

SACRED HEART CATHOLIC SCHOOL

PRE-K PROGRAM

2023-2024



SACRED HEART CATHOLIC SCHOOL

4050 Hubbard Avenue North

Robbinsdale, MN 55422

763-537-1329

<http://sacredheartschoolrobbinsdale.org>

faithful  beginnings

at Sacred Heart Catholic School

POLICY INFORMATION FOR PARENTS

At the time of enrollment, parents/guardians are provided information about our program and a copy of our Emergency Preparedness Plan via an electronic copy. A hard copy will be provided per parent request.

Our enrollment packet includes many required forms including emergency contact information, health and immunization forms, child's personnel information such as eating, sleeping, toileting, and comfort measures. Please inform us of any individual child care program needs your child may have so that we can best provide for them while in attendance at our program. The packet also contains late payment and termination policies, and our program plan. At that time, you may offer any suggestions or recommendations that we will take in consideration to further enhance the quality of our program.

We are license by the MN Department of Human Services to operate a preschool program. The rules and regulations that govern us also include local regulators such as food ordinances, city, fire, and health inspectors. National policies also affect our operation such as OSHA, USDA, ADA, and IDEA and child care accreditation standards by NAEYC and Parent Aware. You may access these rules and regulations via each individual entity. Our license allows for the following:

Three year Pre-K, ten pupils per teacher, one session:

9:00 -11:30 am Tuesday, Thursday

***Children must be 3 by September 1st and toilet trained.

***Maximum children: 16 students with two staff

Four/five year Pre-K , ten pupils per teacher, two sessions:

7:30 – 11:15 am Half day: Monday, Wednesday, Friday

7:30-2:10 pm Full day: Monday-Friday (3-5 days)

***Children must be 4 by September 1st and toilet-trained.

****Maximum children per session: 20 students with two staff

Payment options: Pay full tuition in September or set up a monthly payment plan using TADS tuition (September-May)

Two week notice must be given if your child leaves the program.

Educational Methods

Sacred Heart Pre K offers a child centered, activity-based program. It provides a stimulating, structured program geared to the children's ages and development, and offers the children opportunities to explore, manipulate, experiment with things and interact with people. Children at Sacred Heart Pre K are supervised at all times.

SCHOOL UNIFORMS

Uniform Vendor: Donald's Uniform Company

<http://www.donaldsuniform.com>

Two Locations:

972 Payne Ave., St. Paul 651-776-2723 (Main Store)

6407 City West Parkway, Eden Prairie 651-776-2723

Sacred Heart Catholic School students should wear their uniforms in a manner that reflects pride in their personal being and in their school.

The basic uniform colors for SHCS are red, white and navy blue. Donald's Uniform is the official uniform supplier of SHCS and families are encouraged to purchase LOGO uniform shirts from Donald's Uniforms. Uniforms may be purchased at the store or online. If you use the school code (SacredHeartSTS), orders will be shipped to the school once a month to save on shipping.

Shirt Options

1. SHCS logo shirt (knit or performance) white or red, banded or non-banded. Purchase from Donald's.
2. Solid white polo, long or short sleeve. May purchase from any store.
3. Only SHCS red logo shirts may be worn, long or short-sleeved. No plain red polo allowed.
4. Red performance t-shirt with SHCS logo.

Sweatshirts

1. SHCS Microfiber Fleece or Performance Sweatshirts
navy blue or red SHCS logo Microfiber Fleece or Performance
 2. SHCS sweatshirts –red or blue with logo
- All sweatshirts need a red or white polo underneath.

Jumper/Skort/Skirt---OPTIONAL, NOT REQUIRED

Plaid uniform jumper (#9868) Skort (#4068)

Bike shorts may be worn under jumper, never alone.

Pants/Shorts

Solid navy

- Any navy pant is allowed for preschool, including sweatpants/yoga pants.
- Pants may be purchased at any store.

Socks and Shoes

- Shoe style must cover the whole foot with no open toes, sides or backs.
- Shoes/sandals must have a back strap.
- Socks must be worn at all times.
- Shoes with built-in wheels, in-line skates, crocs, slides, high platform shoes, etc. are not permitted

Spirit wear

- Students may wear Sacred Heart spirit wear shirts on designated days with navy pants. Additional spirit wear may be purchased at Educational Outfitters in St. Louis Park.

Jewelry-Necklaces may not be worn for your child's safety per licensing.

