

# SCOTT COUNTY DAY CARE PROVIDER POLICY

THIS CONTRACT MAY BE USED ALONE OR MUST BE ATTACHED TO YOUR OWN CONTRACT OR INCORPORATED INTO YOUR OWN CONTRACT [MN Rule 9502.0405, Subp. (3)]

The provider shall have the following information available for discussion with parents. This information is required by MN Rule 9502, which governs the licensing of all MN family day care homes. A complete copy of Rule 9502 is available for parents to read upon request. (9502.0405, Subp. (2)). A copy of MN Rule 9502 is available at [www.revisor.leg.state.mn.us/arule/9502/](http://www.revisor.leg.state.mn.us/arule/9502/)

1. AGES AND NUMBERS OF CHILDREN: [including provider's own children, 9502.0405, Subp. (3)(A) / 245A.02 Subd. 19]

\_\_\_\_\_ Infants (6 weeks - 12 months)  
\_\_\_\_\_ Toddlers (12 - 24 months)  
\_\_\_\_\_ Preschooler (24 months to 5 years old)  
\_\_\_\_\_ School Age (5 years old until the age of 11)

2. HOURS AND DAYS OF OPERATION: [9502.0405, Subp. (3)(B)]

Hours: \_\_\_\_\_ to \_\_\_\_\_ Days: \_\_\_\_\_

3. MEALS AND SNACKS: [9502.0405, Subp. (3)(C)]

Breakfast  A.M. Snack  Lunch  P.M. Snack  Dinner

***Food, lunches, and bottles brought from home must be labeled with the child's name and refrigerated when necessary. Bottles will be washed after use. Food served during the day will include servings from each of the basic food groups.***  
(9502.0405, Subp. 3D, and 9502.0445 Subp. 3A, D)

4. SLEEPING AND REST ARRANGEMENTS: [9502.0405, Subp. (3)(E)] / [245A.146]

Infants: Crib  Portable Crib  Mesh Sided Crib

Toddlers/Preschoolers: Bedding (*Clean, separate bedding must be provided for each child in care.*)

Mat  Crib  Cot  Bed  Sofa  Sleeping Bag  Mesh Sided Crib

5. SMOKING: [MN Statute 144.414, Subd. (2)]

***Smoking is not permitted in the residence or in the garage during child care hours. If smoking is permitted in the residence or garage after hours of child care, the provider will verbally inform parents and also post a written notice.***

6. PETS IN THE RESIDENCE: [9502.0435, Subp. (12)(A)]

No  Yes, kind(s) and number of pets \_\_\_\_\_

7. CARE OF ILL CHILDREN: [9502.0435, Subp. 16 (A)]

**A. The provider shall notify the parent immediately when a child in care develops any of the following symptoms:**

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

**B. The provider shall comply with the following health requirements:**

1. Keep immunization records for each child in care, using forms provided by the County. [9502.0405, Subp. (4)(C)]
2. Obtain written permission from the child's parents prior to administering medicine, diapering products, sunscreen lotions, and insect repellents. [9502.0435, Subp. (16)(F)(1)]
3. Obtain and follow written instructions from a licensed physician or dentist prior to administering each prescription medicine. Medicine with the child's name and current prescription information on the label constitutes instructions. [9502.0435, Subp. (16)(F)(2)]
4. Notify Scott County Public Health Nursing (496-8520) or Minnesota Department of Health of any suspected case of reportable disease (per MN Rule 4605.7000). A list of the reportable diseases will be given to parents when they enroll their child and again if the list changes. [9502.0435, Subp. (16)(E)]
5. Provider shall follow written instructions from an authorized agent or the physician of an ill child placed in the provider's care if the child has any of the reportable diseases. [9502.0435, Subp. (16)(B)]
6. Inform a parent of each exposed child the same day the provider is notified a positive diagnosis has been made for any of the reportable diseases. [9502.0435, Subp. (16)(D)]
7. ***The provider shall require that parent(s) notify the provider within 24 hours of the diagnosis of a serious contagious illness or parasitic infestation.*** [9502.0435, Subp. (16)(C)]

***Additional policies on the care of ill children:*** [9502.0405, Subp. (3)(G)]

Provider unwilling to accept a child that is:

Provider is willing to accept a sick child under the following circumstances:

8. FEES: [9502.0405, Subp. (3)(J)]

If information regarding provider's fees is not included in your own contract, please specify here:

9. HELPERS AND SUBSTITUTES: [9502.0315, Subp. (14) and (29); 9502.0365, Subp. (5); and 9502.0405, Subp. (3)(L)]

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

***"Substitute" means an adult at least 18 years of age who assumes responsibility of the provider. The use of a substitute caregiver must be limited to a cumulative total of not more than 30 days in any 12-month period unless the substitute is also a licensed provider or the provider has the written consent of the agency.***

Provider will  will not  arrange for a substitute during vacations and holidays.

