)
2. Be loose enough to provide freedom of movement.
3. Be light enough so that play is not hampered.
4. Be large enough to pull on easily. This is especially important with boots.
5. Be durable enough to permit free, vigorous play.
6. Sturdy rubber-soled shoes are a must. Please dress your child in shoes and socks appropriate for active indoor and outdoor play.
7. Parents may be asked to donate an old shirt or smock for painting, water and mud play.

B. The following clothing suited for weather.

1. Mittens or gloves must be worn on all cold days.
2. A cap for head covering must be available for outdoor play in windy or cold weather.
3. The child must have long pants or other leg coverings for cold weather.
4. The child must have boots for rain, snow, or extreme cold.

C. Children need to bring the following garments to the center:

1. A complete change of clothing (underwear, socks, shirts, and pants.)
2. Suitable clothing for changing weather such as boots, caps, mittens, and long pants.

NOTE: CLOTHING MUST BE MARKED WITH THE CHILD’S NAME BY MEANS OF INDELIBLE INK, EMBROIDERY, OR NAME TAGS. THIS SHOULD INCLUDE ALL ARTICLES OF CLOTHING. GUNDERSEN CHILD CARE CENTER IS NOT RESPONSIBLE FOR ANY LOST CLOTHING ITEMS.
Chapter 11. Parent Involvement

11-1

PARENT PARTICIPATION

A. Parents are one of our program’s most valuable resources. Parents make some excellent contributions to the program each year.
B. One of the ways in which parents may address issues is by voluntary participation in the Parent Involvement Group (PIG).
C. Parents may address program issues such as:
   1. Ensuring a quality program for the Child Care Center.
   2. Special projects that will benefit the children of the Center.
   3. Achieving goals and objectives for the development of the Center in cooperation with Gundersen Administration and the Child Care Center staff.
D. Communication is extremely important. Parents are encouraged to talk with their child’s teacher. Parent information is posted in each classroom on the bulletin board or displayed next to the sign-in sheet.
E. Family activities and events will be planned throughout the year, and all enrolled families are encouraged to participate.

11-2

CONFERENCES AND VISITS TO CLASS

A. Parents are invited to visit classes at any time. Visits to class and special times for sharing talents or hobbies can be arranged by contacting your child’s teacher. There are many times during the school year when parent’s help is requested. Please take every opportunity to share in these early experiences.
B. The Center encourages ongoing communication between parents and staff. You will be scheduled for a formal Parent/Teacher conference twice during the year. Additional conferences regarding your child can be scheduled as needed.
C. The Center maintains an “Open Door” policy.
APPENDIX A
INCLEMENT WEATHER

Definition: Stormy or severe weather such as any of the following:
- Heavy rain
- Temperatures above 90 degrees F
- Wind chills of 0 degrees F or below for children age 2 and above
- Wind chills of 20 degrees F or below for children under age 2

Additionally: The inside temperature of the center may not be less than 67 degrees F or higher than 80 degrees F.

The heat index (HI) is an index that combines air temperature and relative humidity in an attempt to determine the human-perceived equivalent temperature — how hot it feels, tempered the felt air temperature.

NOAA’s National Weather Service Heat Index

| Temperature (°F) | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 | 109 | 110 |
|------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 40               | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 | 106 | 107 | 108 | 109 | 110 |
| 45               | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 | 101 | 102 | 103 | 104 | 105 |
| 50               | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 |
| 55               | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 |
| 60               | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 |
| 65               | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 |
| 70               | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 |
| 75               | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 |
| 80               | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 |
| 85               | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 | 49 | 50 | 51 | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 |

Likelihood of Heat Disorders with Prolonged Exposure or Strenuous Activity:
- Caution
- Extreme Caution
- Danger
- Extreme Danger

NWS Windchill Chart

Revised 11/7/2015
APPENDIX B
CACFP MEAL PATTERN REQUIREMENTS

The meal pattern shall contain, as a minimum, each of the following components in the amounts indicated for the specific age group.

