Fraser Promise

Fraser is committed to providing you the best service possible. We will strive to assure that:

1. We will listen carefully to you and clearly explain our services and recommendations.
2. We will seamlessly coordinate your services and treat you with respect and courtesy.
3. We will actively engage you in your or your family member’s services.
4. We will respect your needs and work diligently to meet or exceed your expectations.
5. Our information and services will be culturally responsive.
6. We will always welcome feedback.

Thank you for your trust in Fraser.

Diane S. Cross
Fraser President and Chief Executive Officer
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About Fraser

Fraser serves children and adults with more than 60 types of mental and physical disabilities, and is Minnesota’s largest and most experienced provider of autism services. Fraser School provides childcare and early childhood education for young children with typical needs and special needs. Fraser offers an array of housing and in-home support options for people with disabilities in the Twin Cities area. Our programs are nationally recognized for their high quality, innovation, and individualized, family-centered approach.

Our Mission

To make a meaningful and lasting difference in the lives of children, adults, and families with special needs. We accomplish this by providing education, healthcare, and housing services.

Our Vision

A world where all people have equal opportunity and choice to realize their dreams to live, work, learn and play as members of our community.

Our Qualifications

Fraser School is licensed by the State of Minnesota's Department of Human Services and has been awarded the highest rating, four stars, by Parent Aware, Minnesota’s Quality Rating System. Fraser School is also accredited through the National Early Childhood Program Accreditation (NECPA) Council and Commission. We are a nationally recognized, non-profit program that maintains an innovative, inclusive environment for children of all needs and their families.

Fraser School can be contacted by:

Street Address: 2400 West 64th Street
Minneapolis, MN 55423

General Phone: 612-861-1688
Website: www.fraser.org

Families of enrolled children are invited to visit at any time. However, we ask that you sign in at the front office before taking any visitors around the building.
Fraser Management

Fraser is governed by a volunteer Board of Directors representing a variety of backgrounds and experiences including: business executives, parents, medical professionals, and more. The Board is responsible for strategic planning, monitoring the organization, establishing budget and policy regulations, and representing the needs and interests of various Fraser constituencies.

In addition, Fraser is led by its Chief Executive Officer and President, Diane S. Cross. Unlike the Board members who are volunteers, the Chief Executive Officer is a paid employee. It is her responsibility to develop and maintain the organization within the budgetary and policy framework set by the board of directors.

Day-to-day Fraser operations are managed by a team of executives and directors responsible for oversight of their respective areas, including (but not limited to): Vice President and Chief Financial Officer; Vice President and Chief Operating Officer; Vice President of Education, Housing, and Community Services; Director of Fraser School; and Senior Director of Pediatric Therapy.

Fraser School is licensed by:
Minnesota Department of Human Services
444 Lafayette Road
St. Paul, MN 55155
651-431-6500

Fraser School is accredited by:
National Early Childhood Program Accreditation
PO Box 2948
Merrifield, VA 22116
855-706-3272

Health Consultant:
Health Consultants for Child Care Inc
PO Box 326
Lakeland, MN 55043
952-472-3915

Fraser is insured through Nonprofit Insurance Trust.
Welcome to Fraser School!

Fraser School is a comprehensive early childhood education center licensed by the state of Minnesota’s Department of Human Services and accredited by the National Early Childhood Program Accreditation Council and Commission. We are licensed for 192 children from 6 weeks to 6 years of age. Fraser School is open year-round, Monday through Friday, from 7:00 AM to 6:00 PM, with the exception of holidays, staff development days, and conference days. Please check the annual school calendar to see specific dates when the school is closed.

Our inclusive classrooms welcome children who have typical needs or special needs. We recognize that children with special needs and those with typical needs benefit immensely from shared growth and learning experiences. By playing together, children learn about differences in abilities and talents, appearances, languages, and background experiences that create the rich diversity of our society. Inclusion provides a challenging, enlightening, and motivating environment for all children. At Fraser School, we recognize the unique abilities of each child.

Fraser School’s developmental philosophy is based upon the work of social scientist Lev Vygotsky. He theorized that children learn best through social interactions with others who are more knowledgeable in a particular skill or topic. Through these interactions, children can achieve and understand more than they could on their own. Both children and adults can build upon a child’s current knowledge base. Vygotsky labeled this phenomenon “scaffolding.” With children, these moments of scaffolding occur spontaneously as children interact together. With adults, this scaffolding is more deliberate and intentional.

Fraser School encourages these social interactions through a play-based environment. Play is a foundation for development and is the primary tool children use to learn. Our highly qualified staff members utilize The Creative Curriculum for Infants, Toddlers, and Twos® and The Creative Curriculum for Preschool® as a basis for their teaching. They use the classroom environment and a balance of activities to guide children’s growth in the four major areas of development (cognitive, physical, language, and social-emotional), as well as in the academic content areas of literacy, mathematics, science, social studies, technology, and the arts (including scheduled music sessions). The teachers individualize their plans to meet the developmental stages of each child in their group. They also support and encourage each child in order to build his/her self-esteem, a building block for future success.

Twice per year, the teaching staff members formally assess each child to monitor his/her growth and development. Fraser School uses the Teaching Strategies Gold® online assessment system. This system is aligned with The Creative Curriculum series and uses the same developmental objectives. The teaching staff use authentic observations and informal evaluations to gauge each child’s progress on each developmental objective in the assessment tool. The staff complete an online assessment for each child twice per year to document his/her progress over time. The objectives are categorized in the four major areas of development which are social-emotional, physical, language, and cognitive. There are also developmental goals in the academic areas of literacy, mathematics, science and
technology, social studies, and the arts. Furthermore, there are special sections for the progress of English language learners and an optional physical skills section.

Also twice per year, staff offer formal parent/teacher conferences to share the child’s developmental progress with each child’s family. The teaching staff create a conference summary form which highlights some of the goals that the child has met in each area of development as well as summarizes the goals that the child may meet next. We encourage all parents/guardians to participate in these conferences. If any family members desire separate conferences, please just ask the teacher and these accommodations can be made. If any family would like to use an interpreter for the conference, please let your child’s teacher or the director know ahead of time so that we can schedule someone.

In addition to these two conferences, teachers and parents can meet together at any time during the year to discuss a child and his/her education and care. In fact, we believe that family involvement is critical for children to achieve the positive long-term effects of Fraser services and we highly encourage all families to be involved in their child’s education in whatever capacity they feel most comfortable. Parents/guardians of enrolled children are welcome to visit at any time.

Fraser encourages open and frequent communication between staff and families. Each classroom has a voice mail and an email address that are published in this handbook and in the monthly classroom newsletters. Teachers check their voice mail and email daily, and respond to messages within one business day.

All licensed child care programs must create and annually review a child care program plan. This plan is available on both family communication bulletin boards. One is located in the front lobby of the school building; the other is located at the side entrance to the building. Parents can view these documents at their convenience.

Thank you for choosing Fraser. We welcome you and the opportunity to work collaboratively with you to help your child reach his or her fullest potential.

**Referrals to Public School Districts**

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 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 the parent with the referral to Help Me Grow or partner with them in the referral process.

All children in the state of Minnesota are required to complete an early childhood screening before the first day of kindergarten (preferably at 36 months). These must be completed through your local
school district. Fraser school provides a developmental assessment twice per year but this is not an early childhood screening. At the screening, your child’s vision, hearing, speech, and general health will be evaluated. In addition, your child will be assessed using various norm-referenced tests. If you have concerns about your child’s vision, hearing, speech, or general health, you can also consult your child’s primary health caregiver. If you have concerns about your child’s speech, we could also make an internal referral to a Fraser-employed speech therapist.

### Individual Child Care Program Plans

It is required by DHS licensing that Fraser School staff create and follow an Individual Child Care Program Plan (ICCPP) for all children with a diagnosed special need.

An ICCPP for children with developmental delays or mental health diagnoses sets goals for the children to practice in the classroom setting. Goals may be safety, social, or educational in nature. To develop a child’s ICCPP, it is extremely helpful for families to share their child’s school district Individualized Education Plan (IEP), Individualized Family Services’ Plan (IFSP), or Individual Interagency Intervention Plan (IIIP) with Fraser School. If shared, the staff will utilize some of the appropriate goals from the school district plan to Fraser School’s Individual Child Care Program Plan. This will provide consistency and reinforcement for the child’s educational goals. If a child does not have a school district plan or the family chooses not to share it, Fraser School staff will create individualized goals based upon observation by the Fraser School Inclusion Coordinator and the classroom teaching staff. Once the ICCPP has been drafted, Fraser School staff will share the document with the family to gain input and feedback. Families will be asked to sign the final copy of the ICCPP. In addition, a licensed psychologist from Fraser clinical team will review and sign the document. This document will be reviewed at least annually. It is our goal to create one of these plans within 60 days of a child’s enrollment or new diagnosis.

An Individual Child Care Program Plan for children with medical issues or allergies outlines procedures for staff to follow in the event of a medical emergency. The medical plans are developed in conjunction with the child’s health care provider. If a child has a known medical need that could result in emergency intervention or the need for emergency medications, an ICCPP and all emergency medications must be in place prior to the child’s first day of school. If a currently enrolled child is determined to have a medical need that could result in an emergency, families are expected to immediately contact the Health Services Coordinator.

For children that do not have a known diagnosis but are demonstrating persistent unacceptable behavior that requires an increased amount of staff guidance and time, we may need to create an Individualized Behavior Plan. If a child receives five behavior incident report forms within one week or eight behavior incident reports within two weeks, Fraser School’s Inclusion Coordinator will call a team meeting to discuss the next steps. The meeting will include the parents, as well as, the classroom teacher. Together, we can come up with strategies to respond to the behavior consistently. Our goal
would be to eventually extinguish or replace the challenging behavior with a more positive one. Individualized Behavior Plans will be reviewed at least annually and will be allowed to lapse once the behaviors are no longer persistent.

Withdrawal

If parents decide to terminate enrollment, a notice of 2 weeks must be provided by email or in writing to the intake/billing coordinator. Failure to provide written notice 2 weeks prior to the withdrawal will result in continued charges of established fees. If the child has attended the school less than 30 working days, you may discharge immediately by informing the intake/billing coordinator by email or in writing.

Usually, withdrawal of a child is due to reasons such as family relocation, work schedule changes, etc. However, we recognize that not every situation is appropriate for every child. If Fraser School is an unsatisfactory fit for a child, we will work with the parents/guardians in order to determine the cause and make the appropriate modifications to accommodate the child’s needs. If a workable solution cannot be reached, parents may choose to withdraw from the program.

School Closings

Decisions about school closings due to weather conditions are made by the Director of Fraser School, in conjunction with Fraser Vice President of Education, Housing, and Community Services and Fraser Chief Operating Officer, and announced on local media outlets including WCCO, KSTP, KMSP, and KARE 11. It will also be announced on the Fraser website, Facebook page and via Twitter. At this time, Fraser School does not have the capability to push a notice to all families via email, phone, and/or text. Please check the news outlets and Fraser social media to see if Fraser School is closed.

If early dismissal is required due to weather conditions or school emergency, parent/guardians or emergency contacts will be notified by phone for early pick up. If a parent/guardian is unable to pick up a child, it is the parent/guardian’s responsibility to make the appropriate arrangements and notify Fraser of those arrangements. If parent/guardian(s) fail to pick up their child at the established time:

1. Fraser will attempt to contact parent/guardian(s).
2. Fraser will attempt to contact person(s) listed as emergency contacts.
3. If all attempts fail, the local police department and county services will be notified.
EARLY DROP OFF / LATE PICK UP POLICY

Fraser School is very strict about parents dropping off and picking up children within your scheduled times because of the state’s Department of Human Services’ licensing regulations. We are mandated to keep certain staff to student ratios at all times. Daily staffing patterns are based on children’s schedules, so if a child comes early or stays late, ratios may be skewed.

Each family is granted up to 45 minutes of grace periods per child each school year for occasionally being late to pick up a child. The grace periods can only be used between 11:30 AM and 6:00 PM. These can be used due to an unavoidable emergency, unpredicted weather, unpredictable traffic, or other extenuating circumstances. The director monitors the accumulated use of these grace periods through the collection of Fraser School Extra Fees Forms. Once all of a child’s grace periods have been used, the family will be billed for picking up late at the rate of $1.00 per minute for the first 15 minutes and $5.00 per minute for the 16th minute and beyond. Please note: Fraser School closes at 6:00 PM. Families may not use grace periods for picking up after 6:00 PM. Families will be assessed the late pick-up fees immediately.

There are no grace periods for early drop off. If a child is dropped off before their scheduled time the parent or guardian will be billed at the same rate as if they are picking up late.

If a family has a pattern of late pick-ups and/or early drop-offs, their child’s schedule may be limited or the child may be discharged. The director will notify the family directly if late pick-ups and/or early drop-offs are becoming an issue.

Fraser School’s staffing is also not designed to provide one to one care for a sick child. If a parent/guardian or another authorized contact fails to pick up a child that has met our exclusion criteria within one hour after the initial contact from the Fraser staff, the late pick-up policy will apply.

Schedule Changes

To request a permanent schedule change, a parent/guardian must email or call the intake/billing coordinator at least two weeks in advance. The ability to accommodate schedule changes is related to staff/child ratios as outlined by state licensing. Within your child’s first 30 days, you may change his/her schedule for free. After that, there is a $50 fee for schedule changes. Schedule changes will only take effect on the first day of the month, reducing the need for Fraser accounting to re-issue tuition statements. If a family needs additional care starting mid-month, they can request extra hours until a schedule change can occur.

• All children must be scheduled for 2 days per week (T/Th only), 3 days per week (MWF only), or 5 days per week (M-F).
• The prekindergarten program has a part day schedule of 9:00 AM – 12:30 PM.
• The preschool program runs from 9:00 – 11:30 AM or from 1:00 – 3:30 PM.
• The infant and toddler programs run from 9:00 – 11:30 AM.
• No toddler can be scheduled into an afternoon only slot because all toddler classrooms nap and this disrupts the napping room.
• Preschool or prekindergarten children can be scheduled into an afternoon only slot if the child DOES NOT nap. If the child needs a nap, they cannot be enrolled in an afternoon preschool slot as this disrupts the napping room. Three of the preschool classrooms and all three prekindergarten classrooms do not nap and are available as afternoon only options.