BUILDING SECURITY AND ACCESS

All school doors remained locked during the school day. All parents/visitors may access the Pre-K classrooms through door 8. Please ring the buzzer to identify yourself and our office staff will buzz you into the school building. All Pre-K students must be signed in at drop-off and signed out at pick-up time. Parents will complete a form to identify individuals that may pick up your child. Staff may ask them to provide a photo ID before a child is released in their care.

DROP OFF/PICK UP PROCEDURE

We require all parents/guardians to walk children into the building, holding their child's hand. Children must wash hands before entering the classroom and all parent(s) will sign in their child. At pick up time, parents will come to the classroom or entry way to sign out their child. If someone else besides the parent picks up your child, the adult must be on the emergency pick up form. Parents may add an emergency name at any time during the year. Teachers will ask for a picture ID before a child will be released to the adult. No unauthorized persons will be allowed to take a child. If parents have custody arrangements, paper work must be on file at school in order for staff to follow the court ordered requirements.

PARENT CONFERENCES

Parent conferences are planned and offered twice a year, October and March. A written assessment of your child's intellectual, physical, social and emotional development will be provided in January and May. Documentation of conferences are kept in the child's record.

HEALTH CARE SUMMARY

Upon enrollment or within 30 days, a medical record of your child must be submitted to the school office. It must include a current examination and it must be signed by the child's source of medical care. The content of each child's health and safety file is confidential but is immediately available upon request by administrators and teaching staff who have consent from a parent or legal guardian to access the records, child's parents or legal guardians, and regulatory authorities.

IMMUNIZATIONS

Upon enrollment documentation of current immunizations must be submitted. For inadequate or unimmunized children, a signed, notarized, statement of parental objection to the immunization or medical exemption is required. From time to time there may be children at the program whom are not fully vaccinated. We emphasize the importance of vaccination to protect the health and safety of all of the children and staff at our program.

INADEQUATELY IMMUNIZED CHILDREN

If a case of measles, mumps, rubella, pertussis, polio, or diphtheria occurs at our program, children who are inadequately or incompletely immunized will be excluded through the incubation period, of the last reported case of the disease, as determined by the local health department. This exclusion is necessary because these children may become infected and contribute to further disease spread. This exclusion also applies to children or staff who have not been immunized for conscientiously held belief or medical contraindications.

SPECIAL NEEDS / ALLERGIES / MEDICAL CONDITIONS

Parents/guardians have the responsibility to inform the program when their child has any special needs, allergies or conditions requiring attention. If a child is admitted having special needs, procedures stipulated by our licensing requirements, will be followed. An individualized child care plan (ICCP) will be developed to meet the child's individual needs. The plan will be coordinated with either the service plan, education plan and/or with the physician, psychiatrist, psychologist, and/or health consultant. The ICCP will need to be updated annually or when there is any change. The plan will be kept in your child's file, with any medication, on field trips and during transportation. The program will provide any additional staff training (within reason) required by your child's ICCP however, there may be times when you are requested to assist in the training or ensure the child's nurse specialist is involved in the training.

INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

As a child care provider, we continually monitor the development of all children in our care through ongoing observation and recording. We want the best outcomes for all children. Child care providers are considered a primary referral source for early childhood intervention under federal IDEA special education law. We are required to refer a child in our program who has been identified as having developmental concerns or a risk factor that warrants a referral as soon as possible, but in no case more than seven days after the identification. While this is a mandate, we want to keep open communication with parents and caregivers about their child and any concerns we have before a referral is made. We can assist you with the referral or partner with you in the referral process.

EXCLUSION OF ILL CHILDREN

Children should be kept home if they have any of the following symptoms or illnesses:

MN Rule 3 9503.0080 Exclusion of Sick Children guidelines are as follows:

- Any child with a **reportable illness or condition** as specified by the health department that is contagious and a physician determines has not had sufficient treatment to reduce the health risk to others.
- **Chicken pox** until the child is no longer infectious or until the lesions are crusted over.
- **Vomiting** – 2 or more times since admission that day.
- **Diarrhea** – 3 or more abnormally loose stools since admission that day.
- Contagious **conjunctivitis** or pus draining from the eye.
- **Bacterial infection** such as **strep throat** or **impetigo** and has not completed 24 hours of antimicrobial therapy.
- **Unexplained lethargy.**
- **Lice, ringworm or scabies** that is untreated and contagious to others.
- **Fever** 100 degree Fahrenheit axillary or higher temperature of undiagnosed origin before fever reducing medication is given.
- **Undiagnosed rash** or a rash attributable to a contagious illness or condition.
- Significant **respiratory distress**; fast, difficult, or different breathing, uncontrolled coughing, and/or wheezing.
- **Not able to participate** in child care program activities with reasonable comfort.
- **Requires more care** than the program staff can provide without compromising the health and safety of other children in care.

