



# Child Start

incorporated

CHILD AND FAMILY SERVICES

## **FAMILY HANDBOOK**

**2018-2019**

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## **INTRODUCTION**

The purpose of this handbook is to provide parents, guardians and families with information regarding the services, policies, procedures and regulations of our agency and the Head Start and Early Head Start programs.

Please keep this guide in a convenient, safe place so you can refer to it throughout the program year. After reviewing this information, if you have any questions or concerns, please speak with your Center Director, Family Advocate/Family Services Partner, or your child's teacher.

The information contained in this handbook may be modified by changes in federal, state or local regulations.

## **WHAT IS CHILD START, INC.?**

Child Start, Inc. (Child Start) is a non-profit organization that operates the Early Head Start and Head Start programs in Napa and Solano Counties.

The Early Head Start and Head Start programs provide comprehensive services to over 1000 children ages 0 – 5 and pregnant women and their families through Part Day Part Year and Full Day Full Year child development centers, partnerships with licensed childcare centers and family child care homes, state pre-schools, and the Home Base option, which includes home visits and socialization opportunities.

Child Start also operates the critically acclaimed children's literacy project, Raising A Reader.

## **OUR MISSION**

To support the educational, social and emotional development of children, ages 0-5, by providing high quality, comprehensive and family-focused early childhood services in partnership with the community.

**Adopted May**

## HOW SERVICES ARE PROVIDED

Several types of program options are offered through which families are provided comprehensive child development services.

### **EARLY HEAD START**

Option	Classroom Type	Ages Served	County
<b>Home Base</b>	Infant/Toddler	Pregnant Women Children 0 – 3 years	Napa Solano
<b>Center FDY</b>	Toddlers	Children 0 – 3 years	Napa Solano
<b>Child Care Center Partnerships</b>	Infant/Toddler	Children 0 – 47 months	Napa Solano
<b>Family Child Care Home Partnerships</b>	Infant/Toddler	Children 0 - 47 months	Napa Solano

### **HEAD START**

Option	Classroom Type	Ages Served	County
<b>Center Part Day Part Year</b>	Preschool	Children 3 – 5 yrs	Napa Solano
<b>Center Full Day Full Year</b>	Preschool	Children 3 – 5 yrs	Napa Solano
<b>State Pre-School Partnerships</b>	Preschool	Children 3 – 5 yrs	Napa Solano

## **HOW SERVICES ARE PROVIDED**

### **Early Head Start Home Base**

This program option supports families, within the home environment, during pregnancy and after the birth of their infant to age three. Comprehensive services are delivered during weekly home visits that promote quality nurturing relationships between infants and their primary caregivers. Socializations are provided twice a month to provide opportunities for families to interact with others.

### **Early Head Start Full Day/Full Year**

A center-based program that is focused on providing high quality services to children, 0 – 3 years, in a secure and nurturing environment that promotes physical, social, emotional, cognitive, and language development.

### **Early Head Start - Child Care Partnerships Full Day/Full Year**

A partnership with licensed child care centers and family child care homes that is focused on providing high quality services to children, birth to 47 months, in a secure and nurturing environment that promotes physical, social, emotional, cognitive, and language development of infants and toddlers.

### **Head Start Part Day/Part Year & 6 Hour /Part Year**

A center-based program that operates either Monday through Thursday for 3.5 to 4 hours each day **OR** 6 hours per day Monday through Friday, for children 3-5 years of age. Each school year, families are asked to participate in two educational home visits and two parent conferences with the teaching staff. This is to inform parents of their child's progress, to provide opportunities for engagement in their child's education plan, to share suggestions for home activities, and to support each family's interests, goals, and needs.

### **Head Start Full Day/Full Year Preschool**

A center-based program that operates Monday through Friday for a minimum of 30 hours a week to meet the needs of working families or enrolled in school or a training program. Contracted days and hours of service are based upon each parent's/guardian's work or school schedule. Each school year, families are asked to participate in two educational home visits and two parent conferences with the classroom staff. Visits are scheduled at least two weeks in advance at a time most convenient for the family. This allows the families and staff an opportunity to get to know one another and talk about some of the wonderful things that can occur while in Head Start.