Provider will make the following arrangements for emergencies:

10. TERMINATION AND NOTICE PROCEDURES: [9504.0405, Subp. (3)(K)]

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

11. TRANSPORTATION PLANS: [9502.0435, Subp. (9)]

***Each child will be securely fastened in an appropriate passenger restraint system as described in the Day Care Rules. No child is permitted to remain unattended in any vehicle.***

The "Admission and Arrangements" form contains a section for parents to authorize provider to transport child(ren).

Describe the circumstances under which the child will be transported:

12. The provider has made emergency, fire, and storm plans, and keeps a monthly fire drill log, using forms provided by the County. [9502.0435, Subp. (8)(F)]

- 13. When admitting a child to day care, the provider and parents shall discuss child rearing, sleeping, feeding, and behavior guidance practices essential for the care of the child. [9502.0405, Subp. (1)]
- 14. Special instructions from the parent shall be obtained in writing and followed about toilet training, eating, sleeping, or napping, allergies, and health problems. [9502.0405, Subp. (4)(B)]
- 15. NONDISCRIMINATION PRACTICES: [9502.0405, Subp. (3)(F); Subp. (6)]

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

16. **245A.04 APPLICATION PROCEDURES**

Subdivision 1. **Application for licensure**

(c) An applicant or license holder must have a policy that prohibits license holders, employees, subcontractors, and volunteers, when directly responsible for persons served by the program, from abusing prescription medication or being in any manner under the influence of a chemical that impairs the individual's ability to provide services or care. The license holder must train employees, subcontractors, and volunteers about the program's drug and alcohol policy.

My Drug/Alcohol Policy is as follows:

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17. **245A.04 APPLICATION PROCEDURES**

Subdivision 1. **Application for licensure**

(d) An applicant and license holder must have a program grievance procedure that permits persons served by the program and their authorized representatives to bring a grievance to the highest level of authority in the program.

My Grievance Policy is as follows:

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\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Provider Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**4605.7040 DISEASE AND REPORTS; CLINICAL MATERIALS SUBMISSIONS.**

Cases, suspected cases, carriers, and deaths due to the following diseases and infectious agents shall be reported. When submission of clinical materials is required under this part, submissions shall be made to the Minnesota Department of Health, Public Health Laboratory.

A. Diseases reportable immediately by telephone to the commissioner:

- (1) anthrax (*Bacillus anthracis*). Submit clinical materials;
- (2) botulism (*Clostridium botulinum*);
- (3) brucellosis (*Brucella* spp.). Submit clinical materials;
- (4) cholera (*Vibrio cholerae*). Submit clinical materials;
- (5) diphtheria (*Corynebacterium diphtheriae*). Submit clinical materials;
- (6) hemolytic uremic syndrome. Submit clinical materials;
- (7) measles (rubeola). Submit clinical materials;
- (8) meningococcal disease (*Neisseria meningitidis*) (all invasive disease).  
Submit clinical materials;
- (9) orthopox virus. Submit clinical materials;
- (10) plague (*Yersinia pestis*). Submit clinical materials;
- (11) poliomyelitis. Submit clinical materials;
- (12) Q fever (*Coxiella burnetii*). Submit clinical materials;
- (13) rabies (animal and human cases and suspected cases);
- (14) rubella and congenital rubella syndrome. Submit clinical materials;
- (15) severe acute respiratory syndrome (SARS). Submit clinical materials;
- (16) smallpox (variola). Submit clinical materials; and
- (17) tularemia (*Francisella tularensis*). Submit clinical materials.