If your child becomes ill or injured during the day she/he will be kept isolated from the other children and under staff supervision. A parent or your authorized person pick up will be notified and asked to pick up your child. Your child will be monitored and comfort measures will be provided. In the event of a medical emergency, 911 will be called and then the parent.

The parents are asked to notify the program with 24 hours, exclusive of weekends and holidays when a child is diagnosed by a child's source of medical or dental care as having a contagious disease. Contagious illnesses will be reported to all parents the same day the information is received. The staff will post a notice in a prominent place stating the illness, incubation period, early signs to watch for and exclusion recommendations.

Behavior or health issues which may affect the safety, health, and general well-being of other children may result in limited exclusion or termination of enrollment.

OUTDOOR PLAY

Regular physical activity has important health benefits. Weather permitting daily outdoor play will be provided. Going outside offers an environment that encourages exercise and a different setting. Being outside reduces the spread of infectious disease. Our outdoor guidelines for healthy development, children should go outside when:

1. Weather seems comfortable and when it is somewhat uncomfortable. In summer, children should wear light colored, lightweight sun protective clothing and hats, sunscreen, play in shaded areas, and have drinking water available. In winter, dress in warm, dry layers and play in wind-protected areas. (Use weather humidity/wind chill/air quality guidelines.) Please ensure your child comes dressed in appropriate indoor and outdoor clothing.
2. It is snowing, raining, or when snow is on the ground and the children are wearing water-resistant clothing. Snow and rain are important learning materials.
3. Children have a runny nose, cold or ear infection **unless** they have a documented condition identified by their health care provider that can be worsened by cold, wind or being outdoors.

FIRST AID / CPR / OSHA

In the event of any accident or illness, trained staff will administer First Aid and/or CPR according to the guidelines of their training and OSHA. If we decide this is an emergency, 911 will be called. As determined by the paramedics, your child will be transported to North Memorial Hospital. Parents will be responsible for the cost of any medical transportation needed. A parent/guardian or alternate emergency contact as listed on your child's emergency contact information will be contacted as soon as possible. We will also attempt to contact your child's source of health care. Parents are responsible for keeping the information on the emergency information up to date. This includes your office, home/mobile phone numbers and at least two people authorized to act on your behalf should the center not be able to reach you. These emergency contacts also need to be authorized to pick up your child.

At least one staff person that is fully trained will be present during hours of operation and when transporting children in care. This includes when all teachers and assistant teachers are within their first 90 days and not yet trained.

Emergency Folders in each classroom-All classrooms have an emergency folder located at the classroom door for teachers/staff/guest teachers/parents. The folder contains emergency procedures, lockdown procedures, and other emergency protocol procedures.

MEDICATIONS

Prescription Medications:

The program will not administer medication doses that can be done at home. Any medication to be given once or twice a day needs to be done at home. Any medication to be given long term will require additional paper work using ICCP care plans. However, exceptions will be made for emergency purposes (food allergies, asthma) in consultation with medical doctor.

Medication must come in its original container and be properly and legibly labeled with your child's full name and current prescription information. Twins and siblings cannot share any medications.

Non-Prescription Medications:

We do not administer any non-prescription medications.

Over The Counter Products:

Written parent permission will be obtained to apply any OTC products (external products) such as sunscreen lotion, lip balm, lotions, etc. We are not required to document the applications of these products. Powders, cornstarch and aerosol sprays are not allowed due to inhalation hazards.

FIELD TRIPS (4/5 PreK only)

Written parental permission will be obtained from each child's parent before taking a child on a field trip (including walking ones and on-site outdoor picnics). Parents will be informed of the hours, mode of transportation, and the purpose and destination of the field trip. Staff will take emergency cards (with ER numbers for child's parent, persons to be called if a parent can't be reached, and child's doctors), a first aid kit and manual, and attendance records on all field trips.

At least one person trained in pediatric CPR and obstructed airways, and is up to date on first aid and OSHA will accompany children on field trips. If children will be divided into groups, then additional CPR/FA/OSHA trained staff will accompany each group. Children will be transported according to MN DHS Statutes Chapter 9503.0150 "Transportation" and MN Human Services Licensing Chapter 245A.18 "Child Passenger Restraint Systems". Permission forms will be kept on file from one licensing review to the next. Staff will have means to identify the children and attendance will be taken frequently. **STAFF WILL NOT TRANSPORT CHILDREN!**

RESEARCH AND PUBLIC RELATIONS

The center will obtain written parental permission before a child is involved in each experimental research or public relations activity involving a child while at the center. The permission form is kept in the child's record.