<table>
<thead>
<tr>
<th></th>
<th>Age 1 &amp; 2</th>
<th>Age 3, 4 &amp; 5</th>
<th>Age 6 up to 12</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BREAKFAST</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Milk, Fluid</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1 cup</td>
</tr>
<tr>
<td>2. Juice or fruit or vegetable or Fruit(s) or vegetable(s)</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>3. Grains/Bread(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread</td>
<td>1/2 slice</td>
<td>1/2 slice</td>
<td>1 slice</td>
</tr>
<tr>
<td>Cereal</td>
<td>1/4 cup or 1/4 oz</td>
<td>1/4 cup or 1/4 oz</td>
<td>1/4 cup or 1 oz</td>
</tr>
<tr>
<td>Hot cooked</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Cooked pasta or noodle products</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td><strong>LUNCH OR SUPPER</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Milk</td>
<td>1/2 cup</td>
<td>1/4 cup</td>
<td>1 cup</td>
</tr>
<tr>
<td>2. Meat or meat alternate:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meat, poultry, fish, cheese</td>
<td>1 oz.</td>
<td>1 oz.</td>
<td>1 oz.</td>
</tr>
<tr>
<td>Alternate protein products†</td>
<td>4 oz. or 1/4 cup</td>
<td>6 oz. or 1/4 cup</td>
<td>8 oz. or 1 cup</td>
</tr>
<tr>
<td>Yogurt, plain or flavored, unsweetened or sweetened</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Egg</td>
<td>1/2 egg</td>
<td>1/4 egg</td>
<td>1 egg</td>
</tr>
<tr>
<td>Cooked dry beans or peas</td>
<td>1/2 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Peanut butter or other nut or seed butter</td>
<td>2 Tbsp</td>
<td>2 Tbsp</td>
<td>2 Tbsp</td>
</tr>
<tr>
<td>Peanuts or soybeans or tree nuts or seeds</td>
<td>1/2 oz.</td>
<td>1/2 oz.</td>
<td>1 oz.</td>
</tr>
<tr>
<td>3. Vegetable and/or fruit† (at least two)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grains/Bread(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread</td>
<td>1/2 slice</td>
<td>1/2 slice</td>
<td>1 slice</td>
</tr>
<tr>
<td>Cereal</td>
<td>1/4 cup or 1/4 oz</td>
<td>1/4 cup or 1/4 oz</td>
<td>1/4 cup or 1 oz</td>
</tr>
<tr>
<td>Hot cooked</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>Cooked pasta or noodle products</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td><strong>SUPPLEMENT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Select two of the following four components:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Milk</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>2. Juice or fruit or vegetable or Fruit(s) or vegetable(s)</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>3. Grains/Bread(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bread</td>
<td>1/2 slice</td>
<td>1/2 slice</td>
<td>1 slice</td>
</tr>
<tr>
<td>Cereal</td>
<td>1/4 cup or 1/4 oz</td>
<td>1/4 cup or 1/4 oz</td>
<td>1/4 cup or 1 oz</td>
</tr>
<tr>
<td>Hot cooked</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
<td>1/4 cup</td>
</tr>
<tr>
<td>4. Meat or meat alternate:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meat, poultry, fish, cheese</td>
<td>1/2 oz.</td>
<td>1/2 oz.</td>
<td>1 oz.</td>
</tr>
<tr>
<td>Alternate protein products†</td>
<td>1/2 oz.</td>
<td>1/2 oz.</td>
<td>1 oz.</td>
</tr>
<tr>
<td>Egg, Larg(b)</td>
<td>1/2 egg</td>
<td>1/2 egg</td>
<td>1/2 egg</td>
</tr>
<tr>
<td>Cooked dry beans or peas</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
<td>1/2 cup</td>
</tr>
<tr>
<td>Peanut butter or other nut or seed butter</td>
<td>1 Tbsp.</td>
<td>1 Tbsp.</td>
<td>1 Tbsp.</td>
</tr>
<tr>
<td>Peanuts or soybeans or tree nuts or seeds</td>
<td>1/2 oz.</td>
<td>1/2 oz.</td>
<td>1 oz.</td>
</tr>
<tr>
<td>Yogurt, plain or flavored, unsweetened or sweetened</td>
<td>2 oz. or 1/4 cup</td>
<td>2 oz. or 1/4 cup</td>
<td>2 oz. or 1/4 cup</td>
</tr>
</tbody>
</table>