### **State Pre-School Partnerships**

A center-based program that is focused on providing high quality services to children, ages 3 - 4 years of age in partnership with local state pre-school programs. Some of these partnerships offer services that are designed to meet the needs of working families and/or going to school. In such partnerships, center-based services are combined with home-based services for a portion of the year.

## **ELIGIBILITY CRITERIA**

Child Start has a formal process to define, approve and implement a set of selection criteria to ensure that we are providing (Early) Head Start services to children and families most in need. The program gives priority to applicants who are income or categorically eligible, including at risk, public assistance, homeless, foster or kinship care families.

Child Start ensures that no more than 35% of participants whose income falls between 101% and 130% of Federal Poverty Guidelines and no more than 10% whose income exceed 130% of Federal Poverty Guidelines will be served. In addition, at least 10% of slots will be made available to children with disabilities.

Child Start serves pregnant women and children ages 0-3 in the Early Head Start program. All enrolled EHS families remain eligible for services until they age out. To be eligible for Head Start, a child must be at least three years of age by the date used to determine eligibility for public schools except when an Early Head Start child turns 36 months while being served in Early Head Start and is developmentally ready to transition to a Head Start classroom. Head Start children may continue to be served in a Head Start classroom until kindergarten is available. Children who are still age-eligible are considered as a re-enrollee the following year in both HS and EHS.

Additional priority and eligibility considerations include:

1. Family is receiving a California State Childcare Subsidy.
2. Family has been referred to Child Start by a community partner. At some sites, for example the Therapeutic Child Care Center, families participating in specific Health and Human Services programs receive higher priority.
3. Family has a child who is at risk of abuse, neglect, or exploitation, or receiving child protective services through the county welfare department.
4. Family has parents that are incapacitated and unable to provide care.
5. Family lives in a resident neighborhood that currently has a partnership with Child Start (i.e., Mayacamas, Vineyard Crossing, Sereno Village or Sunset Creek).
6. Family is enrolled in a licensed child care center, or family child care home that is currently part of the Early Head Start – Child Care Partnership program; or the family is enrolled in a partnering California State Preschool program (i.e., Solano College, Napa County Office of Education, etc.)

## **ENROLLMENT**

During an initial enrollment intake period, parents will be asked to provide specific documentation and complete enrollment forms either prior to their child participating and/or within a set timeline from the date their child enters the program. Staff will review age appropriate Pre-Enrollment Health & Family History or Prenatal Health and Social History to determine if Early Head Start or Head Start placement is the most appropriate setting for the child.

Verification of the child's birth date and family income are required.

State Licensing requires the child's immunizations be up-to-date or complete for age *prior* to the child entering the group setting. Parents will be required to provide proof of immunization status. Immunization documentation must be signed or stamped by a health care provider

A current well child exam and a No Risk Factor Assessment for children under 4 or a Tuberculosis Test for children 4 years or older must be in the child's file within 30 days. In order for the well child exam to be considered current and complete, it must be completed within the timelines and fulfill all required health screenings/tests defined on the CHDP periodicity schedule (Table 101.1 included in the back of this handbook.)

All requirements for enrollment are based on State Licensing regulations and Early Head Start/ Head Start Performance Standard mandates. If the requirements are not met within the appropriate time-lines, the child must be excluded from participation until documentation is provided. As necessary, the Center Director, Family Advocate, Home Visitor, or other Family Services staff can assist the family in gathering required documentation, finding health care providers, scheduling appointments, etc.

A Child will be considered for placement when his/ her name appears at top of the Priority Placement Waitlist. Possible reasons for not considering a child might include:

- Family is missing income verification
- Family is missing birth day verification
- Family has not completed the intake process

If a family intends to leave the program, a notice 2 weeks prior to the date is appreciated. Parents are asked to communicate verbally with their Center Director, Family Advocate, Home Visitor, or other Family Services staff of the pending change to their enrollment status.

## **PARENT'S RIGHTS**

As a Parent/Authorized Representative, you have the right to:

- Enter and inspect the child care center without advance notice whenever children are in care.
- File a complaint against the licensee with the licensing office and review the licensee's public file kept by the licensing office.
- Review, at the child care center, reports of licensing visits and substantiated complaints against the licensee made during the last three years.
- Complain to the licensing office and inspect the child care center without discrimination or retaliation against you or your child.
- Request in writing that a parent not be allowed to visit your child or take your child from the child care center, provided you have shown a certified copy of a court order.
- Receive the licensee name, address, and telephone number of the local licensing office.
- Be informed by the licensee, upon request, of the name and type of association to the child care center for any adult who has been granted a criminal record exemption, and that the name of the person may also be obtained by contacting the local licensing office.
- Receive, from the licensee, the Caregiver Background Check Process form.

