

April - June 2010

# The Licensing Link

## From Your Licensor

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### Communication: A Key Ingredient in Developing Healthy Caregiver-Child Relationships

by Stephen Green, Ph.D.

What is communication, and why does it play such an important role in building strong relationships? Communication simply refers to the exchange of verbal and non-verbal information between two or more individuals. It is through communication processes that we express our needs, wants, and concerns, as well as our love and admiration for one another. Just as effective communication is almost always found in healthy relationships, poor communication is typically associated with unhealthy relationships. Family researchers have discovered that poor communication can lead to numerous problems, including excessive conflict, ineffective problem solving, lack of intimacy, weak emotional bonding, and behavioral problems in children (Bray and Heatherington, 1993).

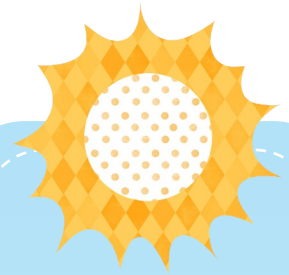
As child care providers, you have a unique opportunity to shape the lives of the children in your care. Numerous factors contribute to a child's growth and development; however, among the most important are the daily interactions that take place between you and the child. Communication processes lie at the heart of these daily interactions. Being an effective communicator, especially with young children, requires patience, understanding, and practice.

*(continued on page 2)*

#### CHILD CARE ALERT

- **INFANTS** (children under 12 months of age) **CAN ONLY SLEEP OR NAP IN APPROVED CRIBS, PORT-A-CRIBS, OR MESH- SIDED PLAYPENS.** (Infants cannot be left to nap or sleep for any period of time in a highchair, swing, infant seat, car seat or other item not mentioned above.)
- **TODDLERS SHOULD BE PROVIDED WITH A MAT, CRIB, COT, BED, SOFA, OR SLEEPING BAG FOR NAPPING** (Toddlers should not nap in car seats, highchairs, recliners or other items not mentioned above)
- **PRESCHOOLERS SHOULD BE PROVIDED WITH A MAT, CRIB, COT, BED, SOFA, OR SLEEPING BAG FOR NAPPING**
- **A PARENT'S DIRECTIVE CAN ONLY GIVE YOU PERMISSION TO CHANGE THE SLEEPING POSITION OF AN INFANT AND CANNOT GIVE PERMISSION TO SLEEP THEM IN UNAPPROVED CRIBS, PORTA-CRIBS, PLAYPENS OR OTHER ITEMS.**
- **CHECK OUT THE SIDS AND CRIB SAFETY INFORMATION IN THIS ISSUE ON PAGES 4 AND 5**

*(more information on page 4)*



#### Inside this issue

From Your Licensor .....	1
Child Care Alert.....	4
Supervision U .....	6
Did You Know .....	7
Activities .....	8
Web Sites .....	9
Book List .....	10
Open House .....	11
County Contacts .....	12



**Child Care Provider  
Open House  
&  
Supervision U  
Graduation  
See p. 11**



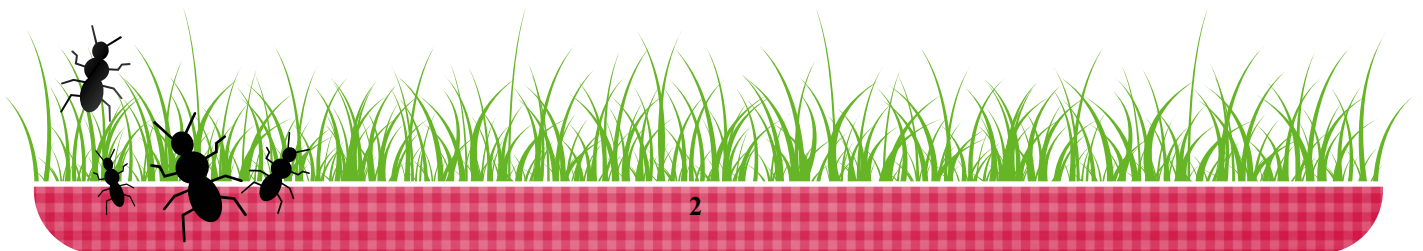
## From Your Licensor...continued from page 1

### Practical Strategies for Promoting Healthy Communication Patterns

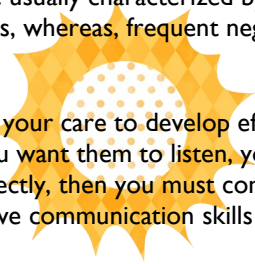
Research on early brain development indicates that it is extremely important for parents and caregivers to begin communicating with children from the day they are born (if not before). Talking to a child, singing to a child, reading to a child, and touching a child are all forms of communication that stimulate a child's physical, social, emotional, and cognitive development. As children grow older, their ability to communicate and their knowledge of the rules of communication rapidly expand. The following suggestions are intended to help you communicate more effectively with the children in your care.