EVACUATION SITE

If we need to evacuate our school building for emergency purposes, students will be re-located to Elim Lutheran Church on 3978 W. Broadway Ave.

MEALS AND SNACKS

Our license requires us to comply and follow USDA requirements for meals and snacks. Menus are planned on a monthly basis and provided to parents. Hot lunch is provided by Lancer Catering. Hot lunch must be pre-ordered in advance using our Boonli website. PreK children must be served white milk during lunch. Children will wash their hands before eating and go directly to the table to eat.

Staff will sit with children during meal and snack times. Children will have access to water throughout the day using single service cups or a water fountain. Water bottles are allowed only on field trips. Any treats or foods brought into the center will be unopened and commercially prepared.

Sanitation procedures and practices will be adhered to in accordance with licensing and health guidelines for safe food preparation, handling, and serving. Bag lunch requirements, and catered food will be in accordance to USDA guidelines. Students must be served milk every day for lunch. No juice or soda allowed at lunch. A physician's written permission will need to accompany any feeding/food request that does not align with the USDA requirements or is not indicated on a child's health care summary and/or individual child care plan.

ALLERGIES / DIET RESTRICTIONS / MODIFICATIONS

Before enrollment, children with **known allergies, special eating or nutritional needs** will have an individual child care program plan (ICCPP) developed with the parents and/or physician and maintained in the child's file. The plan is updated yearly or following any changes made to allergy-related information in the child's record. Children's allergy information will be available at all times including on site, when on field trips or during transportation.

The ICCPP must include but not be limited to a description of the allergy, specific triggers, avoidance techniques, symptoms of an allergic reaction, and procedures for responding to an allergic reaction, including medication, dosages, and a doctor's contact information.

Staff will be informed of any children having food allergies. The ICCPP will be posted in the lunchroom if the child eats lunch at school.

PETS

We do not have or allow pets at our program.

BEHAVIOR GUIDANCE

Our behavior guidance policy is designed to:

Ensure that each child is provided with a positive model of acceptable behavior.

- Ensure that each child is provided with a positive model of acceptable behavior.
- Be tailored to the developmental level of the children that the program is licensed to serve.
- Redirect children and groups away from problems toward constructive activity in order to reduce conflict.
- Teach children how to use acceptable alternatives to problem behavior in order to reduce conflict.
- Protect the safety of children and staff persons.
- Provide immediate and directly related consequences for a child's unacceptable behavior.

Young children need to be taught appropriate behaviors. Appropriate alternatives to corporal punishment vary as children grow and develop.

Preschoolers have begun to develop an understanding of rules and can understand "break time" to calm down (out of group activity by sending the child to a calming activity such as puzzles, sensory table). However, children will never be isolated from the group. The teacher will follow up by asking the child about his/her feelings and suggest appropriate behavior.

We promote positive behavior in the following ways:

1. The classrooms are designed to be developmentally appropriate.
2. There are sufficient toys and activities to stimulate children of all age groups we serve.
3. The staff model, encourage and praise positive behaviors by using clear and positive statements of behavior expectations.
4. The curriculum is designed to be stimulating and age appropriate for the children.
5. The staff appropriately supervises and interacts with the children.

SUPERVISION

Our goal is to provide a safe place for our preschoolers to learn and play. Teachers supervise our preschoolers by keeping them in sight most of the time. Supervision for short intervals by sound is permissible as long as teachers frequently check on children who are out of sight. Support staff and volunteers do not work alone with children.

PERSISTENT UNACCEPTABLE BEHAVIOR

Sacred Heart Catholic School will use the following procedure for behavior that is persistent and unacceptable that requires an increased amount of staff guidance and time. This behavior policy applies to all children in our care.

If a child is not behaving appropriately, we will use the following positive guidance techniques:

1. *Ignoring*: Ignoring a child who is trying to gain attention by acting out may be an appropriate response, unless it is a behavior that is unsafe.
2. *Redirection/Distraction*: This technique offers an alternative to a child such as suggesting a new activity, or different toy, encouraging independent play, or interacting with the child in a different way.
3. *Discussion*: Discussing with the child how their behavior is inappropriate and engaging with the child other words or methods that would suggest a more appropriate response.
4. *Reasonable Consequences*: The staff may implement reasonable consequences such as taking away a toy if the child used the toy to hit another child.
5. *Take a Break*: The child is separated from the group to calm down and will have access to something else to do. While the child will remain supervised, his or her classmates will not immediately influence him or her. This is different from the concept of “time out,” which is often seen as more punitive as the child is isolated and does nothing. In “take a break” the child will have access to other activities while he or she settles down. Once the negative behavior is under control, the child can be returned to the group.