B. Diseases reportable within one working day:

- (1) amebiasis (*Entamoeba histolytica/dispar*);
- (2) anaplasmosis (*Anaplasma phagocytophilum*);
- (3) arboviral disease, including, but not limited to, LaCrosse encephalitis, eastern equine encephalitis, western equine encephalitis, St. Louis encephalitis, and West Nile virus disease;
- (4) babesiosis (*Babesia* spp.);
- (5) blastomycosis (*Blastomyces dermatitidis*);
- (6) campylobacteriosis (*Campylobacter* spp.). Submit clinical materials;
- (7) cat scratch disease (infection caused by *Bartonella* species);
- (8) chancroid (*Haemophilus ducreyi*);
- (9) *Chlamydia trachomatis* infections;
- (10) coccidioidomycosis;
- (11) cryptosporidiosis (*Cryptosporidium* spp.). Submit clinical materials;
- (12) cyclosporiasis (*Cyclospora* spp.). Submit clinical materials;
- (13) dengue virus infection;
- (14) *Diphyllobothrium latum* infection;
- (15) ehrlichiosis (*Ehrlichia* spp.);
- (16) encephalitis (caused by viral agents);
- (17) enteric *Escherichia coli* infection (*E. coli* O157:H7, other enterohemorrhagic (Shiga toxin-producing) *E. coli*, enteropathogenic *E. coli*, enteroinvasive *E. coli*, and enterotoxigenic *E. coli*). Submit clinical materials;
- (18) *Enterobacter sakazakii* in infants under one year of age. Submit clinical materials;
- (19) giardiasis (*Giardia lamblia*);
- (20) gonorrhea (*Neisseria gonorrhoeae* infections);
- (21) *Haemophilus influenzae* disease (all invasive disease). Submit clinical materials;
- (22) hantavirus infection;
- (23) hepatitis (all primary viral types including A, B, C, D, and E);

- (24) histoplasmosis (*Histoplasma capsulatum*);
- (25) human immunodeficiency virus (HIV) infection, including acquired immunodeficiency syndrome (AIDS). Submit clinical materials;
- (26) influenza (unusual case incidence, critical illness, or laboratory confirmed cases). Submit clinical materials;
- (27) Kawasaki disease;
- (28) *Kingella* spp. (invasive only). Submit clinical materials;
- (29) legionellosis (*Legionella* spp.). Submit clinical materials;
- (30) leprosy (Hansen's disease) (*Mycobacterium leprae*);
- (31) leptospirosis (*Leptospira interrogans*);
- (32) listeriosis (*Listeria monocytogenes*). Submit clinical materials;
- (33) Lyme disease (*Borrelia burgdorferi*);
- (34) malaria (*Plasmodium* spp.);
- (35) meningitis (caused by viral agents);
- (36) mumps;
- (37) neonatal sepsis (bacteria isolated from a sterile site, excluding coagulase-negative *Staphylococcus*) less than seven days after birth. Submit clinical materials;
- (38) pertussis (*Bordetella pertussis*). Submit clinical materials;
- (39) psittacosis (*Chlamydia philipii*);
- (40) retrovirus infections;
- (41) Reye syndrome;
- (42) rheumatic fever (cases meeting the Jones criteria only);
- (43) Rocky Mountain spotted fever (*Rickettsia rickettsii*, *R. canada*);
- (44) salmonellosis, including typhoid (*Salmonella* spp.). Submit clinical materials;
- (45) shigellosis (*Shigella* spp.). Submit clinical materials;
- (46) *Staphylococcus aureus* (only vancomycin-intermediate *Staphylococcus aureus* (VISA), vancomycin-resistant *Staphylococcus aureus* (VRSA), and death or critical illness due to community-associated *Staphylococcus aureus* in a previously healthy individual). Submit clinical materials;
- (47) streptococcal disease (all invasive disease caused by Groups A and B streptococci and *S. pneumoniae*). Submit clinical materials;
- (48) syphilis (*Treponema pallidum*);
- (49) tetanus (*Clostridium tetani*);
- (50) toxic shock syndrome. Submit clinical materials;
- (51) toxoplasmosis (*Toxoplasma gondii*);
- (52) transmissible spongiform encephalopathy;
- (53) trichinosis (*Trichinella spiralis*);
- (54) tuberculosis (*Mycobacterium tuberculosis* complex) (pulmonary or extrapulmonary sites of disease, including laboratory confirmed or clinically diagnosed disease). Latent tuberculosis infection is not reportable. Submit clinical materials;
- (55) typhus (*Rickettsia* spp.);
- (56) varicella zoster disease:
  - (a) primary (chickenpox): unusual case incidence, critical illness, or laboratory-confirmed cases. Submit clinical materials; and
  - (b) recurrent (shingles): unusual case incidence or critical illness. Submit clinical materials;
- (57) varicella zoster disease in addition to reportable disease under subitem (56), effective upon the commissioner's determination that the disease is reportable under part [4605.7042](#);
- (58) *Vibrio* spp. Submit clinical materials;
- (59) yellow fever; and
- (60) yersiniosis, enteric (*Yersinia* spp.). Submit clinical materials.