- **Think about who you are communicating with.** Communicating with children, especially very young children, requires a unique set of skills and a basic understanding of child development. Children can be effective communicators; however, they are limited by their developmental capacities. For example, a newborn cannot verbally articulate his need for a diaper change. Instead, he communicates this need through crying. Understanding where a child lies on the developmental spectrum can prevent adults from having unrealistic expectations concerning a child's language and comprehension abilities. It is also important to communicate on the same level as the child. Using language that children understand helps facilitate communication. This can also be done by physically coming down to the child's level (e.g., bending down on one knee so that face-to-face interaction can take place).
- **Pay attention to non-verbal messages.** We (adults and children) communicate very strong messages through our non-verbal behavior. Facial expressions, body posture, hand gestures, and tone of voice are all examples of non-verbal communication. You can enhance your ability to communicate with children by paying close attention to children's non-verbal messages. Children do not always possess the vocabulary necessary to articulate their emotions; therefore, it is important to learn to interpret non-verbal behavior, as well as seek clarification when you are unclear how a child feels. Also, it is helpful to understand the impact of your own non-verbal messages. For example, an angry glare can have the same impact as a harsh word.
- **Be an active listener.** An essential aspect of effective adult-child communication is the ability and/or willingness to listen to what children have to say. Being an active listener involves trying one's best to understand the perspective of the other person. When you actively listen to a child, you acknowledge and respect her point of view. For example, when listening to a child, you can nod your head or say, "I understand," which conveys to the child that what she has to say is important. Another aspect of active listening is seeking clarification from a child when the message is not understood. This can be done by simply asking, "What did you mean when you said...?" or "Help me understand what you are saying."
- **Communicate frequently.** In order for you to build strong relationships with the children in your care, you must communicate with them on a regular basis. Frequent communication will help you better understand the unique needs of each child. This means that you must create opportunities to talk and listen to children. Communication can take place in a wide variety of situations (e.g., while playing on the playground, at the lunch table, etc.).
- **Communicate clearly and directly.** Effective communication is clear and direct. This means that the intended message can be clearly understood by the listener and is directed at the appropriate target (Epstein, Bishop, Ryan, Miller, and Keitner, 1993). Children will be much more likely to develop effective communication skills if you model and encourage clarity and directness.

(continued on next page)



- **Use “I” messages.** I-messages are statements that reflect what a sender is thinking or feeling at a particular moment. These statements are typically nonthreatening and non-judgmental. I-messages stand in contrast to You-messages, which often put down, blame, and nag children (Dinkmeyer, McKay, and Dinkmeyer, 1989). For example, you may say to a child, “You did a bad job of picking up those toys.” In contrast, using an I-message you could say, “I think you could have put more effort into picking up those toys.” I-messages tend to be phrased more positively and encourage cooperation.
- **Emphasize the positive.** While it is often necessary to address problematic behavior with children, effective communication is primarily positive. Healthy relationships are usually characterized by more positive than negative interactions. Positive messages tend to build relationships, whereas, frequent negative messages tend to tear them down.
- **Model effective communication skills.** If you want the children in your care to develop effective communication skills, you must be willing to model these skills for them. If you want them to listen, you must listen to them. If you want them to communicate their thoughts clearly and directly, then you must communicate your thoughts and feelings in a clear and direct manner. If you model effective communication skills for the children in your care, you will be amazed at how quickly they follow your lead.



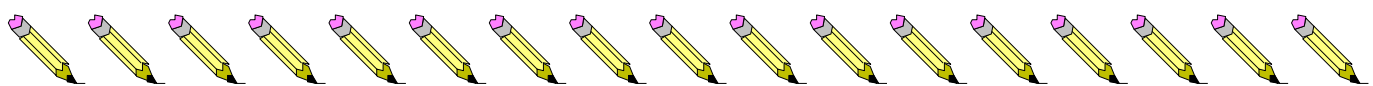
#### References

Bray, J.H., and Heatherington, E.M. (1993). Families in Transition: Introduction and Overview. *Journal of Family Psychology*, 7, 3-8.

Dinkmeyer, D., McKay, G.D., and Dinkmeyer, J.S. (1989). *Early Childhood STEP: Systematic Training for Effective Parenting of Children under Six*. Circle Pines, Minnesota: American Guidance Service.

Epstein, N.B., Bishop, D., Ryan, C., Miller, I., and Keitner, G. (1993). The McMaster Model View of Healthy Family Functioning. In Froma Walsh (Ed.), *Normal Family Process* (pp. 138-160). New York, NY: The Guilford Press.