All ages of children can be scheduled for extended hours throughout the day.

Extended Day Services (7:00-9:00 AM, 11:30 AM-3:30 PM, and 3:30–6:00 PM):

The extended care program provides child care for children outside their designated program time. Services include time for breakfast and lunch, nap, and structured activities. (Lunches are provided by parents—see Meals and Snacks.) Rooms are opened and closed based on the number of children present at any given hour. Therefore, children who are in extended day rooms may transition to different rooms throughout the extended care hours. As the number of children increase in the morning, additional rooms are opened and children are shifted according to their schedules and main room assignments. After 3:30, as the number of children decrease, children are shifted and rooms are shut down. If a classroom combines with another room, notices will be posted on the doors. Please note that children are only combined with other children of their same age group (e.g. toddler classrooms only combine with other toddler classrooms) until 5:30 PM when all preschoolers and pre-kindergarteners may be combined. Infants are never combined with other age groups.

Extra Hours (pre-arranged additional child care hours)

Extra hours, for children currently enrolled at Fraser School, are available when space and staffing permits and must be pre-arranged. Reservations must be made at least two business days in advance by calling (612) 798-8332 or by emailing extrahours@fraser.org. Hours requested are not guaranteed until a Fraser School Coordinator contacts you with approval. If you drop your child off early or pick them up late without prior approval for extra hours, you will be billed the early drop off / late pick up fee according to the current rate sheet. You can request extra hours by the half hour. Extra hours will be billed on an hourly basis according to the current rates and will appear on a monthly statement after the hours are utilized.
Restricted Services

Families that are behind on their monthly tuition or copayments, have a payment agreement that they are not following, are delinquent in turning in their child’s medical records, or have not complied with a request for new emergency medication will have restricted eligibility of services. If your family is not in compliance, you cannot:

- Request extra hours
- Change your child’s permanent schedule (unless it is to decrease their child’s hours)
- Enroll another family member

Arrival

*Children that are twelve years old and younger must be with an adult at all times while in the building.* Parents/guardians are requested to keep their children within sight and sound when arriving and departing Fraser School. We strongly recommend that adults hold children’s hands while walking through the parking lot. For the child’s safety, we ask parents to be certain that a staff person is aware of the child’s arrival before leaving. All groups also have a sign-in procedure. Please sign in and out according to this procedure. Staff members rely on the sign-in and out procedures to accurately track how many children are in their group and the names of these children. This is the primary way that staff members are ensured that children are supervised and accounted for at all times. **Note to parents:** If you are going to be away from your normal day time phone number, be sure to leave a phone number where you can be reached and an alternate contact in case of an emergency.

Departure and Persons Authorized to Pick Up Children

When picking up a child, parents should be sure that staff is aware that a child is leaving. All children should also be signed out according to classroom procedure. If parents/guardians are unable to pick up a child, it is the parent/guardian’s responsibility to make the appropriate arrangements and to notify Fraser of those arrangements. (See **School Closings** for additional information.)

The Minnesota Department of Human Services requires that parents/guardians provide, in writing, the names and contact information of at least two local people that are authorized to pick up their child. These people will be contacted to pick up a child in case of an emergency school closing or in case a child meets exclusion criteria and school personnel are unable to contact parents/guardians within a reasonable amount of time. These authorized contacts may be provided limited medical information such as illness symptoms or daily care issues.
Written authorizations are required to release children to anyone other than their parents/guardians. All staff members are instructed to ask for picture identification from individuals they do not know or those without access codes to the building. Copies of legal documents must be provided before any staff person can actively prevent non-custodial parents/guardians from picking up their children. If a parent and/or authorized person is incapacitated due to drug or alcohol use, Fraser School will not allow the child to be taken and will call the police and parents/guardians or other emergency contacts.

Departure times are transition times for children in the school. Some children go to other classrooms for nap or extended day programs. Transitions are difficult for many of our students, and several adults lingering to visit in classrooms can escalate the anxiety level of some children. If you would like to visit with another parent during these times, please move away from the classrooms and lockers.

Fraser School staff members teach children that “only adults open doors and gates at Fraser School”. Please help us by enforcing this with your children at all times. We also encourage children to walk in the school for safety.

THE GYM AND THE PLAYGROUND ARE FOR CLASSROOM USE ONLY.

Door Access

For security purposes, a punch-code door access system is in place at Fraser School. Upon enrollment, each family is issued the code to enter the school. The code will be changed at least annually and the new code will be handed out to parents by classroom teachers before the change occurs. Individuals without the code may access the building and administrative offices through the main entrance on the south. To enter the school, the receptionist may ask for picture identification. (We ask that those with the code help keep the building secure by not holding the door open for others behind them).

Please do not share the code with your children or allow them to open the doors.

Please note: the east side door has an automatic locking system and locks at 6 p.m. If you need to enter the building after 6 p.m. to pick up your child, you will need to enter through the front entrance. There is not any restriction to leaving from the side door after 6 p.m., it will lock behind you.

Absences

When a child is absent, parents/guardians are strongly encouraged to call the front office (612) 861-1688 or email school.attendance@fraser.org as soon as possible and give the child’s name, classroom, and reason for absence. Please give the diagnosis if your child is ill as we are mandated
to report communicable diseases to other families, our health consultant, and, possibly, to The Minnesota Department of Public Health. If a child will not be attending the program because of a scheduled appointment, vacation or other planned absence, parents should notify the classroom staff or office in advance when possible.

Fraser School does not decrease a family’s tuition due to absences or vacations. Families are billed for their child’s scheduled days, whether or not the child attends. Families are not billed for holidays and other days that Fraser School is closed.

Transportation

In most instances, parents/guardians are responsible for transporting their child to and from Fraser School. In accordance with state guidelines, Fraser strongly advocates the consistent use of age appropriate child safety restraints whenever transporting a child.

*Children that are 7 years old or younger should NEVER be left unattended in vehicles as all Fraser staff members are mandated reporters and will report such incidences to the local police and/or child protection.*

Some families are able to utilize either medical transportation and/or public school transportation if your child qualifies. Fraser School staff will load a child into a van or bus, but will not buckle the child into a safety seat. We can observe the driver or other person buckling the child, if desired. Fraser School staff can also get the child off the van or bus and take him/her to their scheduled classroom. Fraser School does not arrange for these rides, nor will we call to let the transportation companies know if a child is absent. It is the family’s responsibility to arrange the rides, communicate to the company regarding absences, and to inform Fraser School of the schedules.

Medical transports and public school buses drop off and pick up children along the east side of the building by the yellow curb. Please do not park along this area.

Please do not park where no parking signs are posted – the east entrance gets very busy and congested at drop off and pick up times. Fraser is not responsible for any fender-benders that occur there.

Children’s Clothing and Personal Items

It is recommended that children wear clothing that is comfortable and easy to play in. Tennis shoes are recommended for safety. We paint, use sensory materials, play outside, etc. We do have the children wear paint shirts during painting and messy activities; however, clothing can still get soiled. Hoodies or jackets with string ties can be a hazard and should be avoided. No hoodies with or without strings are allowed during sleep in the infant classroom. Be aware of large, decorative buttons on children’s clothing if the child is under 3. These can be pulled off and cause a choking hazard.
Outdoor Activities

All classrooms go outside each day unless the temperature or air quality does not allow it. It is important that children have the opportunity for gross motor activities to aid in their physical development and to reduce the risk of childhood obesity. If the weather does not permit the children to go outside, Fraser School has a large gross motor gym that can be used instead. Each classroom is assigned a gross motor time of at least 20 minutes in the morning, 20 minutes in the afternoon (for non-napping classrooms), and 20 minutes during the extended afternoon time.

- **Air Quality:** If the air quality index is between 100 and 150, classroom staff will limit outdoor activities to no more than 20 minutes.

- **Cold Temperatures:** If the actual outside air temperature is below 10° Fahrenheit, or the wind-chill brings it below 10° Fahrenheit, all children will remain inside.

- **Warm temperatures:** If the actual outside air temperature or the heat index is between 85° and 100° Fahrenheit, classroom staff will limit time outside to no more than 20 minutes. If the actual outside air temperature or the heat index is above 100° Fahrenheit, all children will remain inside.

Parents should send appropriate clothing for the weather, keeping in mind that the playground will be wet and sloppy in the spring months. All loose clothing items such as hats, boots, mittens, snow pants, coats, etc., should be labeled with the child’s full name. A lost and found box is located at the east entrance and is emptied at the end of each month. Fraser is not responsible for lost or damaged personal items.

Upon enrollment and annually thereafter, parents are asked to authorize the use of sunscreen to protect children during outdoor play. Fraser will provide the lotion unless parents send in a specific sunscreen which must be labeled with the child’s first and last name. Sunscreen is applied at least 30 minutes before going outside in order to protect skin from harmful rays. If your child’s class is on the playground when you drop them off, staff will apply sunscreen upon arrival, but it will not be effective immediately. It is highly recommended that parents apply sunscreen before coming to school if the class may be outside. Fraser staff may apply sunscreen to any exposed skin on the infants six months and younger but will also keep babies in the shade and minimize sun exposure.

Families can also bring insect repellant if they would like. Parents must bring the insect repellant, labeled with the child’s first and last name, and sign a permission form for us to administer it. Please make sure the insect repellant has no more than 30% deet. If the repellant is in aerosol form, we will spray it on the child’s clothing and exposed skin when first going outside. We will not spray aerosol insect repellant indoors because of ventilation. We will apply insect repellant to children’s faces by spraying insect repellant upon a staff member’s gloved hands and spreading carefully on the child’s face. It is advised that children be bathed later in the day to remove the repellant and the child’s clothing be washed before wearing again.
There are numerous riding toys on the playground, including tricycles. If desired, families may furnish bike helmets for their child to wear while riding tricycles. Please bring the helmet, labeled with the child’s first and last name, to the teacher. We will ensure that the child wears the helmet while playing on riding toys.

Toileting and Diapering Procedures

Children should be dropped off at school in clean diapers. Infant’s diapers are changed whenever necessary. They are checked two hours after the last diaper change indicated on the parent portion of the daily information sheet and a minimum of every two hours thereafter. Toddler’s and older children’s diapers are checked at scheduled toileting times and are changed whenever necessary. All infant and toddler diaper changes are recorded either on a daily information report that is sent home or electronically sent to parents throughout the day.

Parents/guardians provide diapers and diaper creams, if necessary. Fraser School provides generic diaper wipes. Families can bring a specific brand of diaper wipes if they would rather the school staff use them. All items sent from home need to be labeled with the child’s first and last name.

Cloth diapers may be used at Fraser School if parents supply enough diapers, absorbent liners, and water proof diaper covers for the entire day. Families must also supply a diaper pail with a lid and plastic bags to line the diaper pail. The diaper pail must be foot-operated. Families must take soiled diapers and diaper covers home daily. Absorbent liners and diaper covers must be replaced at each diaper change. Health Department regulations do not allow staff to rinse the diapers.

As they develop, young children become aware of their desire to toilet train. Parents and teachers should discuss the routine for toilet training as the child becomes ready for this milestone. Children who are in the process of toilet training are encouraged to sit on the toilet at each diaper change. They may also sit on the toilet at regular intervals throughout the day. Families of all children that are in diapers or toilet training receive daily sheets or electronic communications which record diaper changes and toilet training progress. Children who are independent in toileting have designated toileting times after breakfast, mid-morning, lunch, mid-afternoon, and late day. All classrooms (except the infant classroom) have adjoining bathrooms for additional toileting times, as needed.

Meals and Snacks

Fraser School employs a Food and Nutrition Assistant Coordinator that is a certified Food Protection Manager with the state of Minnesota. She works with the Health Services Coordinator to ensure that Fraser School maintains compliance with the Minnesota Administrative Rules Chapter 9503 (Rule 3) and 7 CFR 226.20 Code of Federal Regulations Title 7: Agriculture and the Bloomington Department.
of Environmental Health in regards to safe and healthy food service. She also collaborates with the Health Services Coordinator to create and distribute the monthly snack menu.

While Fraser School provides a morning and afternoon snack, parents/guardians are responsible for sending food from home for breakfast and lunch. If a family forgets a child’s lunch, it is the expectation that someone brings a lunch for the child. In case of emergency, Fraser School offers a lunch replacement for $5.00. Fraser Food and Nutrition Assistant Coordinator will serve the child a balanced meal representing each food group. Snacks are served mid-morning and mid-afternoon. Snacks include a serving size (determined by age of the child) of food from two different food groups. They include a variety of healthy items such as fruit, vegetables, cheese, crackers, and milk. While children are served the required amount, children are able to choose how much they want to eat and may be served more, if they desire.

A monthly snack menu is available at the end of each month for the upcoming month to give parents the opportunity to send in an alternative snack for any given day if they wish. The alternate snack item needs to be in the same food group as the substituted food.

**IMPORTANT:** 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 physician and maintained in the child’s file. The plan is updated at least annually 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 and when on field trips.

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. This information will be posted where the children eat (in the classroom) and in the food preparation area (the kitchen). Each staff person who is responsible for carrying out an ICCPP for a child with a known allergy reviews and follows the plan. Changes will also be reviewed with staff. Documentation of each staff person’s review of the ICCPP will be kept on site. The program provides any additional staff training required by ICCPP.

The program will contact the child’s parent or legal guardian as soon as possible of any instance of exposure or allergic reaction that requires medication or medical intervention. Emergency medical services are always called when epinephrine is administered to a child in the center’s care.

Some classrooms in Fraser School are nut-free. In these classrooms, families are expected to refrain from bringing any food item that contains any nuts into the classroom. If a child has a food that contains a nut or nut product, the food with the allergen will be discarded and an alternative food will be served to the child. A meal fee will be added to a subsequent monthly bill.