When staff observes a persistent unacceptable behavior they will observe and record the behavior in writing.

If these positive guidance techniques are not effective, we may involve parents/guardians with the following progressive guidance techniques:

1. We will inform parents/guardians in writing what behaviors have been observed and what the staff has done to try to modify the behavior.
2. If the inappropriate behavior continues, the Director and teacher will meet with parents/guardians to develop a written action plan to correct the behavior. We will seek their input and agree on steps to attempt to modify the behavior. We may suggest involving outside resources to assist with the situation.

3. If the inappropriate behavior persists, the child will need to take a day or two of behavioral leave of absence on the next scheduled day/s of care. (Standard attendance rates apply during behavioral leaves.)
4. After returning to group care, if the child continues to act inappropriately, we may disenroll the child. We reserve the right to use these progressive guidance techniques at our discretion. It is our goal to work together for a positive outcome of behavior change. Circumstances may arise when we may immediately disenroll a child if his or her behavior creates a health or safety risk to themselves, other children, or the staff.
5. Sacred Heart Catholic School complies with federal and state civil rights laws.

PROHIBITED ACTIONS

Positive reinforcement is the best approach to discipline. The following actions are prohibited by or at the direction of a staff person:

1. *Subjection of a child to corporal punishment, which includes but is not limited to: Rough handling, shoving, hair pulling, ear pulling, shaking, slapping, kicking, biting, pinching, hitting, and spanking.*
2. *Subjection of a child to emotional stress, which includes but is not limited to: Name calling, ostracism, shaming, making derogatory remarks about a child or the child's family, and using language that threatens, humiliates or frightens the child.*
3. *Separation of a child from the group except within rule requirements.*
4. *Punishments for lapses in toileting.*
5. *Withholding food, light, warmth, clothing, or medical care as a punishment for unacceptable behavior.*
6. *The use of physical restraint other than to physically hold a child where containment is necessary to protect a child or others from harm.*
7. *The use of mechanical restraints, such as tying.*
8. *The use of a prone restraint on any person receiving services in a program.*

Exceptions to the prone restraint per DHS:

..."prohibit the use of prone restraints except in very specific brief instances. These exceptions include:

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

SEPARATION FROM THE GROUP

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

1. Less intrusive methods of guiding the child's behavior have been tried and were ineffective.
2. The child's behavior threatens the well-being of the child or other children in the program.

A child who requires separation from the group will:

1. Remain within an unenclosed part of the classroom where the child can be continuously seen and heard by a program staff person;

2. The child's return to the group will be contingent on the child's stopping or bringing under control the behavior that precipitated the separation;
3. The child will be returned to the group as soon as the behavior that precipitated the separated abates or stops.

SEPARATION REPORT

All separations from the group will be noted on a daily log that includes the following: The child's name, the staff person's name, time, date, information indicating what less-intrusive methods were used to guide the child's behavior, and how the child's behavior continued to threaten the well-being of the child or other children in our care.

If a child is separated from the group three or more times in one day, the child's parent will be notified and the parent notification will be indicated on the daily log. If a child is separated five times or more in one week or eight times or more in two weeks, the procedure outlined in the section titled "Persistent Unacceptable Behavior" will be followed.

If a child is suspended from his/her elementary school due to behavior or discipline issues, we also will not care for the child during the suspension period.

POSITIVE SUPPORTS RULE

The Positive Supports Rule (PSR – Minnesota Rules, chapter 9544) requires all DHS license holders to use person-centered principles and positive support strategies when providing services for individuals, including children, with developmental disabilities or related conditions.

OPEN DOOR POLICY / MN DEPARTMENT OF HUMAN SERVICES

Parents of enrolled children are welcome to visit our program at any time during hours of operation.

The telephone number of the Minnesota Department of Human Services (DHS), Division of Licensing is 651-431-6500.

REST POLICY (4 Pre-K Only)

The rest policy is consistent with the developmental level of the children enrolled in the program.

Pre-School: One afternoon nap/rest time after lunch.