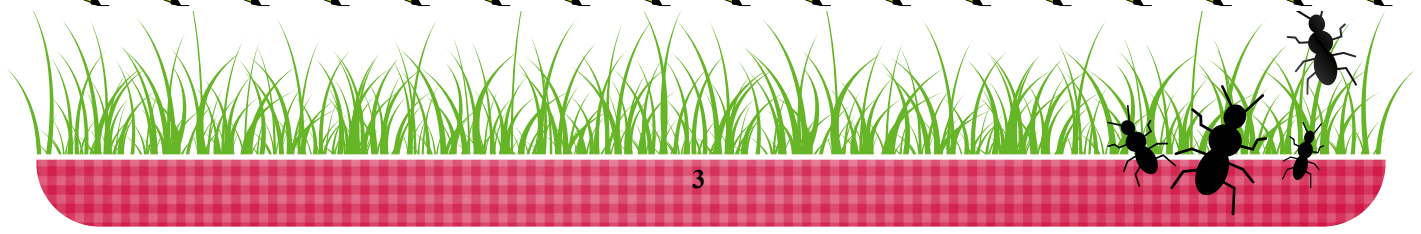
*Dr. Stephen Green is an Assistant Professor and Child Development Specialist with Texas Cooperative Extension. His areas of specialty include child development, child care, and father-child relationships.*



## IMPORTANT NOTICE

As of 2010, The Minnesota Department of Health is asking child care providers to report chickenpox (varicella) and shingle cases (zoster) in children or staff. This request is to help MDH monitor and describe chickenpox and shingles disease in Minnesota. They request that you fill out a form or call them with the report. By phone, call MDH at 651-201-5414 or toll free at 1-877-676-5414. The website to obtain the reporting form is

<http://www.health.state.mn.us/divs/idepc/diseases/varicella/childcare/index.html>



# Child Care Alert

## 245A.1435 REDUCTION OF RISK OF SUDDEN INFANT DEATH SYNDROME IN LICENSED PROGRAMS

- (a) When a license holder is placing an infant to sleep, the license holder must place the infant on the infant's back, unless the license holder has documentation from the infant's parent directing an alternative sleeping position for the infant. The parent directive must be on a form approved by the commissioner and must include a statement that the parent or legal guardian has read the information provided by the Minnesota Sudden Infant Death Center, related to the risk of SIDS and the importance of placing an infant or child on its back to sleep to reduce the risk of SIDS.
- (b) The license holder must place the infant in a crib directly on a firm mattress with a fitted crib sheet that fits tightly on the mattress and overlaps the mattress so it cannot be dislodged by pulling on the corner of the sheet. The license holder must not place pillows, quilts, comforters, sheepskin, pillow-like stuffed toys, or other soft products in the crib with the infant. The requirements of this section apply to license holders serving infants up to and including 12 months of age. Licensed child care providers must meet the crib requirements under section 245A.146.

### 245A.146 CRIB SAFETY REQUIREMENTS

Subdivision 1. Consumer product safety Web link. The commissioner shall maintain a link from the licensing division Web site to the United States Consumer Product Safety Commission Web site that addresses crib safety information.

#### Subd. 2. Documentation requirement for license holders

- (a) Effective January 1, 2006, all licensed child care providers must maintain the following documentation for every crib used by or that is accessible to any child in care:
  - (1) the crib's brand name; and
  - (2) the crib's model number.
- (b) Any crib for which the license holder does not have the documentation required under paragraph (a) must not be used by or be accessible to children in care.

#### Subd. 3. License holder documentation of cribs

- (a) Annually, from the date printed on the license, all license holders shall check all their cribs' brand names and model numbers against the United States Consumer Product Safety Commission Web site listing of unsafe cribs.
- (b) The license holder shall maintain written documentation to be reviewed on site for each crib showing that the review required in paragraph (a) has been completed, and which of the following conditions applies:
  - (1) the crib was not identified as unsafe on the United States Consumer Product Safety Commission Web site;
  - (2) the crib was identified as unsafe on the United States Consumer Product Safety Commission Web site, but the license holder has taken the action directed by the United States Consumer Product Safety Commission to make the crib safe; or
  - (3) the crib was identified as unsafe on the United States Consumer Product Safety Commission Web site, and the license holder has removed the crib so that it is no longer used by or accessible to children in care.



- (c) Documentation of the review completed under this subdivision shall be maintained by the license holder on site and made available to parents of children in care and the commissioner.
- (d) Notwithstanding Minnesota Rules, part 9502.0425, a family child care provider that complies with this section may use a mesh-sided playpen or crib that has not been identified as unsafe on the United States Consumer Product Safety Commission Web site for the care or sleeping of infants.