There are a variety of foods that are choking hazards. These foods should never be served to infants or toddlers. Older children should be watched carefully when eating. These foods include: hot dogs,
whole grapes, hard candy, nuts/seeds, popcorn, raw peas and carrots, marshmallows, or thick spreads on bread. For children under 12 months, NO peanut butter, chocolate or honey should be served.

Guidelines for **infant** meals and snacks:

1. Families should provide enough bottles or sippy cups for the infant’s daily use. The public health department does not allow Fraser School staff to wash the bottles/cups for re-use.

2. All breast milk and formula must come already prepared and ready to serve. Fraser staff cannot make formula or pour breast milk from bags into bottles.

3. **No glass containers or bottles are allowed in the school.** Jarred baby food needs to be transferred to a non-glass container. When glass shatters it is nearly impossible to find all the small pieces and this causes a risk to the safety of the infants in the classroom.

4. No food, breast milk or formula can be left at the school overnight. All unused bottles will be sent home. Partially used food containers will be wiped clean, not rinsed, and sent home.

5. Families are required to update the classroom staff as new foods are introduced. An Infant Feeding Consent Form will be presented to document that new foods have been introduced and the classroom staff are allowed to serve them during the child’s school day.

6. Families can also bring in solid foods when their children are ready. All food must be taken home at the end of each day or will be discarded.

7. When infants graduate to solid foods, families must bring their child’s lunch daily. Families can choose to provide their own snacks or have the children eat the snack provided by Fraser School. Each family will be given a list of snack items that they can choose for their child to eat. It will be expected that each child be given two snack items from two different food groups. Milk is only included at a snack time if it is counted as one food group. If milk is not used as a food group, then the child will be offered water.

8. When the infant turns one year old, the family can choose to continue bringing formula, milk, or breast milk, or they can choose to use the Fraser-provided whole milk as a component of lunch. Bottles of whole milk will need to be sent with the child from home.

9. Once the child is eating solid foods, please follow the guidelines for toddler and preschool meals and snacks below.

Guidelines for **toddler, preschool, and prekindergarten** meals and snacks:

1. **Children’s lunch boxes and each container within the lunch box must be labeled with the child’s first and last name.**

2. Children’s lunches should either (a) not need refrigeration; or (b) be packed with a cold pack/zippered bag of ice. Lunches will be heated in the microwave as necessary. **All foods must only**
require heating for no more than two minutes. Frozen entrees that require more than two minutes of heating should not be sent. Food items that must be prepared, such as Easy Mac & Cheese or Ramen noodles, should not be sent.

3. Reusable food containers will be emptied and sent home daily for washing. **No glass containers are allowed in the classrooms due to the danger of breakage.** If possible, classroom staff will empty the contents of a plastic container onto a plate for heating. For things such as soup, which cannot be put onto a plate, consider using a thermos so heating will be unnecessary.

4. Cups, bowls, and utensils are provided by Fraser. In our effort to be environmentally conscious, Fraser uses reusable dishware as much as possible.

5. Families may supply plastic “sippy cups” labeled with the child’s first and last name. A new sippy cup must be used at each meal/snack time. Sippy cups will be sent home daily for washing.

6. Fraser uses single-use cups for water throughout the day. Families cannot bring water bottles for their children to re-use throughout the day.

7. The school provides reduced fat 1% milk or whole milk for lunch and, if listed on the menu, as a component for snack. All infants and young toddlers are provided whole milk; children older than 2 years are provided 1% milk unless the family requests otherwise. Water is available and offered to children throughout the day. Children requiring specific beverages due to dietary needs should bring a day’s supply in the original container or an insulated thermos. Containers must be labeled with the child’s first and last name and the date. Unused beverages (other than breast milk) will be discarded at the last serving and the container sent home to be washed.

8. Parents should not send soda pop for children’s lunches.

9. Individual servings of food must be sent in daily. Any uneaten food from an opened container will be discarded at the last serving of the day.

10. Children with special dietary needs are required to bring foods and feeding supplies on a daily basis. Due to public health regulations, food from home cannot be stored overnight and special feeding supplies cannot be washed at school.

11. If you wish to bring in a treat or a snack for the class, please check with your child’s teacher first. Due to public health and licensing regulations, we cannot allow any homemade food items to be served to classmates. Any food brought into the classroom must be store bought and have the original label with a list of ingredients.

12. Fraser School does not provide breakfast; however, breakfast can be sent from home, provided by families, but needs to be served before 8 a.m. Children need to arrive before 8 a.m. to initiate breakfast.
Even though families pack their own lunch, Fraser School is held responsible for the contents of that lunch according to licensing with the Department of Human Services. These are the applicable regulations for a well-balanced lunch:

- Each child’s lunch must provide 1/3 of the child’s daily nutritional needs as specified by the United States Department of Agriculture (USDA).

- Each child must have an item that is considered a protein. Proteins can include lean meat, tofu, soy products, cheese, cooked egg, cooked dry beans or peas, peanut butter or soy butter. The infant and toddler classrooms do not allow nuts or nut products due to allergies; however, preschool and prekindergarten classrooms DO allow nuts and nut products.

- Each child must have both a fruit and vegetable. Fresh fruits or vegetables are best but easy to pack items include individual fruit cups packed in water or individual cups of applesauce.

- Each child must have an item that is a grain, preferably a whole grain. Examples include whole grain bread, tortillas, or crackers.

- Each child must be served pasteurized fluid milk that is fortified with vitamins A and D. Fraser School provides this milk. The Department of Human Services requires that we serve (not offer) children fluid milk at lunch unless the child either (a) has a doctor’s note stating that the child is allergic to milk or (b) the parent provides an acceptable substitute. Some acceptable substitutes for fluid cow's milk include (a) breast milk; (b) goat’s milk; (c) lactose-reduced milk; (d) some soy milks (e.g. 8th Continent Soy Milk, Kirkland Signature Organic Plain Soymilk, Pacific Natural Ultra Soymilk, PEARL Organic Soymilk Smart, Silk Original Soymilk, Sunrich Naturals Soymilk, Westsoy Organic Plus); and/or (e) acidified milk (acidophilus). Please note that almond milk, coconut milk, rice milk, and many other types of non-dairy milk are deemed “non-creditable.” Even if your child brings another source of dairy, he/she will be served fluid milk. The children are not forced to drink the milk.

For children that do not have an item from each food group, Fraser School will provide a supplement for that food group. This supplement may be subject to an additional charge.

**Napping**

Fraser School assigns a crib for each enrolled infant. If infants are scheduled part-time, they may share a crib with a baby with an alternating schedule. All bedding is changed and the crib mattress is disinfected between different children’s use. All cribs conform to the Code of Federal Regulations and have routine crib inspections. All infants are placed on their backs in the crib to sleep. If a child rolls onto his/her stomach, we will turn him/her back unless he/she is over 6 months old or we have a signed form from the parents stating that the child rolls over regularly. Infants are placed directly on a firm mattress with a fitted crib sheet that fits snugly and cannot be dislodged by pulling. Nothing can be placed in the crib with an infant besides a dry pacifier. Infants cannot have a cord attaching the pacifier to their clothing. In addition, infants will not be put to sleep wearing a necklace, earrings,
or any other jewelry. Parents can send sleeveless sleep sacks, if desired, to keep the baby warm. Fraser School staff members will not swaddle any infant. If the sleep sack has a swaddle component, the extra fabric will be lightly attached on the infant’s torso. Parents should work with the school staff to determine the infant’s sleep schedule. If an infant falls asleep before being placed in a crib, the staff member must maintain sight supervision at all times and must move the infant to his/her crib as soon as practicable. When an infant falls asleep while being held, the staff member must move the infant to his/her crib so that supervision needs of other children in the room are being met. When being held, infants must not be in a position where his/her airway is blocked and must not have anything covering his/her face.

All toddler classrooms have a napping time for the children. Preschool-aged children who need a nap, through mutual agreement between parents and staff, will be placed in a preschool napping room. All children enrolled in these rooms nap. All nappers are provided a child-sized cot that is physically separated from children who are engaged in other activities. The cots are placed so that there are clear aisles and unimpeded access on at least one side of each cot. When in use, the cots are placed directly on the floor and are not stacked. Toddlers and preschoolers may not have anything around their throats while sleeping including necklaces, bibs, or drooling cloths. Fraser School will remove those items from the child’s throat prior to lying down to reduce the risk of suffocation.

Toddlers and preschool-aged children in napping rooms will be given the opportunity to nap from 30 minutes to 2 hours. If a child has rested on his/her cot for 30 minutes, state licensing requires that he/she be allowed to get up and do quiet activities. Once a preschool-aged child begins to outgrow nap, arrangements can be made to transition the child to a preschool non-napping room.

Parents are encouraged to send a blanket for the child which will be kept at school and sent home for washing weekly or when soiled or wet. Personal blankets will be stored in a child’s locker/cubby so that there is no contact with other children’s belongings. If a parent does not bring a blanket, the school staff will offer one to each child.

All napping children will be monitored by a qualified staff member at all times.

**Early Childhood Programs**

Fraser School employs highly qualified staff with varying degrees in early childhood education, early childhood special education, child psychology, child development associate and related fields. All children are under the direct supervision of a qualified staff member at all times.

Families are invited and encouraged to participate in their child’s classroom. Some ways that you may want to volunteer are: accompany the class on a field trip, read a book to the class, help with a special event, share a holiday celebration or hobby with the class, assist the teacher with book orders or other projects, donate requested items, or talk with your child’s teacher and come up with your own ideas.
Fraser School welcomes volunteers. We appreciate the element of care and concern they offer while adding to the fun and pleasure of the classroom with their unique talents and abilities. All volunteers are at least 16 years of age and attend an orientation which covers all licensing regulations and ideas for interacting with our varied age groups of children. Volunteers are never left alone with children and are supervised by classroom teachers in accordance with licensing regulations. All of our volunteers wear identification badges. All volunteers are an “extra pair of hands” and are not counted in our staff to student ratios.

In addition, Fraser School also cooperates with various colleges and universities to provide educational placements for interns and practicum students. These college students never replace a Fraser School staff member and are always under the supervision of a qualified school employee. Some students are at the school for only a short time for observations while others are with us for extended periods of time and become very comfortable in the classroom environment. We work closely with their respective college supervisors to ensure that their experience is educational for the student and valuable for our school.

**Adult/Child Ratios**

As a quality child care center, we strive to maintain child to staff ratios that are based upon criteria set forth by the National Early Childhood Program Accreditation. We strive to maintain at least:

- 3:1 ratio for infants
- 5:1 or 6:1 ratio for toddlers
- 6:1 or 7:1 ratio for preschool (based on square footage of the classroom)
- 8:1 ratio for prekindergarten

Fraser School is licensed by the Minnesota Department of Human Services.

Fraser School services include:

- infant and toddler care
- preschool
- prekindergarten (kindergarten readiness)
- extended care
- subsidized child care
- information and referral for services for children with special needs
- collaborations with other programs serving Fraser School children
Infant Care (for children 6 weeks to 16 months)

The infant classroom is open from 7:00 AM to 6:00 PM and does not combine with any other classroom. The infant curriculum is centered on each child’s interaction with the environment, including the people within the environment, caregiving within each child’s routine, and play experiences with age appropriate toys and materials. Upon enrollment, parents are given the opportunity to share their child’s daily routine with staff in written form. Each child’s daily schedule is based on this routine.

A music therapist comes to the infant area up to four times each week to provide experiences with music and movement. The gym (large motor area) is available daily for movement and exploration opportunities. Walks and outdoor experiences are provided, if the weather permits. A separately fenced outdoor infant play space is located beside the playground designed for older children. Meal/snack times provide an opportunity to promote learning, socialization, and development of independent feeding skills. Diaper changing times are also times of learning and social development. Time for children to explore their environment independently, under adult supervision, is facilitated daily.

Toddler Care (for children 16 to 33 months)

Fraser School offers an early childhood program providing guided developmentally appropriate activities combined with nurturing child care. Families that do not need child care but seek a beginning early childhood program may choose to enroll their child from 9:00 to 11:30 A.M. for the school’s two days per week, three days per week, or five days per week options.

The toddler curriculum is based upon a balance of taking care of each child's individual needs while stressing early socialization skills. All toddler classroom schedules include individual play times where children can explore their environment and teachers can facilitate learning and social skills. The schedules also include short group times where children sit together and hear stories or sing. The schedules also include snack/meal times, gross motor time (in the gym or on the playground), nap time, and diapering/toileting times. A music therapist comes to each toddler classroom three times per week to facilitate music and movement experiences.

Much of the toddler’s developmental growth involves the acquisition of communication. Whether that communication involves oral language or sign language, children’s vocabularies increase exponentially during the toddler years. Another area of growth during the toddler age includes the identity of self and gaining independence. Toddlers are practicing skills such as self-feeding, self-soothing, and possibly even early toileting attempts.
Preschool (for children 33 months to 5 years)

The preschool curriculum focuses on developing further socialization skills, independence, and early academic foundations. Socially, preschool-aged children are learning how to share and take turns with friends. They are also learning to negotiate with others and solve problems. All of these skills are fundamental for future educational endeavors. They also learn to transition as a group and stay safe during those transitions. To further these social-emotional goals, the preschool uses some aspects of the Incredible Years® curriculum. Preschool-aged children are continuing to work on toileting, as well as, self-dressing and caretaking of their belongings.

Preschool-aged children are also working on the fundamentals of early academic knowledge such as mathematics and literacy. Many activities that may seem like “just play” support these academic skills. For example, building in the block area helps children learn shapes. Giving each friend in dramatic play a plate helps children practice one-to-one correspondence. During this developmental phase, many children learn rote counting and to sing the alphabet song. Pretending that they are working in a restaurant can teach basic literacy as children look at menus and write other children’s orders.

The preschool curriculum involves a little longer large group times and more direct instruction through individual and small group table activities and learning centers. A music therapist visits each preschool classroom three to five times per week, depending upon if the classroom naps or not. Preschool teachers also incorporate more nutrition, science, and social studies into the curriculum. Each preschool classroom has a writing center and also incorporates some woodworking activities into the learning centers.