* Must be full strength fruit or vegetable juice.
† Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched, cornbread, biscuits, rolls, muffins, etc., shall be made with whole grain or enriched meal flour.
‡ Either volume (cup) or weight (oz.), whichever is less.
§ No more than 50% of the requirement shall be met with tree nuts or seeds. Tree nuts and seeds shall be combined with another meat/meat alternate to fulfill the requirement. For purposes of determining combinations, 1 oz. of nuts or seeds is equal to 1 oz. of cooked lean meat, poultry or fish.
†† Serve 2 or more kinds of vegetables and/or fruit(s). Full strength vegetable or fruit juice may be counted to meet not more than one-half of this requirement.
¶ False may not be served when milk is the only other component.
† Alternate protein products may be used as acceptable meat alternates.
b One-half egg meets the required minimum amount (one ounce or less) of meat alternate.

Revised 11/7/2015
CACFP MEAL PATTERN REQUIREMENTS – BIRTH THROUGH 11 MONTHS

The infant meal pattern shall contain, as a minimum, each of the following components in the amounts indicated for the specific age group.

The minimum quantity of food shall be provided to the infant, but may be served during a span of time consistent with the infant’s eating habits.

<table>
<thead>
<tr>
<th>Birth Through 3 Months</th>
<th>4 Through 7 Months</th>
<th>8 Through 11 Months</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BREAKFAST</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4–6 fl. oz. formula¹ or breast milk ²,³,⁴</td>
<td>4–8 fl. oz. formula¹ or breast milk ²,³,⁴</td>
<td>6–8 fl. oz. formula¹, breast milk ²,³,⁴</td>
</tr>
<tr>
<td>0–3 T. infant cereal² (optional)</td>
<td>2–4 T. infant cereal²</td>
<td>1–4 T. fruit and/or vegetable</td>
</tr>
<tr>
<td><strong>LUNCH OR SUPPER</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4–6 fl. oz. formula¹ or breast milk ²,³,⁴</td>
<td>4–8 fl. oz. formula¹ or breast milk ²,³,⁴</td>
<td>6–8 fl. oz. formula¹, breast milk ²,³,⁴</td>
</tr>
<tr>
<td>0–3 T. infant cereal² (optional)</td>
<td>2–4 T. infant cereal² and/or 1–4 T. meat, fish, poultry, egg yolk, or cooked dry beans or peas, or 1/2–2 oz. cheese or 1–4 oz. cottage cheese, cheese food, or cheese spread 1–4 T. fruit and/or vegetable</td>
<td></td>
</tr>
<tr>
<td>0–3 T. fruit and/or vegetable (optional)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SNACK</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4–6 fl. oz. formula¹ or breast milk ²,³,⁴</td>
<td>4–6 fl. oz. formula¹ or breast milk ²,³,⁴</td>
<td>2–4 fl. oz. formula¹, breast milk, or fruit juice³</td>
</tr>
<tr>
<td>0–1/2 bread or 0–2 crackers (optional)⁴</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹ Shall be iron-fortified infant formula.
² Shall be iron-fortified dry infant cereal.
³ Shall be full-strength fruit juice.
⁴ Shall be from whole-grain or enriched meal or flour.
⁵ It is recommended that breast milk be served in place of formula from birth through 11 months.
⁶ For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.

Required Guidelines for Infant Meal Pattern

**Definition of Infant.** Any child less than 12 months of age.

**Definition of Infant Formula.** Infant formula defined by USDA as "any iron-fortified infant formula intended for dietary use as a sole source for food for normal healthy infants served in liquid state at manufacturer’s recommended dilution".

**Definition of Breast milk.** The decision regarding feeding infants breast milk or the type of infant formula is one for the infant’s doctor and parents/guardian to make together.

**Definition of Optional.** Optional foods must be served as such infant becomes developmentally ready for the specified foods.