**Subd. 4.Crib safety standards and inspection**

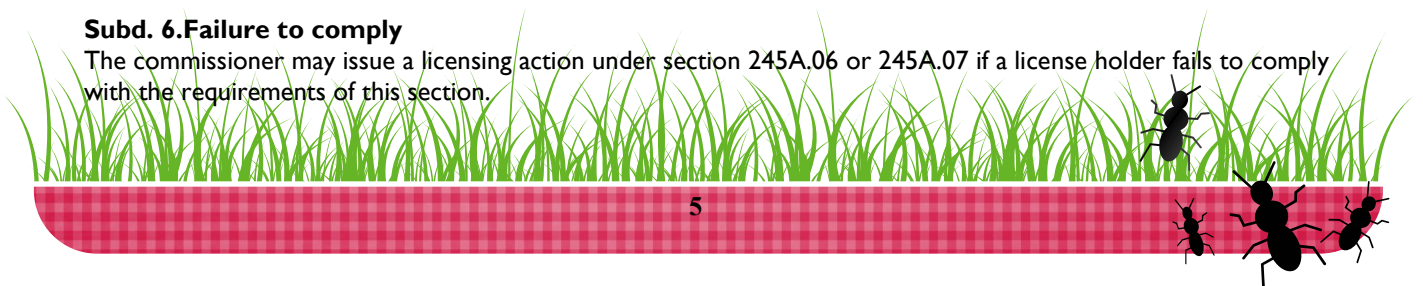
- (a) On at least a monthly basis, the license holder shall perform safety inspections of every crib used by or that is accessible to any child in care, and must document the following:
  - (1) No corner posts extend more than 1/16 of an inch;
  - (2) No spaces between side slats exceed 2.375 inches;
  - (3) No mattress supports can be easily dislodged from any point of the crib;
  - (4) No cutout designs are present on end panels;
  - (5) No heights of the rail and end panel are less than 26 inches when measured from the top of the rail or panel in the highest position to the top of the mattress supports in its lowest position;
  - (6) No heights of the rail and end panel are less than nine inches when measured from the top of the rail or panel in its lowest position to the top of the mattress support in its highest position;
  - (7) No screws, bolts, or hardware are loose or not secured, and there is no use of woodscrews in components that are designed to be assembled and disassembled by the crib owner;
  - (8) No sharp edges, points, or rough surfaces are present;
  - (9) No wood surfaces are rough, splintered, split, or cracked;
  - (10) No tears in mesh of fabric sides in non-full-size cribs;
  - (11) No mattress pads in non-full-size mesh or fabric cribs exceed one inch; and
  - (12) No unacceptable gaps between the mattress and any sides of the crib are present as follows:
    - (i) when the noncompressed mattress is centered in the non-full-size crib, at any of the adjustable mattress support positions, the gap between the perimeter of the mattress and the perimeter of the crib cannot be greater than one-half inch at any point. When the mattress is placed against the perimeter of the crib, the resulting gap cannot be greater than one inch at any point; and
    - (i) when the noncompressed mattress is centered in the full-size crib, at any of the adjustable mattress support positions, the gap between the perimeter of the mattress and the perimeter of the crib cannot be greater than 1 1/16 inch at any point. When the mattress is placed against the perimeter of the crib, the resulting gap cannot be greater than 1-3/8 inch at any point.
- (b) Upon discovery of any unsafe condition identified by the license holder during the safety inspection required under paragraph (a), the license holder shall immediately remove the crib from use and ensure that the crib is not accessible to children in care, and as soon as practicable, but not more than two business days after the inspection, remove the crib from the area where child care services are routinely provided for necessary repairs or to destroy the crib.
- (b) Documentation of the inspections and actions taken with unsafe cribs required in paragraphs (a) and (b) shall be maintained on site by the license holder and made available to parents of children in care and the commissioner.

**Subd. 5.Commissioner inspection**

During routine licensing inspections, and when investigating complaints regarding alleged violations of this section, the commissioner shall review the provider's documentation required under subdivisions 3 and 4.

**Subd. 6.Failure to comply**

The commissioner may issue a licensing action under section 245A.06 or 245A.07 if a license holder fails to comply with the requirements of this section.



# SUPERVISION U

## UPCOMING TRAINING

**NOTE:** WSC denotes the Western Service Center in Apple Valley and NSC denotes the Northern Service Center in West St. Paul.

### CORE courses (required) Dates Time Location

1. **Super Care Starts with SuperVision 3/25/10** — 6:30 - 8:30 — WSC L139

2. **Supervision Through the Stages is a two part class. You must attend both sessions.**

- **Supervision Thru the Infant/Toddler Stages**  
4/1/2010 — 6:30-8:30 PM — WSC L139  
(These classes meet the child development training requirement)
- **Supervision Thru the Preschool Stages**  
4/15/2010 — 6:30-8:30 PM — WSC L139

*Both preschool and toddler courses need to be completed for Supervision U*

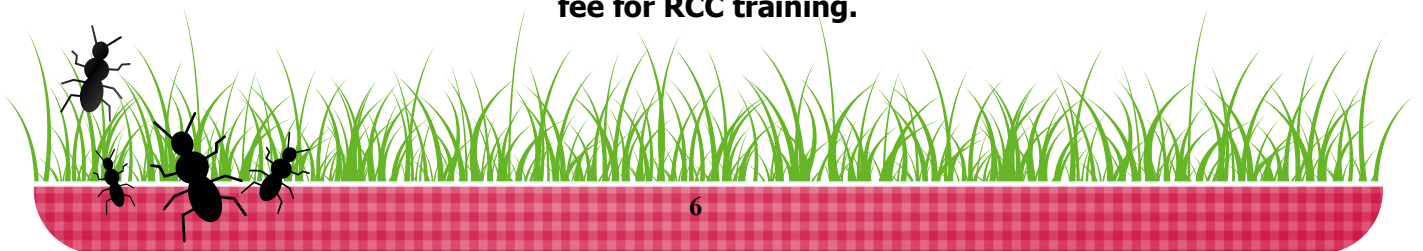
3. **Managing The Child Care Environment — Watch for announcements in 2010**