Prekindergarten (for children that are at least 4 by September 1)

The prekindergarten classrooms are designed for those children who will attend kindergarten the following year. These classrooms are more structured than the younger classrooms and focus on the skills needed for a successful kindergarten transition. The curriculum, however, is still play-based. These classrooms also include learners with a wide variety of abilities.

It is especially important in the prekindergarten sessions to build independence. As the year progresses, we stress more independence in dressing, in toileting, and in eating. We also build children’s attention spans by having longer large group times. During the prekindergarten session, each classroom has learning centers that children rotate through so that each child has time at each activity. These activities are designed to build academic, fine motor, or other skills. Each classroom also incorporates a journaling time where children practice writing their name as well as other literacy skills.

In addition to using The Creative Curriculum for Preschool® as a curriculum guide, the teachers reference the Minnesota Department of Education’s Early Childhood Indicators of Progress. During assessments, each child is evaluated on numeral, lower case letter, and upper case letter recognition.
individually in addition to the teachers completing the developmental assessment of the Teaching Strategies Gold®. A music therapist visits each classroom five times per week for more formal music times. Finally, the prekindergarten classrooms utilize the Incredible Years® social-emotional curriculum to further the children’s social development.

Prekindergarten sessions are held from 9:00 AM to 12:30 PM Monday through Friday. Parents can add additional times in the prekindergarten classroom but at these times, the classrooms function like a typical preschool room.

**Curriculum**

Fraser School uses The Creative Curriculum® as the primary written curriculum in all classrooms. This curriculum is based upon child development research and guides Fraser staff in planning the classroom learning environments. It is also geared towards the specific age groups that are served at Fraser School. The Creative Curriculum for Infants, Toddlers, and Twos is written by Diane Trister Dodge, Sherrie Rudick, and Kai-lee Berke. The Creative Curriculum for Preschool is written by Diane Trister Dodge, Laura J. Colker, and Cate Heroman. Both curricula are play-based and developmentally appropriate for all children, regardless of abilities. Fraser School adopted these curricula in 2009, and trains all staff to implement them effectively.

We also utilize selected aspects from the Incredible Years® social-emotional curriculum for the preschool and prekindergarten classrooms. Through the classroom visits from child-sized puppets, children can discuss various challenges such as entering group play, how to handle frustrations, and how to handle conflicts with peers. The puppets visit each older classroom regularly and come at various times and participate in various activities (such as snack times, gross motor times, or during free play.)

**Field Trips and Classroom Walks**

Field trips are fun and educational. Fraser School field trips are typically related to the classroom program and designed to enhance children's learning experiences. Due to the length of our program time and the cost of transportation, our field trips are located within walking distance. Annually, families are asked to sign a permission request for common field trip destinations. These include: Lund’s, Aldi’s, Caribou Coffee, Davanni’s, Richfield Penn Central Fire Station, ARC Value Village, Dairy Queen, Sheridan Hills Elementary School playground, Sheridan Hills Park, Hub Hobby, Madison Park, Monroe Park, and/or around the residential sections of our neighborhood. Classrooms alert families prior to a planned field trip. Families may rescind their field trip permission at any time. If a classroom intends to go to a destination that is not listed, staff will request a separate permission form. Children who do not attend a field trip will be provided in-center services while their classroom is out.
While on a field trip, staff carry a back pack filled with first aid supplies, emergency medications for participating students, a cell phone, and all students’ emergency contacts. They may also bring a wagon for children whose mobility or stamina is limited.

**Pets and Visiting Animals**

Classrooms may have a pet as part of the learning environment. Children have the freedom to observe the animals, which are enclosed in cages or aquariums, throughout the day but only have direct contact under the supervision of the teacher. Caring for and cleaning pets is the responsibility of the teacher.

Periodically, people also bring in pets to visit a classroom. They are the responsibility of their owner and are introduced to the children under careful supervision. Animals are required to be contained by a muzzle, leash, cage or aquarium. Before bringing a pet into Fraser School, the teacher must be contacted. There is a chance that we cannot allow a pet to visit due to children’s allergies or other concerns. Pets are not allowed to come into Fraser School without prior permission.

If a child is bitten by a classroom pet or visiting animal, staff members will wash and bandage the wound using their first aid training. The parents/guardians will be called immediately. Any veterinary records that are necessary will be provided to the family. If a child is bitten by a strange animal, first aid will be performed and parents/guardians will be called immediately. We will contact proper authorities to facilitate either capturing the animal or contacting owners.

**Philosophy of Holiday Celebrations**

Fraser values the inclusion of all individuals. We welcome and celebrate diversity of children and families in terms of their cultures, life experiences, abilities, and backgrounds. We believe that all individuals can learn new things from each other. Holiday celebrations are used as a teaching tool for children. We enjoy helping children learn about a variety of cultures and celebrations that take place throughout the world. Families are encouraged and welcomed to come in and share their own traditions and experiences with classrooms.

As a nonsectarian, private organization, Fraser does not promote or endorse any single religion. Any reference to religion is presented in the context of education regarding diversity. We maintain that as a private school we are permitted to determine the content of our curriculum. This curriculum has in the past contained some religious content and may continue to in the future.
Individual Assessments and Developmental Goals

Fraser School adopted the Teaching Strategies Gold® assessment tool in 2013. This assessment tool is designed to partner with the Creative Curriculum® series and uses the same set of goals. All children follow the same sequence of development; however, each child will reach developmental milestones at a different rate. Therefore, the goals and objectives are general for each age range. The classroom staff members assess each child twice each year using the developmental checklists provided in each assessment kit. Each child’s progress will be monitored in the areas of social/emotional, cognitive, physical, and language development. Individual assessment information will be shared with parents during semi-annual conferences or on an as needed/requested basis. A copy of the assessment information is also kept in the child’s main file.

The goals and objectives for all children are:

Social/Emotional Development

1. Regulates own emotions and behaviors
   A. Manages feelings
   B. Follows limits and expectations
   C. Takes care of own needs appropriately
2. Establishes and sustains positive relationships
   A. Forms relationships with adults
   B. Responds to emotional cues
   C. Interacts with peers
   D. Makes friends
3. Participates cooperatively and constructively
   A. Balances needs and rights of self and others
   B. Solves social problems

Physical Development

1. Demonstrates mobility skills
2. Demonstrates balancing skills
3. Demonstrates gross-motor manipulative skills
4. Demonstrates fine-motor strength and coordination
A. Uses fingers and hands
B. Uses writing and drawing tools

Language Development

1. Listens to and understands increasingly complex language
   A. Comprehends language
   B. Follows directions
2. Uses language to express thoughts and needs
   A. Uses an expanding expressive vocabulary
   B. Speaks clearly
   C. Uses conventional grammar
   D. Tells about another time or place
3. Uses appropriate conversational and other communication skills
   A. Engages in conversations
   B. Uses social rules of language

Cognitive Development

1. Demonstrates positive approaches to learning
   A. Attends and engages
   B. Persists
   C. Solves problems
   D. Shows curiosity and motivation
   E. Shows flexibility and inventiveness in thinking
2. Remembers and connects experience
   A. Recognizes and recalls
   B. Makes connections
3. Uses classification skills
4. Uses symbols and images to represent something not present
In addition, the Creative Curriculum® lists goals and objectives for the academic content areas of literacy, mathematics, science and technology, social studies, and the arts. Further, the series also lists goal for children who are learning English.

**Behavior Guidance**

Fraser School staff members are trained extensively on positive behavior guidance with children. If children are displaying challenging behaviors, staff will attempt to redirect them towards positive behaviors. If general redirection is not successful, staff are able to utilize many other techniques to help guide children's behaviors. Some of these techniques include using visual cues or timers, using first/then and “you can” language, or using natural and logical consequences. Time-outs are not used.

If a child is displaying physically aggressive behavior that has the potential to hurt him/herself or other children or staff members, the child may be physically restrained and/or removed from the group. School staff will use safe restraint techniques that we have been taught. This is used only on an emergency basis. We will release the child and return him/her to the group activities as soon as his/her aggressive behavior stops. If a child is separated from the group of other children, this separation will be documented per DHS guidelines. If the dangerous behavior continues as a pattern, parents will be informed. A team meeting may be scheduled to develop a plan to address the behavior. The plan may include the completion of a functional behavior assessment, the development of an Individualized Behavior Plan, and/or the addition of behavioral goals in the child’s Individual Child Care Program Plan. The parents/guardians of the child must consent and sign any positive behavior strategies prior to implementation.

Parents may be asked to come and remove their child from Fraser School for the remainder of the day if the child’s behavior is consistently dangerous to him/herself and/or to others.

Continued dangerous and aggressive behavior will result in a team meeting with parents and staff to determine the appropriateness of the child’s placement in Fraser School and to look at other options for the child, if necessary.

**AT NO TIME** is any staff member, volunteer or student in training to:

- Subject a child to corporal punishment such as, hitting, pinching, shaking, shoving, etc.
- Subject a child to emotional abuse (i.e. name calling, threatening, humiliating, etc.)
- Separate the child from a group, except in accordance with DHS licensing standards.
• Punish a child for lack of toileting control.

• Punish a child by withholding food, clothing, etc.

• Physically or mechanically restrain a child except in relation to an approved plan developed for the safety of the child or those around him or in an emergency situation in which others are at danger of being harmed.

Communication between adults and children

Young children are continually developing their language and cognition skills through their daily experiences and interactions. Negative phrases (“no” and “don’t”) can be confusing to them. Instead, the use of positive phrases is a better way to communicate with children because they provide specific acceptable actions for children to take. The following is a list of positive action phrases commonly used at Fraser School.

<table>
<thead>
<tr>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please walk/walking feet</td>
<td>No running</td>
</tr>
<tr>
<td>Adults/teachers open doors and gates</td>
<td>Don’t open the door</td>
</tr>
<tr>
<td>Quiet voices</td>
<td>No yelling</td>
</tr>
<tr>
<td>Gentle hands</td>
<td>No hitting</td>
</tr>
<tr>
<td>My turn to talk</td>
<td>No talking</td>
</tr>
<tr>
<td>Feet stay on the floor</td>
<td>No climbing</td>
</tr>
</tbody>
</table>

It is helpful to have parents use these phrases at home for reinforcement and consistency.

Communication between home and school

Communication is a vital link between home and school. Consistent communication with staff is important in order to provide the most effective program for a child.

1. Each classroom has an assigned voice mail extension and email address. A classroom teacher checks these at least once per day on their prep time or during a break. Please feel free to leave a non-urgent message for your child’s teacher and he/she will respond as soon as possible. If the message is urgent, please call the main office (612-861-1688) and someone will help get the message to the teacher right away.
2. Please inform the staff of any changes that might affect your child, including hospitalization, medical status, tube feedings, medication, moving, new baby, vacations, changes in family structure, etc. Please remember, however, that some changes (such as address changes or emergency contact information) need to be noted on a form and changed in your child’s file. These forms can be obtained in the front office.

3. It is imperative that parents/guardians provide current local emergency contacts that are authorized to pick up your child and their addresses and telephone numbers. If your child meets exclusion criteria or needs to be picked up immediately and we cannot reach you, we will call the emergency contacts listed. To add people to pick up lists and emergency contact lists and/or to update phone numbers or addresses, Client Change of Information forms must be completed and signed. These forms are available in the front office.

4. We want to hear from you and encourage you to call to talk with the teachers, coordinators, or director regarding questions or concerns you may have about your child or programs.

5. Parents/guardians are always welcome to stop and briefly discuss the child’s day with classroom staff. However, please understand that staff are constantly supervising children in their care and would be happy to schedule a time for more in-depth conversations at a time when they can devote their full attention to you.

6. Twice each year, a formal conference is held with staff and parents or guardians to discuss each child’s progress on the developmental checklists and end of year portfolios. An additional conference may be requested by a family or Fraser staff at any time. Parents or guardians may also choose to have Fraser staff attend their child’s public school team meetings. Please notify your child’s teacher if this is desired.

7. Each classroom has a bulletin board for posting weekly lesson plans and other important information.

8. Each month, a written outline of activities for your child’s class and a school newsletter will be sent. These contain important information for you regarding school and staff news and events available within the community.