Community Care  
Licensing 101 Golf  
Course Dr. Ste. A-230  
Rohnert Park, CA  
94928 (707) 588-  
5026

**NOTE: CALIFORNIA STATE LAW PROVIDES THAT THE LICENSEE MAY DENY ACCESS TO THE CHILD CARE CENTER TO A PARENT/AUTHORIZED REPRESENTATIVE IF THE BEHAVIOR OF THE PARENT/AUTHORIZED REPRESENTATIVE POSES A RISK TO CHILDREN IN CARE.**

***A SIGNED COPY OF THIS ACKNOWLEDGEMENT MUST BE KEPT IN THE CHILD'S FILE AND A COPY OF THE SIGNED NOTIFICATION GIVEN TO THE PARENT/AUTHORIZED REPRESENTATIVE.***

## **CODE OF CONDUCT**

It is the expectation that all adults in Head Start settings conduct themselves in the following manner:

- With Courtesy
- With Respect
- With Patience
- By Treating People the Way You Want to be Treated
- By Modeling How We Want Our Children to Treat Others
- By Acknowledging the Cultures and Practices of Others

Under no circumstances will the following behaviors be allowed:

- Physical or Verbal Punishment of Children
- Threats to Children, Parents/Guardians, or Staff
- Swearing and Cursing
- Smoking within 50 feet of the building
- Quarreling, Verbal Fighting, or Yelling at Children, Staff, or Other Parents/Guardians
- Hitting or Physically Harming a Child, Staff Person, or Other Parents/Guardians

Please do not use cell phones at the sites, including during pick-up and drop-off of children.

Parents/guardians will be asked by staff to stop the above-mentioned behaviors if they occur

If parents/guardians continue to quarrel, verbally fight, or make threats, staff will call the police. Head Start services may be affected.

When appropriate, staff will refer the parent/guardian to Child Start's Conflict Resolution Procedures or offer other referrals for counseling services.

## **PERSONAL RIGHTS**

Each child receiving services from a child day care facility shall have rights which include, but are not limited to, the following:

- To be accorded dignity in his/her personal relationships with staff and other persons.
- To be accorded safe, healthful, and comfortable accommodations, furnishings and equipment to meet his/her needs.
- To be free from corporal or unusual punishment, infliction of pain, humiliation, intimidation, ridicule, coercion, threat, mental abuse or other actions of a punitive nature, including but not limited to: interference from daily living functions, including eating, sleeping or toileting; or withholding of shelter, clothing, medication, or aids to physical functioning.
- To be informed, and to have his/her authorized representative, if any, informed by the licensee of the provisions of the law regarding complaints including, but not limited to, the address and telephone number of the complaint receiving unit of the licensing agency and of information regarding confidentiality (see below).
- To be free to attend religious services or activities of his/her choice and to have visits from the spiritual advisor of his/her choice. Attendance at religious services, either in or outside the facility, shall be on a completely voluntary basis. In child day care facilities, decisions concerning attendance at religious services or visits from spiritual advisors shall be made by the parent(s)/guardian(s) of the child.
- Not to be locked in any room, building, or facility premises by day or night.
- Not to be placed in any restraining device except a supportive restraint approved in advance by the licensing agency.

**The representative/parent/guardian has the right to be informed of the appropriate licensing agency to contact regarding complaints, which is:**

Community Care  
Licensing 101 Golf  
Course Dr. Ste. A-230  
Rohnert Park, CA  
94928  
(707) 588-5026

## **EMPLOYEE STANDARDS OF CONDUCT**

While fulfilling their job responsibilities, employees are expected to uphold agency values, and:

- Respect and promote the unique identity of each child and family and refrain from characterizing people on the basis of gender, race, ethnicity, culture, religion, disability, age, or economic status.
- Follow agency policies on confidentiality of information about children, families and co-workers, and share agency information only with individuals who have a real business need to know it; if unsure about whether or not to provide information to someone, employees should ask their supervisor.
- Ensure that no child is left alone or unsupervised while under their care.
- Use positive methods of child guidance and not: (1) engage in behavior which may negatively affect a child's body, (2) use emotional punishment or humiliation, or (3) employ methods of discipline that involve isolation, the use of food as a punishment or reward, or the denial of basic needs.
- Not seek or accept personal tips, favors, or anything of monetary value.
- Know where all written policies, procedures and regulations affecting their employment with Child Start are located at their work sites.