### ELECTIVES (choose three)

1. **Rule Review/Handbook** Pick up a handbook from your licensor and take the post test for 2 hours of training credit
2. **Group Dynamics** — 4/13/2010 — 6:00-8:00 PM — sponsored through Dakota County Family Child Care Association in Rosemount. Check out DCFCCA web page for location. <http://www.dcffcca.org>
  - 7/22/2010 — 6:30-8:30 PM — WSC L139 — sponsored by Dakota County Licensing — 14955 Galaxie Avenue, Apple Valley, MN
3. **Temperament** (Check out RCC for classes on this subject)
4. **Stress ,Burnout & Adult Self-esteem** (Check out RCC for classes on this subject)
5. **Behavior Guidance** (Check out RCC for classes on this subject)

To register for the **FREE Dakota County licensing sponsored classes**, contact Sue Jahnke @ [susan.jahnke@co.dakota.mn.us](mailto:susan.jahnke@co.dakota.mn.us) or **952-891-7229**

To register for classes offered through RCC, call **651-641-3549** or register on-line at [www.mnstreams.org](http://www.mnstreams.org) or mail in the class registration form from the RCC catalog. There is a class fee for RCC training.



## Did You Know?

That you cannot leave a child unattended in a highchair or infant swing. When you use equipment with infants and toddlers, you must be right there to see that the child does not get out of the equipment on their own or with the help of other children.

We have had a number of injuries of toddlers and infants being hurt while the provider walked away, just for a moment, to help a parent get a child ready to leave, change a diaper, etc. The caregiver thinks

the child is secured in the equipment, the child may be experimenting at how to get loose, stand up, or another child comes along and, in an attempt to help them or play with them, the younger child gets hurt.

Remember, that in order to supervise children under school age you must always be able to intervene to protect their health and safety. Observing children's activity *and* being close enough to try and prevent harm means that you are supervising well.

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*"You can not leave a child unattended in a highchair or infant swing."*

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## Did You Know?

...that all stairways accessible to children between the ages of 6 and 18 months, need to be made inaccessible? That means that if your group is on second floor and there is a stairway leading down to the first floor, a gate or barrier needs to be in place at all times. Most providers put a gate at the top of the stairs. If you read the manufacturer's instructions, they will specify that the **pressure gate** should **NOT** be used at the tops of stairs, for the obvious reason that children can push it down and falls down the stairs could result. A pressure gate is acceptable at the bottom of a staircase or to prevent access to an unlicensed area

of the home, as long as it is not at the tops of stairs.

It is necessary to *install* a gate or barrier at the tops of stairs so that it cannot be pushed open by anyone—not just the infant or toddler. Gates that need installation are available at most hardware, home improvement and discount stores. They are also available from on-line retailers.

Be sure to prevent stairway accidents by **installing** that gate or barrier at the tops of stairways—no pressure gates allowed!



# Adding Feeling Activities to your daily activities

By Becky Elrasheedy

A major success factor for children achieving their goals in life is having a healthy emotional intelligence. A child's emotional intelligence helps children understand their own feelings, be able to control behavior, gain empathy towards others, form healthy relationships, and be successful in life. Children are not born with emotional intelligence; it is a completely learned activity which means caregivers have a very important role in helping children become successful.

One aspect of gaining emotional intelligence is understanding feelings. Recognizing a child's own feelings is not always easy. It is important for caregivers to incorporate activities to help children understand the various feelings that they experience as well as how to control their aggressive impulses. Feeling activities need to be scheduled as part of a child's daily curriculum. The following are some ideas that you can use to start developing a curriculum to help children gain emotional intelligence. Once you start with these activities, incorporate you own thoughts about activities that can help children become emotionally intelligent.