Relationships between Fraser Staff, Clients and Guardians Outside of Fraser Services

Fraser employees are professionals committed to providing our clients with high quality services. This is often evident in the positive and supportive rapport between Fraser staff, clients and clients’ families. As professionals, staff must be mindful of how their interactions with clients and families may be perceived by the clients, families and the community in general. It can be difficult for children to distinguish between an individual’s role as a service provider at Fraser and as a friend in the child’s home life. The confusion caused by these dual roles can lead to difficulty in the classroom setting or
during the course of services. For this reason, Fraser staff are prohibited from entering into social media connections with Fraser clients or the close family members and guardians of Fraser clients. Fraser staff are strongly discouraged from texting families or otherwise sharing their private phone numbers. In addition, Fraser strongly discourages its staff and clients from entering into secondary employment arrangements such as babysitting.
### Contact Information

<table>
<thead>
<tr>
<th>Classroom</th>
<th>Voice mail Number</th>
<th>Email Address</th>
<th>Classroom Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ducklings</td>
<td>612-798-8361</td>
<td><a href="mailto:ducklings@fraser.org">ducklings@fraser.org</a></td>
<td>Health Services Coordinator</td>
</tr>
<tr>
<td>Bees</td>
<td>612-798-8370</td>
<td><a href="mailto:bees@fraser.org">bees@fraser.org</a></td>
<td>Intake/Billing Coordinator</td>
</tr>
<tr>
<td>Bears</td>
<td>612-798-8366</td>
<td><a href="mailto:bears@fraser.org">bears@fraser.org</a></td>
<td>Intake/Billing Coordinator</td>
</tr>
<tr>
<td>Cats</td>
<td>612-798-8374</td>
<td><a href="mailto:cats@fraser.org">cats@fraser.org</a></td>
<td>Intake/Billing Coordinator</td>
</tr>
<tr>
<td>Frogs</td>
<td>612-798-8334</td>
<td><a href="mailto:frogs@fraser.org">frogs@fraser.org</a></td>
<td>Intake/Billing Coordinator</td>
</tr>
<tr>
<td>Dinosaurs</td>
<td>612-798-8362</td>
<td><a href="mailto:dinosaurs@fraser.org">dinosaurs@fraser.org</a></td>
<td>Education Coordinator</td>
</tr>
<tr>
<td>Hummingbirds</td>
<td>612-798-8373</td>
<td><a href="mailto:hummingbirds@fraser.org">hummingbirds@fraser.org</a></td>
<td>Education Coordinator</td>
</tr>
<tr>
<td>Elephants</td>
<td>612-798-8311</td>
<td><a href="mailto:elephants@fraser.org">elephants@fraser.org</a></td>
<td>Education Coordinator</td>
</tr>
<tr>
<td>Ladybugs</td>
<td>612-798-8371</td>
<td><a href="mailto:ladybugs@fraser.org">ladybugs@fraser.org</a></td>
<td>Education Coordinator</td>
</tr>
<tr>
<td>Monkeys</td>
<td>612-798-8364</td>
<td><a href="mailto:monkeys@fraser.org">monkeys@fraser.org</a></td>
<td>Education Coordinator</td>
</tr>
<tr>
<td>Platypuses</td>
<td>612-798-8347</td>
<td><a href="mailto:platypuses@fraser.org">platypuses@fraser.org</a></td>
<td>Inclusion Coordinator</td>
</tr>
<tr>
<td>Butterflies</td>
<td>612-798-8367</td>
<td><a href="mailto:butterflies@fraser.org">butterflies@fraser.org</a></td>
<td>Inclusion Coordinator</td>
</tr>
<tr>
<td>Chameleons</td>
<td>612-798-8360</td>
<td><a href="mailto:chameleons@fraser.org">chameleons@fraser.org</a></td>
<td>Inclusion Coordinator</td>
</tr>
</tbody>
</table>

**Fraser School**

- Billing – accounts receivable coordinator: 612-798-8305
- Main Fraser office: 612-861-1688
- Main Fraser office fax: 612-861-6050
- Fraser School Extra Hours requests: 612-798-8332
- Fraser School Health Services Coordinator: 612-798-8325
- Fraser School Intake/Billing Coordinator: 612-798-8324
- Fraser School Volunteer Coordinator: 612-767-7208
- Fraser School Education Coordinator: 612-798-8316
- Fraser School Inclusion Coordinator: 612-798-8358
- Fraser School Staffing Coordinator: 612-798-8322
- Director of Fraser Pediatric Therapy: 612-798-8329
- Fraser Pediatric Therapy Fax: 612-861-1533
- Director of Fraser School: 612-798-8319
Fraser Organizational Principles (PIRQ)

PARTNERSHIP

Fraser helps families gain access to all of the community resources that are available to them and serves as their advocate.

Fraser seeks to collaborate with other service providers whenever it believes that the quality, quantity, or efficiency of service delivery can be improved.

Fraser shares its knowledge and promotes public awareness of issues of importance to people with special needs and their families.

Fraser actively seeks client, family, and funder input in the design, implementation, improvement, and evaluation of programs and services.

INNOVATION

Fraser is responsive to community needs and to its funders by developing cost-effective program options.

Fraser is committed to serving people with special needs in creative and innovative ways.

Fraser is committed to its tradition of providing “client-driven” services that respond to the needs and the input of clients and their families.

RESPECT

Fraser believes that people with special needs have a right to live, learn, work, and play as inclusive members of their communities.

Fraser believes that diversity and mutual respect among clients, families, staff members, volunteers, and board members enhance every aspect of the organization. Fraser provides to people of all ages positive experiences that encompass all abilities. Fraser reduces prejudice by fostering an inclusive environment.

Fraser expects staff members to promote a caring, supportive, safe, productive and respectful work environment consistent with the Fraser Employee Credo.

Fraser supports the rights of clients and families to self-determination in choosing how their needs are met.

Fraser values the contribution of each individual equally, regardless of position or title.

QUALITY

Fraser strives to meet and exceed the unique needs and expectations of the individuals and families that it serves.
SCHOOL
PARENT HANDBOOK

Section 2
Health Information
Health Services

Fraser School employs a Health Services Coordinator who has a combination of education and experience in health/nutrition. The Health Services Coordinator is not a licensed nurse. In addition, Fraser School contracts with the Health Consultants for Child Care Inc to review all health policies, to answer health-related questions, and to provide monthly consultations for the infant classroom.

The goal of the Health Services Coordinator is to maintain a healthy and safe environment for all children. This is accomplished through staff training, parental support, and providing individualized health care for children. Some of the responsibilities of the Health Services Coordinator include:

- assuring compliance with licensing standards as to children’s immunization and health records
- assessing and monitoring children who become ill or injured at school
- recording and distributing communicable disease information
- creating Individual Child Care Program Plans for children and ensuring they are followed by classroom staff
- managing the administration, proper storage and record keeping of all medications
- monitoring and communicating pertinent weather information daily

Children Needing Individualized Medical Attention

Because of our DHS licensing and the scope of our program, we may not be able to serve children needing individualized medical attention. Whether that child is a prospective student or a current student with changing medical needs, school administration will review the needs of each child to determine if Fraser School can reasonably accommodate the child’s medical issues. If Fraser School staff cannot perform the medical interventions necessary, the family may be able to provide a Personal Care Attendant or nurse to accompany the child to Fraser School.

Some medical interventions that Fraser School can perform are:

- Daily medications, short and/or long term, such as; preventive seizure medications, daily enzymes with food, antibiotics, eye drops and ear drops.
- Emergency epinephrine administration. Emergency services (911) will immediately be called once the epinephrine is administered. Even if the emergency crew declines to transport the child to a hospital, the child may need to go home for further observation.
- Emergency seizure medications. Emergency services (911) will immediately be called once the medication is administered. Even if the emergency crew declines to transport the child to a hospital, the child may need to go home for sleep or further observation.
• Gastronomy tube feedings. The feedings should be able to be performed by non-medical classroom staff in the classroom without need for additional staff and should be able to be completed within the regular snack or lunch time period. Fraser School will accommodate a training period while the classroom staff become comfortable with the procedure. After the training period, if the feeding continues to take individualized attention for a prolonged period of time, the school administrators may need to work with the family to identify reasonable accommodations or re-evaluate the school’s ability to serve the child.

• Blood glucose level monitoring (through finger pricks) and automatic diabetic pumps. The monitoring and treatments should be able to be performed by classroom staff in the classroom without need for additional staff. Fraser School will accommodate a training period while the classroom staff become comfortable with the procedure. After the training period, if the procedures continue to take individualized attention for a prolonged period of time, the school administrators may need to re-evaluate the school’s ability to serve the child.

• Drawing, mixing, and/or injecting medications on an emergency basis. These procedures should be able to be performed by a non-medically trained classroom or administrative staff person. Fraser School’s Health Services Coordinator, in conjunction with the child’s medical provider, will create a detailed Individual Child Care Program Plan that states instructions on the conditions and use of the emergency medication. Fraser School staff will need a training period while the staff become comfortable with the procedure.

The following are examples of some of the medical interventions that Fraser School staff cannot perform. Children that need any of these interventions will need to be accompanied by a medical care giver.

• Drawing, mixing, and/or injecting daily medications will need to be determined on a case by case basis.

• Tracheotomy cleaning and/or maintenance.

• Oxygen tank management and monitoring.

• Attending to children with seizure disorders that require one-to-one intervention for monitoring and recording seizure activity on a daily basis.

• Children that cannot manage body fluids without intensive intervention (e.g. vomiting regularly, consistent or unmanaged loose stool that is regularly not contained and causes fecal exposure to other children, open or weeping sores that are unable to be covered or that a child will not leave covered that are causing blood or bodily fluid exposure in the school).

• Children with medical conditions that require them to be able to sleep at unscheduled times in the school day.

• Percussive therapies that require more than 15-20 minutes of one-to-one staffing to perform.

• Other medical interventions that consistently require 15 minutes or more of trained, one-to-one staffing.
Children’s Immunization and Health Records

To complete enrollment, the following must be completed and returned seven working days prior to the first day of attendance: (a) Health Summary completed by parent, (b) Immunization Record, and (c) Physician Health Form, completed by the child’s physician or health care source.

It is the parent or guardian’s responsibility to keep the child's health forms up to date when there is a change in health status (i.e., hospitalization, illness, new allergy, new immunization, etc.). For children already enrolled in the school, parents must submit an updated report of physical examination signed by the child’s source of medical care at least annually for children under 24 months of age. If the child is 24 months or older, parents must provide an updated physical examination signed by the child’s source of medical care whenever the child advances to the next older classroom (e.g. toddler to preschool). Reminders will be sent out approximately 30 days prior to due date. The due date is based on the child’s birthday. Failure to complete proper information may result in a child’s inability to attend until all forms are completed. All health forms are available at the Health Services office.

Injuries and Poisoning

Fraser strives to provide a caring and safe environment. Daily inspections are conducted to maintain safe and hazard-free conditions. In addition, every Fraser School staff member must be first aid/CPR certified within the first 90 days of employment and must maintain those certifications as long as they are employed.

Even with all the possible precautions taken, an injury may still occur. In the event of a severe or life-threatening injury received at school, 911 will be called and parents will be contacted immediately. At enrollment, parents may indicate if they would like their child taken to a specific hospital in an emergency. If staff believe that medical attention may be required, but the injury is not life-threatening, first aid will be administered and the parents will be called to transport their child to a medical or dental clinic. Minor injuries and illnesses will be treated with established first aid procedures and communicated to parent or guardian at time of pick up. At all times when administering first aid, staff use universal precautions. If the injury causes physical changes to the child (e.g. bump or scrape), an injury report will be completed. The injury report captures the type of injury, cause of injury, and steps taken after the injury. These injury reports are reviewed quarterly for patterns or common causes. These reports help Fraser School staff to prevent further accidents or injuries.

All injuries to a child’s face and/or head will be communicated to his/her family during the school day. The injury report will be passed along to the closing staff and the circumstances of the injury discussed in case the parent has questions during pick up.
All poison situations must be reported to the Poison Control Center which will advise what treatment is indicated. The law requires Fraser to monitor the safety and health of every child at Fraser School. Parents must notify Fraser of any major incidents that may have resulted in injury to the child outside of Fraser.

**Illness Prevention: Hand Washing**

Nothing is more important than hand washing to prevent the spread of illness. It is also the best way to prevent exposure to food allergens and cross-contamination.

Child hand washing procedure:

- The child is lifted or steps up to a proper height to gain access to the sink available. Many of the sinks at Fraser School are already at proper height for the children.

- Children are instructed to wet their hands, use the soap provided or sent from home, and rub hands together vigorously for handwashing. Children are encouraged to wash their hands for at least 20 seconds. Visual aids are often available in the classroom bathrooms and teachers also use songs, rhymes, or timers to help the children know the proper time they need to continue scrubbing.

- Staff members encourage or assist children to rinse the soap thoroughly pointing their fingers down.

- The water is turned off with the wrist or with a paper towel.

- The child’s hands are dried using a disposable paper towel that is immediately discarded.

Staff will assist as needed to ensure children’s hands are washed:

- Immediately upon entering the classroom at the beginning of each day
- After each time they use the bathroom (even in case of diaper changes)
- Before and after eating breakfast, snacks, and lunch
- After a child sneezes into his/her hand or blows or wipes his/her nose
- After playing outside or in the gym
- Before and after using water tables, play dough, and other sensory or art materials
- After they have touched a child who may be sick or have handled soiled items
- After playing with or caring for pets
- Whenever hands look, feel, or smell unclean
Illnesses and Communicable Diseases

If a child becomes ill, or otherwise meets exclusion while at school, Fraser will contact parents or guardians immediately. If the child has the potential to infect other children or staff in the classroom, he/she will be isolated from the classroom, usually in the health services office. It is expected that the parents pick up their child within an hour after they have been notified. If the parents cannot be reached within a reasonable time period, Fraser staff will call other people that are authorized to pick up the child. If the parent/guardian or other authorized contact fails to pick up the child within one hour, the late pick-up policy in section 1 of this handbook will be implemented.

Families are required to provide the school with information when their child has been diagnosed with any communicable disease. Parents may be requested to submit a doctor's note to Health Services. If a communicable disease is reported, the Health Services Coordinator will notify the families of other children who may have been exposed to the illness/disease. The Health Services Coordinator has information sheets on the most common illnesses/diseases. Information that is provided includes symptoms and minimum exclusions from childcare. In addition, Fraser School is required to report some communicable diseases to the State of Minnesota Department of Health (e.g. pertussis or tuberculosis) and/or the Centers for Disease Control.

From the Minnesota Department of Human Services, Rule 9503.0080: “A child with any of the following conditions or behaviors is a sick child and must be excluded from a center not licensed to operate a sick care program. If the child becomes sick while at the center, the child must be isolated from other children in care and the parent called immediately. A sick child must be supervised at all times. The license holder must exclude a child:

A. with a reportable illness or condition as specified in part 4605.7040 that the commissioner of health determines to be contagious and a physician determines has not had sufficient treatment to reduce the health risk to others;

B. with chicken pox until the child is no longer infectious or until the lesions are crusted over;

C. who has vomited two or more times since admission that day;

D. who has had three or more abnormally loose stools since admission that day;

E. who has contagious conjunctivitis or pus draining from the eye;

F. who has a bacterial infection such as streptococcal pharyngitis or impetigo and has not completed 24 hours of antimicrobial therapy;

G. who has unexplained lethargy;

H. who has lice, ringworm, or scabies that is untreated and contagious to others;

I. who has a 100 degree Fahrenheit axillary (101 degree Fahrenheit temporal) or higher temperature of undiagnosed origin before fever reducing medication is given;
J. who has an undiagnosed rash or a rash attributable to a contagious illness or condition;

K. who has significant respiratory distress;

L. who is not able to participate in child care program activities with reasonable comfort;

M. who requires more care than the program staff can provide without compromising the health and safety of other children in care.”