- A child who has rested quietly for 30 minutes will not be required to remain on a cot.
- Rest will be provided in a quiet area that is physically separated from children who are engaged in an activity that will disrupt a napping or resting child.
- Cots will be placed so there are clear aisles and unimpeded access for both adults and children on at least one side of each piece of napping and resting equipment. Cots will be placed directly on the floor and must not be stacked when in use.
- Parents need to bring a child's blanket to the program. Blankets will be sent home to be washed weekly and/or when soiled or wet.
- Children's heads will be uncovered during sleep; staff will maintain sight/sound at all times.

PROGRAM GRIEVANCE PRECEDURE FOR PARENTS

If there is a grievance over the child care program or procedure, direct contact with the teacher or director should be made. The complaint should be made either verbally or in writing. If the individual making the complaint feels that it is being ignored or if the matter is of a serious nature, the complaint should be made to the director. Depending on the nature of the complaint, the director

will either handle it personally or refer it to the owner or their superior. The director will be responsible to see to it that the grievance is handled properly and expeditiously.

There may arise a situation where a parent/guardian has a personal grievance against a staff member. Due to the personal nature of such a grievance, the director will approach the staff member and give them a chance to explain their actions. If an unsatisfactory resolution of the problem occurs, the head teacher or director will provide in writing how the problem will be resolved. If the complaint is about the director and cannot be resolved internally the pastor will be notified. For complaints about the facilities or equipment, the director should be consulted. S(he) will see to it that it is repaired immediately.

Maltreatment of Minors Mandated Reporting

What to report

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

Who must report

Staff that work in a licensed facility, are a “mandated reporter” and are legally required (mandated) to report maltreatment. Staff cannot shift the responsibility of reporting to your supervisor or to anyone else at your licensed facility.

In addition, people who are not mandated reporters may voluntarily report maltreatment.

Where to report

- If you know or suspect that a child is in immediate danger, call 9-1-1.
- Reports concerning suspected maltreatment of children, or other violations of Minnesota Statutes or Rules, in facilities licensed by the Minnesota Department of Human Services, should be made to the Licensing Division’s Central Intake line at 651-431-6600.
- Incidents of suspected maltreatment of children occurring within a family, in the community, at a family child care program, or in a child foster care home, should be reported to the local county social services agency at or local law enforcement in Robbinsdale.

When to report

Mandated reporters must make a report to one of the agencies listed above immediately (as soon as possible but no longer than 24 hours).

Information to report

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

Failure to report

A mandated reporter who knows or has reason to believe a child is or has been maltreated and fails to report is guilty of a misdemeanor.

In addition, a mandated reporter who fails to report serious or recurring maltreatment may be disqualified from

a position allowing direct contact with, or access to, persons receiving services from programs, organizations, and/or agencies that are required to have individuals complete a background study by the Department of Human Services as listed in Minnesota Statutes, section 245C.03.

Retaliation prohibited

An employer of any mandated reporter is prohibited from retaliating against (getting back at): an employee for making a report in good faith; or a child who is the subject of the report.

If an employer retaliates against an employee, the employer may be liable for damages and/or penalties.

Staff training

The license holder must train all mandated reporters on their reporting responsibilities, according to the training requirements in the statutes and rules governing the licensed program. The license holder must document the provision of this training in individual personnel records, monitor implementation by staff, and ensure that the policy is readily accessible to staff, as specified under Minnesota Statutes, section 245A.04, subdivision 14.

Provide policy to parents

For licensed child care centers, the mandated reporting policy must be provided to parents of all children at the time of enrollment and must be available upon request. The definitions section (p. 3-6) is optional to provide to parents. Parents may request the definitions section.

Internal review

When the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made, the facility must complete an internal review within 30 calendar days and take corrective action, if necessary, to protect the health and safety of children in care.

- The internal review must include an evaluation of whether: related policies and procedures were followed; the policies and procedures were adequate; there is a need for additional staff training; the reported event is similar to past events with the children or the services involved; and there is a need for corrective action by the license holder to protect the health and safety of children in care.

Primary and secondary person or position to ensure reviews completed

The internal review will be completed by the principal. If this individual is involved in the alleged or suspected maltreatment, the business administrator or pastor will be responsible for completing the internal review.

Documentation of internal review

The facility must document completion of the internal review and make internal reviews accessible to the commissioner immediately upon the commissioner's request.

Corrective action plan

Based on the results of the internal review, the license holder must develop, document, and implement a corrective action plan to correct any current lapses and prevent future lapses in performance by individuals or the license holder.