Obtain books that talk about feelings and read these to the children daily. Show the pictures to the children and ask them to really look at the faces or the body language that is demonstrated in the illustration. Have the children demonstrate the facial expressions and look at each other. Have them look at the body language and try to demonstrate this and talk about how they feel. Stop and ask each child how they feel about the story at different sections in the book. (See book list in newsletter)

Download pictures of people with different expressions and discuss how the person may be feeling. As you start with showing the photos, you will probably need to give a name to the feeling and then as children understand that the different facial expressions demonstrate different feelings, have the children tell you what they think is demonstrated. Laminate these photos so that you can use them with different activities. For a variety of photos displaying feelings check out this web site,

<http://www.co.dakota.mn.us/NR/rdonlyres/000034d1/nqrxkzwwtzrclcfpcwfaqazafjdddag/Feelingsfacesactivities.pdf>

- "Match and Story Game" Have a variety of photos of different people exhibiting a variety of feelings in their expressions such as sad, happy, excited, mad etc. Have children match photos of people who are demonstrating the same feeling. Ask the child to tell you why the person may be: mad, sad, happy, excited, etc. Tell a short story emphasizing a certain feeling and ask the child to find a person who demonstrates how the person in the story would feel.
- "Match Game" Make two of the same photo and have the photos face down on a table. Have children take turns turning over two cards and if they match, they get to keep the pair and choose one more pair. If they don't match, turn the cards back over and the next person get to choose two.
- "I can look like that" Have mirrors handed out to the children and ask them to try and look like a photo that you have selected. Ask them to name the feeling and then have each child look at the other children with the same expression. Talk about what makes them mad, sad, happy, etc.

Put some plain paper together in a booklet format and have a title page already made up that shows a picture expressing a feeling and a title such as "I Am Happy When." Put this title page together with the pages to form a book for each feeling and have the children draw, write, or cut and paste the things that make them happy, sad, etc.

Have different shapes cut out for eye brows, eyes, mouths and noses. Be sure to make the shapes very expressive. Have sock puppets with Velcro sewed or glued onto the toe part where you would have eyebrows, eyes, noses, and mouths. Let the children make different facial expressions out of these.

Have drawings or photos of faces made in sets of 4. Have around 10 different sets. Make these pictures card size and laminate them. With the cards you can play "go feel," in the same way you would "go fish." Whenever someone gets a pair, have them act out the feeling.

(continued on next page)



Listen to a variety of music and have children move around to it and express how they feel when the music is playing. There is a great book and CD set called Philadelphia Chicken by Sandra Boynton and it has wonderful songs like “dinosaur blues”, “faraway cookies”, and “I like to fuss.” Check out the other Sandra Boynton sets such as “Blue Moo”, “Dog Train” and “Rhinoceros Tap” which has a wonderful song entitled “Oh Lonely Peas” and “The Crabby Song” from Amazon.com. Amazon allows you to listen to each song so you can get a “feel” for the music styles. Other records to check out are Beethoven’s Wig, sing along songs, and regular classical music. “Fantasia” by Walt Disney is wonderful to watch, listen, and move to when teaching children about feelings.

Have paper plates and Popsicle sticks. Have children draw faces on the paper plates of how they feel after listening to music, watching a short cartoon, or reading a book. Have them hold up the face in front of them and see if the other children can guess how they feel.

Have children make a happy face and a sad face on two paper plates and glue the Popsicle stick on to the paper plate. Sit around in a circle and tell the children to hold up how they would feel when you ask them a variety of questions. Ask questions like, How would you feel if: You had ice cream for dinner?, Someone tore your picture you made, Your best friend was going to sleep over, You got a puppy for a pet, You found out you could fly, etc.

Have the children help make their own snacks with an English muffin. Put cream cheese on muffin and have children make faces with small pieces of fruit that you had cut, raisins, carrot slices, etc. Talk about what feeling they are trying to make. Have the children eat their snack and then demonstrate on their face what the feeling looks like. You can do this with things like a slice of bologna and cheese cut outs, pancake and fruit, etc.

Try these activities and think of more on your own that you can incorporate into your daily schedule. Watch for ideas on how to help children control their actions, when they are encountering strong feelings, in the next quarterly newsletter.

## Web Sites

**The following web sites have information about child development and referrals to Early Intervention services.**

Online “Help Me Grow” Referral Link for Early Intervention Services.

[http://parentsknow.state.mn.us/parentsknow/Newborn/HelpMeGrow\\_SpecialNeeds/ReferChild/index.html](http://parentsknow.state.mn.us/parentsknow/Newborn/HelpMeGrow_SpecialNeeds/ReferChild/index.html)

Parents Know: The most parent friendly website for Child Development Information.

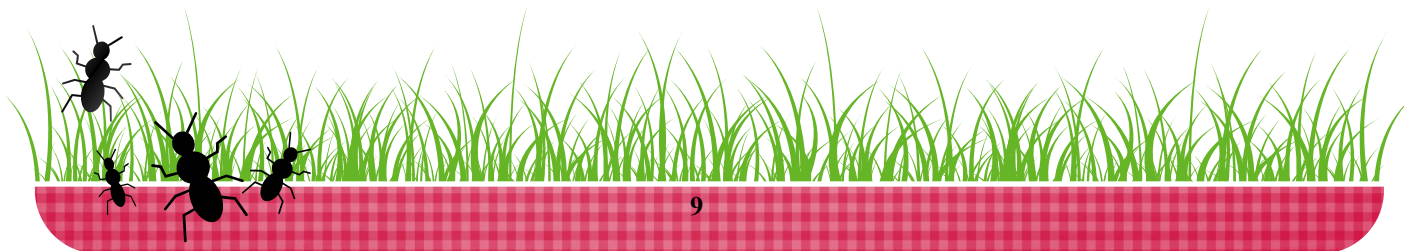
<http://parentsknow.state.mn.us/parentsknow/index.html>

Help Me Grow Minnesota (Minnesota Children with Special Health Needs) Website.