N. Fraser School also requires that a child must be fever-free without the use of fever-reducing medication for 24 hours prior to return to school. Exceptions for fevers due to non-contagious reasons (e.g. ear infections, immunizations) will be made.

Specific Disease Exclusion Policy and Procedures

A notice will be posted for parents or sent home with children if anyone in their child’s age group (i.e., infants, toddlers, preschool) is diagnosed with a communicable disease.

The Health Service Office has an information sheet for most known illnesses. These are available to staff and families as noted above or whenever requested. Each communicable disease has specific exclusion requirements. Families will be notified about the criteria, as relevant. Following are the most common and/or most asked about communicable diseases and their exclusion requirements.

Specific Disease Exclusion Guidelines

Chickenpox Until all the blisters have dried into scabs and no new blisters or sores have started within the last 24 hours; usually by day 6 after the rash began. Hennepin County guidelines will be followed for exclusion of children who have recently received the vaccine.

Conjunctivitis Bacterial (with pus): until 24 hours after treatment begins
(Plugle) Viral (without pus): no exclusion necessary

Cytomegalovirus (CMV) No exclusion necessary
<table>
<thead>
<tr>
<th>Disease</th>
<th>Exclusion Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diarrhea</td>
<td>Completed treatment as prescribed by the physician; and/or has had at least one stool of normal consistency or more than 24 hours have elapsed since the last diarrhea stool and, feels well enough to participate in normal daily activities.</td>
</tr>
<tr>
<td>Enteroviruses</td>
<td>For children with diarrhea, until diarrhea has stopped. NO exclusion for mild, (non-polio) cold-like symptoms, as long as the child is able to participate in normal daily activities</td>
</tr>
<tr>
<td>E.Coli 9157:H7</td>
<td>Until two stool cultures, obtained at least one day apart, have tested negative. Staff with E. coli 9157:H7 may be restricted from preparing and/or serving food.</td>
</tr>
<tr>
<td>Fifth Disease</td>
<td>None (if other rash-causing illnesses are ruled out by a healthcare provider) since persons with fifth disease are no longer infectious once the rash begins.</td>
</tr>
<tr>
<td>Giardiasis</td>
<td>For those with diarrhea; until 24 hours after treatment has been started and diarrhea has stopped. No exclusion necessary for children who show Giardia in their stools but who do not have symptoms</td>
</tr>
<tr>
<td>Haemophilus</td>
<td>Until child has been treated and is well enough to participate in normal activities. Disease (Hib) Rifampin should be given to child before discharge from the hospital to assure that Hib has been eliminated</td>
</tr>
<tr>
<td>Influenza</td>
<td>Until fever is gone and child is well enough to participate in normal daily activities (sores may still be present)</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>Consult with your local or state health department. Each situation must be evaluated to determine whether the person with hepatitis A is still infectious and poses a risk to others</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>No exclusion necessary unless child exhibits unusually aggressive biting behavior, has open sores that cannot be covered, or there are unexpected bleeding conditions</td>
</tr>
<tr>
<td>Disease</td>
<td>Duration</td>
</tr>
<tr>
<td>--------------------</td>
<td>-----------------------------------------</td>
</tr>
<tr>
<td>Impetigo</td>
<td>Until child has been treated with antibiotics for at least a full 24 hours</td>
</tr>
<tr>
<td>Lice (Head)</td>
<td>Children with lice or live nits will be excluded until after treatment. All treatment approaches must include nit picking. The child may return when no lice or live nits are found.</td>
</tr>
<tr>
<td>Measles</td>
<td>Until six days after the rash appears</td>
</tr>
<tr>
<td>Meningococcal Disease</td>
<td>Until child has been treated and is well enough to participate in normal activities. Rifampin should be given to child before discharge from the hospital to assure that the bacteria have been eliminated</td>
</tr>
<tr>
<td>Mononucleosis (Infectious)</td>
<td>Until the child is well enough to return to normal activities</td>
</tr>
<tr>
<td>Mumps</td>
<td>Until nine days after swelling begins</td>
</tr>
<tr>
<td>Oral Herpes</td>
<td>Exclude children who do not have control of oral secretion, as long as active cold sores are present inside the mouth (gingivostomatitis)</td>
</tr>
<tr>
<td>Pertussis (Whooping Cough)</td>
<td>Until five days after antibiotic treatment begins</td>
</tr>
<tr>
<td>Pinworms</td>
<td>Until 24 hours after treatment has been started</td>
</tr>
<tr>
<td>Respiratory Infections (Viral)</td>
<td>Until child is without fever for 24 hours and is well enough to participate in normal activities. No exclusion for other mild respiratory infections without fever as long as child can participate comfortably</td>
</tr>
<tr>
<td>Reye Syndrome</td>
<td>Until child is well enough to participate in normal activities</td>
</tr>
<tr>
<td>Ringworm</td>
<td>Until 24 hours after treatment has been started</td>
</tr>
<tr>
<td>Roseola</td>
<td>Until child is without fever for 24 hours</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>Until diarrhea has stopped</td>
</tr>
</tbody>
</table>
### Other Infectious Diseases

Parents should consult local or state health departments or the child’s health care provider regarding exclusion guidelines for other infections not described in this handbook. Special exclusion guidelines may be recommended in the event of an outbreak of an infectious disease in a child care setting.

### Inadequately Immunized Children

If a case of measles, mumps, rubella, pertussis, polio, or diphtheria occurs in the child care setting, children who are inadequately immunized may be excluded for the incubation period of the disease. Other communicable diseases may be considered for exclusion as advised by public health. This exclusion may be necessary because these children may become infected and contribute to spreading the disease. Exclusion **does** apply to children who have not been immunized for conscientiously held beliefs or medical contraindications. Fraser School will follow the recommendations of the Minnesota Department of Health regarding exclusion of inadequately immunized children.

Children with inadequate immunization will also be required to provide a doctor’s note if they are displaying symptoms of a disease for which they have not been immunized.

<table>
<thead>
<tr>
<th>Disease</th>
<th>Exclusion Guidelines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rubella (German Measles)</td>
<td>Until six days after rash appears</td>
</tr>
<tr>
<td>Salmonellosis</td>
<td>Until diarrhea has stopped. No exclusion for children who show Salmonella in their stools, but who do not have symptoms. Staff with Salmonella may be restricted from preparing and serving food.</td>
</tr>
<tr>
<td>Shingles</td>
<td>If sores can be covered by clothing or a bandage, no exclusion is needed. If sores cannot be covered, exclude until the sores have crusted</td>
</tr>
<tr>
<td>Streptococcal Sore Throat/Scarlet Fever</td>
<td>Until at least 24 hours after treatment begins and child is without fever for 24 hours</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>A person with a positive Mantoux test, but without symptoms should not be excluded, but should see a physician as soon as possible for further evaluation</td>
</tr>
<tr>
<td>Yeast Infection</td>
<td>No exclusion necessary                   (Thrush)</td>
</tr>
</tbody>
</table>

*FRASER SCHOOL PARENT HANDBOOK 2019-2020*
Individual Child Care Program Plan

If your child has an ongoing medical condition or food allergies, the Health Services Coordinator may write an Individual Child Care Program Plan. This plan will be written in conjunction with you and your child’s health care provider. This individualized plan will list any preventative actions that may need to be taken by the classroom and/or procedures for the staff to use in response to an incident. The original of this plan is kept in the Health Services office and a copy is kept in each classroom that the child attends.

Medication Administration

Medications that only need to be administered one or two times per day are expected to be given at home. Medication is administered, if required, during program hours in the following instances:

**Short-Term Prescription Medication (e.g. antibiotics)** - Medication must be in the original pharmacy container with a readable label that states the child’s name, type of medication, amount to be administered, length of treatment, and physician’s name. The medication must be accompanied by the completed Medication Administration Request form signed by the parent. Medication will not be administered if these criteria are not met. A pharmacy label is considered the doctor’s order/signature. A new doctor’s order/label is needed if there is a change in the dosage or frequency of administration.

**Long-Term Prescription Medication (e.g. seizure medications, Ritalin, etc.)** - The medication must be in the original pharmacy container, with a readable label that states the child’s name, type of medication, amount to be administered, length of treatment, and the physician’s name. The medication must be accompanied by the completed Medication Administration Request form signed by the parent. Medication will not be administered if these criteria are not met.

**Nonprescription Medications (over-the-counter)** - Nonprescription medications will be administered if the parent completes and signs the Medication Administration Request form. If the label on the non-prescription medication states “consult a physician” for the specific age/weight of the child; a physician’s order is required. Parent/guardians are responsible for securing this written order and giving it to the Health Services Coordinator or the doctor may fax the order to Fraser School at (612) 861-6050.

Parents must supply the requested medication in the original container with the child’s full name written on it. No expired medications will be administered. Any medication received without physician/parent signature or appropriately labeled containers will be returned to the parent. Most medication will be stored within a secure cupboard in the Health Services office. The Health Services office also has a refrigerator if the medication must be kept refrigerated. Occasionally, staff may keep
a medicine within a secure cupboard within the classroom. Families may discuss the location of their child’s medication with the Health Services Coordinator.

**Sudden Unexplained Infant Death and Abusive Head Trauma Training**

All Fraser staff receives training regarding the prevention of SUID (Sudden Unexplained Infant Death) and (AHT) Abusive Head Trauma. The SUID training is mandated for all employees who work with infants by the State of Minnesota’s Department of Human Services. The AHT training is mandated for all employees who work with children 5 years and younger. Fraser School mandates both trainings for all of its employees. Both are reviewed annually.

**Community Notification**

If a Level II or III sex offender is relocated into a neighborhood near Fraser School, the Richfield Department of Public Safety is required to notify us. In turn, it is our policy to provide this information to parents. The information will include the offender’s name and description, the block on which s/he will reside, a general description of the crime (such as age group of the victims) and a photograph of the offender.

**Emergency Response Procedures**

Fraser and Fraser School have many crisis plans that include written procedures for response to a variety of emergency situations. Fraser School is mandated to practice fire drills one time per month throughout the year and severe weather drills one time per month during the severe weather season. In addition, at orientation and annually thereafter, staff members review the protocol for a lost child, medical/dental emergencies, dangerous intruders, or people picking up a child that is impaired or unauthorized. If you have any questions regarding Fraser School emergency responses, please contact the Health Services office.

If an emergency would occur that would necessitate the evacuation of Fraser School, children and staff would relocate to two of the Fraser administration buildings located on Penn Avenue. The Health Services Coordinator has a printed list of all children enrolled in Fraser School and all of the children’s emergency contacts. Each classroom would be responsible for the relocation of their specific children with a variety of administrative staff available for additional assistance. If an evacuation should occur, families will be called, told their child’s location (6328 Penn Avenue or 6344 Penn Avenue), and requested to pick up their children immediately. If a family cannot be reached, all emergency contacts will be called until someone can be reached.

**Fraser School is an alcohol, tobacco and drug free environment.**

Please refrain from using or carrying any alcohol or tobacco product or illegal drugs on Fraser School property. Fraser School bans guns and other weapons on Fraser property.
Maltreatment of Minors Mandated Reporting Policy for DHS Licensed Programs

Who Should Report Child Abuse and Neglect

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

Where to Report

If you know or suspect that a child is in immediate danger, call 911.
- Reports concerning suspected abuse or neglect of children occurring in a licensed child foster care or family child care facility should be made to county child protection services.
- Reports concerning suspected abuse or neglect of children occurring in all other facilities licensed by the Minnesota Department of Human Services should be made to the Department of Human Services, Licensing Division’s Maltreatment Intake line at (651) 431-6600.
- Reports regarding incidents of suspected abuse or neglect of children occurring within a family or in the community should be made to the local county social services agency at (612) 348-3552 or local law enforcement at (612) 861-9800.
- If your report does not involve possible abuse or neglect, but does involve possible violations of Minnesota Statutes or Rules that govern the facility, you should call the Department of Human Services Licensing Division at (651) 431-6500.

What to Report

- Definitions of maltreatment are contained in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556) and should be attached to this policy.
- A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent
of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include any actions taken by the facility in response to the incident.

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

**Failure to Report**

A mandated reporter who knows or has reason to believe a child is or has been neglected or physically or sexually abused and fails to report is guilty of a misdemeanor. In addition, a mandated reporter who fails to report maltreatment that is found to be serious or recurring maltreatment may be disqualified from employment in positions allowing direct contact with persons receiving services from programs licensed by the Department of Human Services and by the Minnesota Department of Health, and unlicensed Personal Care Provider Organizations.

**Retaliation Prohibited**

An employer of any mandated reporter shall not retaliate against the mandated reporter for reports made in good faith or against a child with respect to whom the report is made. The Reporting of Maltreatment of Minors Act contains specific provisions regarding civil actions that can be initiated by mandated reporters who believe that retaliation has occurred.

**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:

(i) related policies and procedures were followed;

(ii) the policies and procedures were adequate;

(iii) there is a need for additional staff training;

(iv) the reported event is similar to past events with the children or the services involved; and

(v) 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 Internal Reviews are Completed

The internal review will be completed by the Division Director. If this individual is involved in the alleged or suspected maltreatment, Executive Vice President/Chief Operating Officer will be responsible for completing the internal review.

Documentation of the 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 designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.

Staff Training

The license holder must provide training to all staff related to the mandated reporting responsibilities as specified in the Reporting of Maltreatment of Minors Act (Minnesota Statutes, section 626.556). 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.

The mandated reporting policy must be provided to parents of all children at the time of enrollment in the child care program and must be made available upon request.

Appendix C

Definitions of Maltreatment of Minors, Minnesota Statutes 626.556

Maltreatment of Minors Act

A Minnesota law that protects children under 18 years of age from maltreatment.
Mandated Reporter

A person or people required by the Maltreatment of Minors Act to report maltreatment. Fraser employees, volunteers and/or consultants are mandated reporters and must report suspected maltreatment of minors.

Maltreatment of Minors

Physical abuse, neglect or sexual abuse

Physical Abuse

1. Any physical injury, mental injury, or threatened injury, inflicted by a person responsible for the child’s care on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child’s history of injuries, or any aversive or deprivation procedures, or regulated interventions, that have not been authorized under Minnesota Statutes section 121A.67 or 245.825.

2. Actions which are not reasonable and moderate include, but are not limited to, any of the following:

   a. Throwing, kicking, burning, biting, or cutting a child;
   b. Striking a child with a closed fist;
   c. Shaking a child under age three;
   d. Striking or other actions which result in any non-accidental injury to a child under 18 months of age;
   e. Unreasonable interference with a child’s breathing;
   f. Threatening a child with a weapon, as defined in Minnesota Statutes section 609.02, subdivision 6;
   g. Striking a child under age one on the face or head;
   h. Striking a child who is at least age one but under age four on the face or head, which results in an injury;
   i. Purposefully giving a child poison, alcohol, or dangerous, harmful, or controlled substances which were not prescribed for the child by a practitioner, in order to control or punish the child; or other substances that substantially affect the child’s behavior, motor coordination,
or judgment or that results in sickness or internal injury or subjects the child to medical procedures that would be unnecessary if the child were not exposed to substances;

j. Unreasonable physical confinement or restraint not permitted under Minnesota Statute section 609.379, including but not limited to tying, caging, or chaining; or

k. In a school facility or school zone, an act by a person responsible for the child’s care that is a violation under section Minnesota Statute section 121A.58.

3. Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or legal guardian which does not result in an injury. Abuse does not include the use of reasonable force by a teacher, principal, or school employee as allowed by Minnesota Statutes section 121A.582.

Neglect

1. Failure by a person responsible for a child’s care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child’s physical or mental health when reasonably able to do so;

2. Failure to protect a child from conditions or actions that seriously endanger the child’s physical or mental health when reasonably able to do so, including a growth delay, which may be referred to as a failure to thrive, that has been diagnosed by a physician and is due to parental neglect;

3. Failure to provide for necessary supervision or child care arrangements appropriate for a child after considering factors as the child’s age, mental ability, physical condition, length of absence, or environment, when the child is unable to care for the child’s own basic needs or safety, or the basic needs or safety of another child in their care;

4. Failure to ensure that the child is educated as defined in Minnesota Statutes section 120A.22 and 260C.163, subdivision 11, which does not include a parent’s refusal to provide the parent’s child with sympathomimetic medications, consistent with section 125A.091, subdivision 5;

5. Nothing in this section shall be construed to mean that a child is neglected solely because the child’s parent, guardian, or other person responsible for the child’s care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care; except that a parent, guardian, or caretaker, or a person mandated to report pursuant to subdivision 3, has a duty to report if a lack of medical care may cause serious danger to the child’s health. The section does not impose upon persons, not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care, a duty to provide that care;
6. Prenatal exposure to a controlled substance, as defined in Minnesota Statute section 253B.02, subdivision 2, used by the mother for a nonmedical purpose, as evidenced by withdrawal symptoms in the child at birth, results of a toxicology test performed on the mother at deliver or the child at birth, or medical effects or developmental delays during the child’s first year of life that medically indicate prenatal exposure to a controlled substance, or the presence of a fetal alcohol spectrum disorder;

7. Medical neglect is defined in Minnesota Statutes section 260C.007, subdivision 6, clause (5) is medically neglected, which includes, but is not limited to, the withholding of medically indicated treatment from a disabled infant with a life-threatening condition. The term “withholding of medically indicated treatment” means the failure to respond to the infant’s life-threatening conditions by providing treatment, including appropriate nutrition, hydration, and medication which, in the treating physician’s or physicians’ reasonable medical judgment, will be most likely to be effective in ameliorating or correcting all conditions, except that the term does not include the failure to provide treatment other than appropriate nutrition, hydration, or medication to an infant when, in the treating physician’s or physicians’ reasonable medical judgment:

   a. The infant is chronically and irreversibly comatose;

   b. The provision of the treatment would merely prolong dying, not be effective in ameliorating or correcting all of the infant’s life-threatening conditions, or otherwise be futile in terms of the survival of the infant; or

   c. The provision of the treatment would be virtually futile in terms of the survival of the infant and the treatment itself under the circumstances would be inhumane;

8. Chronic and severe use of alcohol or a controlled substance by a parent or person responsible for the care of the child that adversely affects the child’s basic needs and safety; or

9. Emotional harm from a pattern of behavior which contributes to impaired emotional functioning of the child which may be demonstrated by a substantial and observable effect in the child’s behavior, emotional response, or cognition that is not within the normal range for the child’s age and stage of development, with due regard to the child’s culture.

**Sexual Abuse**

1. The subjection of a child by a person responsible for the child’s care, by a person who has a significant relationship to the child, as defined in Minnesota Statute section 609.341, or by a person in a position of authority, as defined in Minnesota Statute section 609.341, subdivision 10, to any act which constitutes a violation of Minnesota Statute section 609.342 (criminal sexual conduct in the first degree), 609.343 (criminal sexual conduct in the second degree), 609.344 (criminal sexual conduct in the third degree), 609.345 (criminal sexual conduct in the fourth degree), or 609.3451 (criminal sexual conduct in the fifth degree).
2. Sexual abuse also includes any act which involves a minor which constitutes a violation of prostitution offenses under Minnesota Statute sections 609.321 to 609.324 or 617.246. Sexual abuse includes threatened sexual abuse which includes the status of a parent or household member who has committed a violation which requires registration as an offender under Minnesota Statute section 243.166, subdivision 1b, paragraph (a) or (b), or required registration under Minnesota Statute section 243.166, subdivision 1b, paragraph (a) or (b).

If an employee, volunteer, or student in training is reported for suspected abuse or neglect, all licensed centers must perform an internal investigation review.

**Internal Investigation Review Procedure:**

1. Following an internal or external report of suspected maltreatment; the Division Director or designee will complete an internal investigation review of the incident within 30 calendar days.

   a. If the Division Director or designee is suspected of maltreatment, the Executive Vice President/Chief Operations Officer shall conduct and complete an internal investigation.

   b. If the Executive Vice President/Chief Operations Officer is suspected of maltreatment, the President/Chief Executive Officer shall conduct and complete an internal investigation.

   c. The Director or internal review designee will assure that corrective action has been taken as necessary to protect the health and safety of the minors when the facility has reason to know that an internal or external report of alleged or suspected maltreatment has been made.

   d. Based on the results of this review, the Director or designee will develop, document and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the license holder, if any.

   e. The internal review checklist will include an evaluation of whether:

      1. Related policies and procedures were followed;

      2. Policies and procedures were adequate;

      3. There is a need for additional staff training;

      4. The reported event is similar to past events with the minor, vulnerable adult, or the services involved;

      5. Whether there is a need for any further corrective action to be taken by the program to protect the health and safety of vulnerable adults and/or minors.
f. The internal review checklist will also include:

1. Name of the minor
2. Date of birth of the minor
3. Date of the incident of possible maltreatment
4. Persons involved
5. Persons interviewed
6. Persons and agencies notified
7. Summary of findings
8. Corrective actions taken
9. Name and title of person completing report
10. Signature of person completing the report
11. Date report completed

2. Documentation of internal investigation reviews will be made available to the commissioner of the Minnesota Department of Human Services upon the commissioner’s request. The documentation provided to the commissioner will include the completed internal review checklist that verified completion of the requirements of the internal review.

3. Documentation of internal investigation reviews and external investigations will be maintained by Division Directors.

a. If the Division Director is suspected of maltreatment, the Executive Vice President/Chief Operating Officer will maintain the documents.

b. If the Executive Vice President/Chief Operating Officer is suspected of maltreatment, the President/Chief Executive Officer will maintain the documents.

4. If a child dies as a result of suspected maltreatment, the Division Director or designee will immediately notify the county’s Medical Examiner regarding the suspicion of maltreatment.
Child Protection Intake Phone Numbers

Anoka County
763-422-7125 (Monday-Friday, 8 AM-4:30 PM)
763-427-1212 (After hours, weekends, holidays)

Carver County
952-361-1600 (Monday-Friday, 8 AM-4:30 PM)
952-361-1212 (After hours, weekends, holidays)

Dakota County
952-891-7459 (Monday-Friday, 8 AM-4:30 PM)
952-891-7171 (After hours, weekends, holidays)

Hennepin County
612-348-3552 (24 hours/day)

Ramsey County
651-266-4500 (Monday-Friday, 8 AM-4:30 PM)
651-291-6795 (After hours, weekends, holidays)

Washington County
651-430-6484 (Monday-Friday, 8 AM-4:30 PM)
651-291-6795 (After hours, weekends, holidays)

To report possible maltreatment in a program licensed by the Minnesota Department of Human Services, call 651-431-6600.
SCHOOL PARENT HANDBOOK

Section 3
Billing and Legal Information
Private Pay Billing Information

Private fees are billed for all scheduled days and hours regardless of actual attendance. The following guidelines apply:

- **Families are not** billed when program services are planned to be closed (e.g. holidays or staff development days).

- **Families are** billed for days that a child is absent due to illness and/or family vacations.

- If the program must close due to weather or other unforeseen circumstances, fees are not reimbursable to families.

- Families may request hours in addition to a child’s regular schedule. Additional hours must be pre-approved and are based upon availability. A two working-day advance notice is required for extra hours. A separate hourly rate is charged for these hours. Requests for extra hours will be denied if the family is not current on their tuition payments, copayments, payment agreement, and/or in compliance with their child’s health records or emergency medication.

- Families are expected to provide a two-week notice for a permanent schedule change. There is a fee charged per change. Schedule changes will only occur on the first calendar day of the month. Requests for schedule changes will be denied if the family is not current on their tuition payments, copayments, payment agreement, and/or in compliance with their child’s health records or emergency medication.

- Staffing is based on the number of children in each group. This makes it important that children are dropped off and picked up according to their scheduled time. Parents will be billed for early drop off or late pick up. **SEE EARLY DROP OFF / LATE PICK UP POLICY ON PAGE 6 OF SECTION I.**

- Families with multiple children in the program receive a 10% discount off of the least expensive of all regular tuitions. This discount does not apply to extra hours requests.

- Fees for clinical services, such as pediatric therapy or day treatment, obtained through Fraser are billed separately through Fraser clinical billing department. All questions regarding clinical billing should be directed to 612-767-7222. You can navigate through the automated phone system by pressing option 1 for English or 2 for Spanish and option 5 for billing questions.

**Paying fees**

- For families paying tuition privately, monthly invoices and payment envelopes are sent out by the fifteenth of each month with payment due by the first day of the following month. For example, September tuition is sent out in mid-August and is due by September 1st. This invoice reflects all scheduled days of attendance for the following month.
Families that utilize extra hours or incur other costs, such as a schedule change fee, are billed after the service is provided.

Families that utilize subsidized child care and/or respite care (with current service agreements and authorizations) are billed for copayments and other fees that have been incurred each month after the service has been provided.

Payments may be made by check or credit card. Checks can be mailed, given to front desk staff, or dropped in the wooden drop boxes located inside the building at each entrance. Credit card payments can be made in person through the front office staff, paid by phone by calling the accounting office at (612) 798-8305, or paid online through our website at www.fraser.org. For your convenience, you can also set up automatic payments on your credit card. To do this, you can complete a form with the front office staff or call the accounting office at (612) 798-8305. Please do not send payments via child lunch boxes or give them to classroom staff.

If a private party other than the parent(s) will be paying any or all of the tuition (such as a grandparent), we ask that you sign a consent to exchange information form so that we can discuss the bill directly with the individual.

Fraser has limited scholarship funding to support families in crisis. Questions regarding scholarship funding can be addressed to the school director.

If you are discharging from the school and have prepaid tuition, you will be refunded any overage after your final tuition bill has been processed.

**Late Payment Process**

All tuition is due by the first of the month. Accounts not paid by the fifteenth day of the month are past due and charged a $25 late fee. A 1.5% interest per month (18% annual) will also be accrued.

At the beginning of the next month, it is expected that you pay all past due tuition and current tuition.

Failure to pay your account in full or set up a payment plan by the 28th of the month will result in discontinuation of Fraser services and your account being sent to a collections agency. Siblings who are utilizing Fraser services may also be discharged.

If you are unable to pay on time, please call the accounting department at (612) 798-8305 to arrange a payment schedule.

Fraser is a non-profit organization and relies on payment of tuition on a timely basis.
County Child Care Assistance

Each county in Minnesota regulates its own child care assistance program. Fraser School works primarily with Hennepin and Ramsey Counties but is open to working with other counties provided the county approves Fraser School’s application.

Families who receive child care assistance are responsible for completing the necessary paperwork and turning it into the county child care worker on a timely basis. Families who receive child care assistance are responsible for scheduling their child within Fraser School’s policies and within the hours provided by the county’s authorizations. If families schedule their child for more hours than the county has authorized, families are responsible for privately paying the overage as well as their county-mandated copayments. If the child care authorization changes in the amount of hours allowed, it is the family’s responsibility to request a schedule change immediately to conform to the new authorization. If the authorization lapses or ends and there is no formal discharge from the family, the family will be held responsible for the tuition not paid by the county.

The county child care assistance program requires attendance and allows only a minimum amount of absences. If the child has exceeded the amount of absences and the county refuses to pay for tuition, the family is responsible for privately paying the difference in addition to their copayment.

Finally, counties do not allow us to back bill for changes in authorization. If the county does not allow us to bill for past tuition, even if the authorization was back dated, the family may be responsible for the past tuition.

Early Learning Scholarships

Some families qualify for Early Learning Scholarships through The Department of Education. These scholarships give each family a specific amount of money that can be used for tuition throughout the year. Once the scholarship is used, the family will need to privately pay tuition for the child to continue their enrollment. Families are responsible to complete any necessary paperwork to maintain their scholarship status. Fraser School will bill tuition directly to the administrator of the scholarship.

Like county child care assistance, the Early Learning Scholarship program requires attendance and allows only a minimum number of absences. If the child’s absences exceed the maximum number, it is Fraser School’s responsibility to inform the administrator of the scholarship. The administrator makes any decision whether to take away funding.