<http://www.health.state.mn.us/divs/fh/mcshn/ecip.htm>

Early Learning Services

[http://education.state.mn.us/MDE/Learning\\_Support/Early\\_Learning\\_Services/index.html](http://education.state.mn.us/MDE/Learning_Support/Early_Learning_Services/index.html)



# BOOK LIST FOR CHILDREN ADDRESSING FEELINGS

Compiled by Becky Elrasheedy

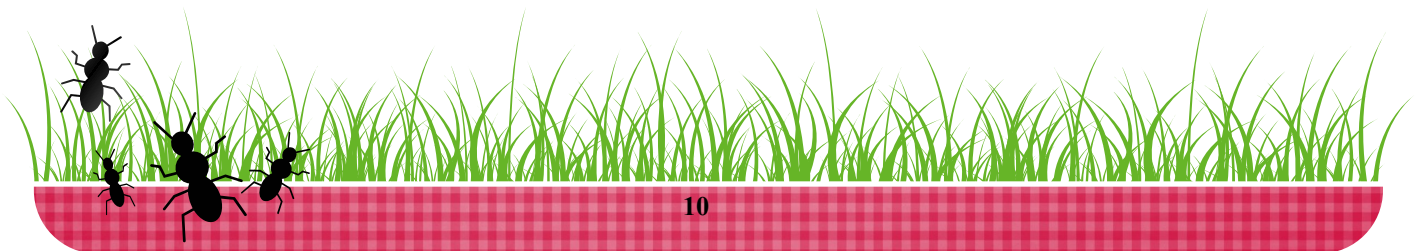
Most of these books can be ordered through Amazon.com, Barnes and Nobles, or most bookstores

- The Lovables in the Kingdom of Self-esteem by Diane Loomans; Starseed Press, P.O. Box 1082 Tiburon, CA 94920
- Mama, Do you love me? By Barbara M. Josse (Board book), Chronicle Books, 85 Second Street, San Francisco, CA 94105
- I'm glad I'm your mother by Bill and Kathy Horlacher, Standard Publishing Company
- I'm glad I'm your Grandma by Bill and Kathy Horlacher, Standard Publishing Company, Cincinnati Ohio.
- Today I feel Silly and other Moods that make my day by Jamie Lee Curtis Harper Collins Publishers
- When You're Mad and You Know it by Elizabeth Crary & Shari Steelsmith; Parenting Press, Inc Seattle WA (1-800-992-6657)
- I was so Mad by Mercer Mayer; A Golden Book
- All My Feelings at preschool Nathan's Day by Susan Conlin and Susan Levine Friedman; Parenting Press Inc, Seattle WA
- I'm Furious by Elizabeth Crary; Parenting Press, Inc. P.O. Box 75267, Seattle, WA 98125
- Tiger is a Scaredy Cat by Joan Phillips; Random House Publisher, New York
- When Sophie Gets Angry-Really, Really Angry... by Molly Bank; Scholastic, 1999
- Guess How Much I Love You by Sam McBratney; Candlewick, 1995
- Hug by Jez Alborough; Candlewick, 2000
- Alexander and the Terrible, Horrible, No Good, Very Bad Day by Judith Viorst; Aladdin, 1972
- Sometimes I Feel Like a Mouse-A book about feelings by Jeanne Modesitt and Illustrated by Robin Spowart
- Feelings by Aliki
- Lots of Feelings by Shelly Rotner
- The Feelings Book by Todd Parr (This is a board book and good to work with younger children)
- Mood Swings by Jim Borgman
- The Feelings Book: The Care & Keeping of Your Emotions (American Girl) (Paperback) by Dr. Lynda Madison (Author), Norm Bendell (Illustrator) This is a great book to work with older preschool-schoolage children
- Story of My Feelings (Hardcover) by Laurie Berkner (Author), Caroline Jayne Church (Illustrator) Book and CD
- Feelings to Share from A to Z by Todd Snow (Author), Peggy Snow (Author), Pamela Espeland (Editor), Carrie Hartman (Illustrator)
- What Are YOU So Grumpy About? by Tom Lichtenheld
- Andrew's Angry Words by Dorothea Lachner

Web Sites that have information and activities about feelings

<http://www.searchingwithin.com/journal/abptb/feel.html> list of feeling words

<http://www.atoz-childcare-directory.com/sad-feelings-activities.html> activities regarding sad