For more information about Child Care Assistance and Early Learning Scholarships, visit www.thinksmall.org.
Data Privacy

The Minnesota Data Practices Act (Minnesota Statues, Chapter 13) relates to the collection, security, and dissemination of data on individuals by the state and its political subdivisions (of which Fraser is included). Data on individuals includes all records, files and processes which contain any data in which an individual is or can be identified, and is intended to be kept on a permanent or temporary basis. It includes information that is collected, stored and disseminated by manual, mechanical, electronic or other means. This Act gives you the right to be informed about the information maintained by Fraser. Any person who willfully violates the provisions of this act is guilty of a misdemeanor.

Three categories of records are maintained at Fraser: 1) Employee Personnel Records classified as private, 2) Client Records generally classified as private - in some instances, client medical records may be classified as confidential, and 3) Social Service Statements for parents and children classified as private.

No private or confidential data on individuals, or summary of same, shall be used or disseminated outside of Fraser unless information is requested in writing and has the approval of the individual (family/legal guardian) and the responsible authority of an administrative staff member.

Your Right to See

When you are asked by Fraser to give information about yourself:

- you will be told the purpose and use of the information;
- you will be told if the data is required, or if you may choose not to provide it;
- you will be told the consequences of giving or not giving information;
- you will be told what other persons or agencies will use the information.

The Data Practices Act gives you the right to see any information about you that is not confidential and to have its meaning explained to you. You may request the following:

- to see any information about you that is public or private;
- an explanation about the information on you;
- copies of papers in your file (Fraser will furnish copies within five working days or explain why additional time is needed. You may be required to pay copying costs.)
Your Right to Control Disclosure

Any information classified as private may be shown to persons outside Fraser who collected it. If you were not fully informed about who has access to your information (see “Your Right To See”) then your written permission is required before that information may be shared. Such permission will:

- be expressed in plain language;
- be dated;
- say exactly who is authorized to give out the information;
- say exactly what information can be given;
- say how the information will be used, now or later; and
- say when permission to give out information ends.

Fraser will notify parents, in writing, before their child or their child’s records may be used in a research study, case study or a public relations activity specific to that child.

Information Release

- No information on a child can be released without parent’s written consent. Only the information requested on the signed consent form shall be released.

- Information that has become part of a child’s file from other agencies (medical, psychological or educational) cannot be released by Fraser. This information must be obtained from the source agency.

- As a center which provides on-site training for students from accredited educational and medical programs, it may be necessary at times for training students to access a child’s file and to have contact with parents. No access to files or parent contacts will be made without written parent/guardian’s consent.

- Parents of children who have an Individual Child Care Program Plan—will be asked to sign a consent/release form so that the health services coordinator can exchange information with the child’s health care provider.
Your Right to Challenge

Please notify Fraser in writing if you feel any information on file about you is not accurate, correct or complete. Within 30 days, Fraser will correct the information and attempt to notify anyone who has received the information in the past. Or, if Fraser thinks the data is correct, you will be notified and thereafter Fraser will attach your explanation when using the data you have challenged.

Public Relations/Photo Release

Annually, parents are asked to sign a permission form that includes an authorization to release photos for classroom activities. Classroom activities may involve posting your child’s photo in the classroom, including your child’s photo in the classroom newsletter, or other classroom-related purposes. This may include sending a print or electronic copy of your child’s photo to other families within the classroom.

Photos or videos used for marketing purposes will be limited and will have a separate permission form for each event. On the permission form, it will state the purpose of the photos/videos, the audience, and the venue where the photos/videos will be shown. Families can give permission or decline for each separate occurrence.

Families are not allowed to take photos of children other than their own unless the other child’s parent is present and gives verbal permission.

Research or Experimental Procedure Release

Fraser School does not routinely participate in any research projects or experimental procedures. If a situation would arise where Fraser School was requested to be a research site and the enrolled children would be subjects, the school and/or the researchers would provide information to each family and require a permission form to be signed before any research could begin.

Equal Opportunity Affirmative Action

Fraser is committed to equal treatment of all clients, and fair and equal consideration of all prospective clients, without regard to race, religion, color, creed, gender, sexual orientation, age, national origin, disability or any other factor prohibited by law. Fraser complies with all federal, state, and local government entities in connection with equal access regulations. Fraser has a written affirmative action program in which it commits to administer all actions in compliance with such regulations.
Grievances/Appeals

In the event that a client, parent or guardian, or local social service agency (hereinafter designated as the appellant) has a grievance, has been denied admission, is suspended, or is discharged from Fraser, he/she/they have the right to appeal the decision. The appeal process follows:

1. Within two weeks of notification of Fraser’s decision to not act upon a grievance, deny admission, suspend, or discharge the participant, the appellant shall notify Fraser Chief Executive Officer in writing of the request for an appeal hearing and state the reason for the request.

2. The Chief Executive Officer or her designee will notify the appellant in writing of the place, date and time for the appeal hearing. It is the responsibility of the appellant to notify any other interested party as to the place, date and time for the appeal.

3. Additional information concerning the circumstances of the denial of admission, suspension, or discharge of the client may be presented at the appeal hearing.

4. After hearing the appellant’s petition, the information will be reviewed with the interested parties and a decision will be reached. Written notice of the decision will be sent to all parties within one week.

5. If the appellant wishes to appeal the decision of Fraser Chief Executive Officer, they may notify the president of the board of directors, in writing within one week of the request for an additional appeal. The request is to be addressed to Fraser, c/o Chair, Board of Directors, 2400 West 64th Street, Richfield, MN 55423.

6. Within two weeks, the Board Chair will appoint a committee of the board to review the participant’s information and the Chief Executive Officer’s decision.

7. The appointed committee shall have the option of reviewing the information and the decision in committee, or of taking it to the full Board of Directors.

8. The Board of Directors will notify the appellant of the date, place and time of the review. The information will be reviewed with interested parties and a decision will be reached within one week. This decision is final.

9. For Hennepin County Children and Family Services’ paid participants: if the participant, his parent/guardian, or local social service agency wishes to further appeal the decision of the Board of Directors, an appeal for a Fair Hearing From County Social Services Department, or the Social Service Appeals Department of the Department of Public Welfare, State of Minnesota, may be arranged through the appropriate channels within Hennepin County.
About this Handbook

This Fraser School Parent Handbook is presented to parents/guardians of children attending Fraser School and sets forth guidelines of Fraser policies and practices. The purpose of this handbook is to serve as a reference to answer questions. This handbook is not a contract, expressed or implied.

The policies, rules, and standards contained in this handbook are not fully inclusive and no Fraser employee has the authority to enter into a service agreement or enrollment contract or make any promises or commitments contrary to the foregoing, except in a formal written contract of enrollment executed both by a representative of Fraser School and the legal representative of the enrollee.

The information, practices and policies contained in this handbook are provided to help parents/guardians to become familiar with Fraser School. Fraser reserves the right to modify or discontinue without notice, any policy, practice or plan in an effort to be responsive to the needs of our company and changing business requirements. From time to time, updated information concerning changes to the handbook may be distributed. This updated information should be maintained along with the handbook.

This handbook supersedes and replaces all previous Fraser School Parent Handbooks.

Parents/guardians should read this handbook carefully and contact the director or intake/billing coordinator for clarification of any of its contents. The signature of the parents or guardians on the enrollment agreement verifies that they have read and understand the contents of this handbook. Annually, Fraser reviews the content of this handbook and will provide any revisions to families.
FRASER NOTICE OF PRIVACY PRACTICES

September 16, 2013

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

OUR PLEDGE REGARDING YOUR PERSONAL HEALTH INFORMATION

This notice explains how Fraser uses and discloses your personal health information (known as Protected Health Information or “PHI”) and the rights that you, as a consumer, have with respect to accessing that information and keeping it private. We are required by law to protect the privacy of your PHI and to provide you with this notice.

We must follow the privacy practices that are described in this notice. We reserve the right to change our privacy practices and the terms of this notice at any time, and to have those changes be effective for all information that we have, including PHI we created or received before the effective date of the new notice. We will post the revised notice in our offices, make copies available to you upon request and post the revised notice on our website www.fraser.org.

Under Minnesota law, to disclose your PHI outside of Fraser, we are required to obtain your written consent. Under this law, certain disclosures may or must be made without your consent. Examples include medical emergencies and disclosures to local welfare agencies.

For more information, please contact us using the information listed at the end of this notice.

OUR USES AND DISCLOSURES OF YOUR PERSONAL HEALTH INFORMATION

The following categories describe different ways that we use and disclose your PHI.

**Treatment:** We may use your PHI to provide you with medical treatment or health-related services. For example, Fraser staff may share information about your medical condition with another clinician to whom you have been referred, with a school social worker or teacher, a case manager, a social worker or a county worker as appropriate to your treatment.

**Payment:** We may use and disclose your PHI in order to receive payment for the services you receive. For example, we need to give information about services you received to your health plan to obtain payment.

**Health Care Operations:** We may use and disclose PHI about you for our health care operations, which are activities necessary to operate Fraser and make sure that all of our clients receive quality
care. For example, we may use and disclose your PHI to conduct quality assessment and improvement activities, to engage in care coordination or case management, or to manage our business.

**Business Associates:** We may disclose PHI about you to third party “business associates” that perform various activities for Fraser. Whenever this occurs, Fraser will have a written agreement with the business associate that contains terms to protect the privacy of your health information.

**Family and Other Individuals Involved in Your Care:** Unless you object, we may disclose to your family members, friends, and persons you indicate are involved in your care, PHI that is directly relevant to their involvement in your care (or payment for your care). We may also use or disclose your information to notify these persons of your location, general condition or death.

We are not required to obtain your written consent or authorization for the disclosures in this section. If you are present, we will give you the opportunity to object before we disclose your PHI to these persons (or we may use our professional judgment in concluding that you do not object). If you are incapacitated or in an emergency, we may disclose your PHI to these persons if we determine that the disclosure is in your best interest.

**Appointment Reminders:** We may use and disclose PHI to contact you as a reminder that you have an appointment for treatment or services.

**Communication about Products and Services:** We may use and disclose your PHI to tell you about or recommend possible treatment options or alternatives, or to tell you about health-related benefits or services that may be of interest to you. We may communicate with you face-to-face regarding any products or services.

**Fundraising:** We may use your name, address and other demographic data and the dates on which you received care, to contact you to ask for fundraising activities to support Fraser. If we contact you for a donation, you can “opt out” of any future fundraising contacts. If you do not want to be contacted, please notify our HIPAA Privacy Officer, in writing or by email, using the information given at the end of this notice.

**Research:** We may disclose information to external researchers with your authorization, which we will attempt to collect in a manner consistent with applicable state laws.

**Underwriting:** Fraser is prohibited from using PHI that is genetic information for underwriting purposes.

**Special Situations involving Public Health or Legal Requirements:** We may use and disclose PHI:

- If required by law.
- For disaster relief efforts.
- For public health activities, such as communicable disease reporting, or informing authorities of possible victim of abuse, neglect or domestic violence.
• For government healthcare oversight activities.
• For judicial or administrative proceedings, such as responding to a court order.
• For law enforcement purposes.
• To avoid a serious threat to health or safety.
• To medical examiners, funeral directors, or organ procurement organizations, in regard to a deceased person.
• For special government functions, such as disclosures to authorized federal officials for national security activities.
• For workers’ compensation and similar programs for work-related injuries or illness.

Uses and Disclosures You Specifically Authorize: If you give us your written authorization, we may use and disclose your information as permitted by that authorization. You may revoke an authorization in writing at any time, except if we have already relied on it. Without your written authorization, we may not use or disclose your PHI for any reason except those described in this notice.

YOUR RIGHTS

Access: You have the right to look at or get copies of your PHI (including electronic copies), with limited exceptions. We may require you to make this request in writing. If you request copies, we may charge you a fee to cover the costs of copying, mailing and other supplies. We may deny your request in very limited circumstances. If we deny your request, you may be entitled to a review of that denial.

Amendment: If you feel that your PHI is wrong or something is missing, you have the right to request that we amend it. We will require you to make this request in writing and provide a reason to support your request. We may deny your request if we did not create the information you want amended or for certain other reasons. If we deny your request, we will provide you a written explanation. You may respond with a statement of disagreement to be included in your records.

Accounting of Disclosures: You have the right to receive a list of disclosures we have made of your PHI. This right to disclosures, except for treatment, payment, health care operations, and certain other purposes, only applies if your health records are maintained or used electronically by us. Your request for the accounting must be in writing and submitted using the contact information at the end of this notice. If you request this list more than once in a 12-month period, we may charge you a reasonable, cost-based fee.

Notice of Breach: You have the right to be notified by Fraser in the event of a breach of unsecured PHI.
Restriction Requests: You have the right to request that we place restrictions on our use or disclosure of your PHI for treatment, payment, health care operations. For example, if you pay for service entirely out-of-pocket, then you can require that information regarding that service not be disclosed to your health plan or insurance. We are not required to agree to these restrictions, but if we do, we will abide by our agreement (except in an emergency). Any agreement we may make to a request for restrictions must be in writing signed by a person authorized by Fraser to agree to such requests.

Confidential Communication: You have the right to request that we communicate with you in confidence about your PHI by alternative means or to an alternative location. For example, you may ask that we contact you only at work or by mail. You must make your request in writing and must specify how or where you wish to be contacted. We will accommodate all reasonable requests.

Others Acting on Your Behalf: These rights may also be exercised by someone who has the legal right to act on your behalf.

Copy of this Notice: You are entitled to receive a printed (paper) copy of this notice at any time. Please contact us using the information listed at the end of this notice.

QUESTIONS AND COMPLAINTS

If you want more information about Fraser’s privacy practices, have questions or concerns, or believe that we may have violated your privacy rights, please contact us using the following information:

Contact Office: HIPAA Privacy Officer

Address: Fraser
2400 W. 64th St.
Richfield, MN 55423

Telephone: 612-861-1688

Email: privacy@fraser.org

You also may submit a written complaint to the U.S. Department of Health and Human Services. We will provide you with the address to file your complaint with the U.S. Department of Health and Human Services upon request. We support your right to protect the privacy of your medical information. We will not retaliate in any way if you choose to file a complaint.