**DAKOTA COUNTY FAMILY CHILD CARE  
OPEN HOUSE AND SUPERVISION U GRADUATION  
MAY 6, 2010**

**In sincere appreciation for all that you do, Dakota County Child Care Licensing is hosting an OPEN HOUSE for all child care providers along with celebration of the 2010 SUPERVISION U graduates.**

**CHILD CARE LICENSING OPEN  
HOUSE FOR ALL CHILD CARE  
PROVIDERS  
6:30p — 8:30p**

**Refreshments and Fun  
IDEA STATIONS**

Transition Ideas  
Move It Program  
Shaken Baby Video  
and more

**Door Prize drawings**

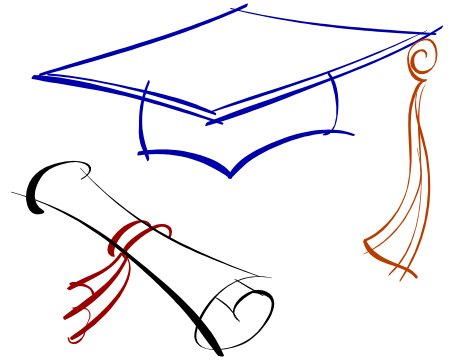
**SUPERVISION U  
GRADUATION  
7:00p**

“Diplomas” and graduation gifts  
will be presented.

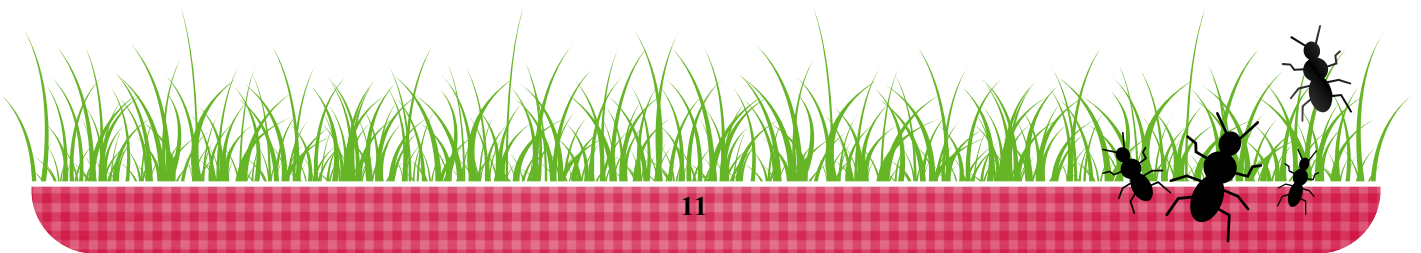
Please come and take a break, enjoy  
some cake and applaud your fellow  
providers and **Supervision U**  
graduates!



Western Service Center  
14955 Galaxie Avenue  
Apple Valley



Remember if you are going to be graduating from the Supervision U program in May that you need to contact Bill Hess at 952-891-7381 to be put on graduation list and send your worker copies of your training certificates.



## Dakota County Child Care Licensor Directory

### Hastings, Inver Grove Heights

Becky Elrasheedy 952-891-7361  
Becky.Elrasheedy@co.dakota.mn.us

### Apple Valley and Burnsville L-Z

Cases distributed among other licensors

### Farmington and West St. Paul

Bill Hess 952-891-7381  
Bill.Hess@co.dakota.mn.us

### South St. Paul and Rosemount S-Z

Maura Johnson 952-891-7362  
Maura.Johnson@co.dakota.mn.us

### Lakeville & surrounding areas, Burnsville A-K, and Mendota Heights

Jan Kochendorfer 952-891-7363  
Jan.Kochendorfer@co.dakota.mn.us

### Rosemount A-R

Amy Novak 952-891-7841  
Amy.Novak@co.dakota.mn.us

### Eagan

Joan Visnovec 952-891-7380  
Joan.Visnovec@co.dakota.mn.us

### Case Aide (General)

Susan Jahnke 952-891-7229  
Susan.Jahnke@co.dakota.mn.us

### Supervisor

Marian Eisner 952-891-7460  
Marian.Eisner@co.dakota.mn.us

### Website:

[www.dakotacounty.us/HealthFamily/  
ChildCareProviders](http://www.dakotacounty.us/HealthFamily/ChildCareProviders)



## PASS IT ON

### Dakota County Social Services

14955 Galaxie Ave  
Apple Valley, MN  
55124

Phone:  
(952) 891-7400  
Fax:  
(952) 891-7473



The little kids would like to go to school like the big kids so when the big kids go to school, so does Valerie Halverson's preschool kids. Each one of the preschoolers has a backpack filled with 4 letters, 3 numbers, 2 colors, 4 shapes, and 2 songs. (all of the backpacks are different) They take turns and each one goes through their backpack and says and sings everything that is in them.

They do this all around the circle one by one and they just love it!

Sherry Miller says, "That she has learned that everyone has their own unique way and that she respects, listens, and learns from parents. She has learned not to emphasize her own opinion on how to raise children."