## **CONFIDENTIALITY POLICY**

When communication with outside providers is needed for continuity of services for your family as well as supporting your child in their Head Start setting, parents must give Child Start Inc. permission to access or exchange the specified information with that provider. This permission will be documented on the PII Disclosure Authorization form (AD12b) and the Authorization to Request Information form (AD14)

Child Start respects each family's right to privacy and confidentiality. Staff members secure the family's written consent before disclosing information to other agencies and professionals.

Information will be shared for reasons that will increase family functioning and ensure that services are provided in the most efficient and effective manner. In cases such as threats of suicide, harm to others, or suspected child abuse, staff will consult with supervisors and outside professionals for assistance. (See Child Abuse Reporting Law).

Medical information is confidential and not shared with anyone except designated staff and partners. Personal information about a child/family is not discussed with volunteers or other parents/ guardians. Child files and Medication Logs are locked when not in use. If medical information needs to be obtained from a provider, the (AD14) must be completed by Child Start staff and signed by the child's parent/ guardian.

Written records of individual children and their families are kept in locked cabinets at each site. Access to these records is limited to the staff who provide comprehensive services. Families always have access to all of their own child's records including confidential files.

## POSITIVE DISCIPLINE AND GUIDANCE POLICY FOR CHILDREN

Child Start uses an approach to discipline and guidance that emphasizes respect for each child; developmentally appropriate expectations of children's behavior; and the use of positive discipline and guidance strategies.



Child Start believes that children find security and direction where there is consistent adult guidance and discipline. Children explore, observe, feel, interact and learn through the process of being involved with people and things in their world. All behaviors, even disruptive behaviors, are learned. Teachers, in their role of caring for children, model and teach appropriate behavior.

Children need to know what is expected from them before they can comply. Teachers use constructive and preventative methods of discipline and maintain an atmosphere of love, acceptance, and order. This atmosphere is one in which children respect themselves, their peers and their teachers.

Discipline concerns are handled by staff in a way that encourages children to solve problems and develop a sense of inner self-control. Children are given authentic choices and the opportunity to be an active part of decision-making in their environment, thus fostering a sense of personal responsibility. Staff helps children to understand the reasons for rules and limits and to feel good about the choices they make.



## **POSITIVE DISCIPLINE AND GUIDANCE POLICY FOR CHILDREN**

Our staff will use a variety of strategies for positive discipline and guidance in the classroom, including the following:

- Plan ahead in order to anticipate problems.
- Limit expectations to what is realistic for the developmental level of each child (and make these expectations clear to children). E.g. understand that young children are not ready to share yet; model and encourage sharing, but do not insist on it.
- Create a “yes” environment: rather than telling children what they cannot do, give them choices of the things they can do.
- Talk about children’s positive behavior: “Thank you for giving the truck to Daniel when you were finished with it.”
- Set a few simple, clear rules, focused around health and well-being, safety, respect for property, and respect for others.
- State rules positively rather than negatively: “Please walk” instead of “Don’t run.”
- Offer reasons for rules: “I know you really want to paint, but it is not safe to run inside the classroom. I don’t want you to slip and fall. Please use your walking feet when you are inside.”
- Model behaviors that we wish children to use, e.g. always being courteous and attentive.
- Give children clear, simple directions and positive reminders.
- Pay close attention to children in order to prevent and/or intervene in challenging behaviors.
- Redirect children from unacceptable to acceptable behavior: “Let’s go kick the ball instead of the bike.”
- Share our own feelings about certain behaviors: “I get worried when you climb on the bookshelf.”
- Help children deal with frustration and anger through words or pretend play.
- Focus on the child’s behavior, not on the child’s value as a person.
- Help children understand the consequences of their actions, and use problem-solving skills to develop solutions.
- Encourage children’s growing sense of independence.
- Acknowledge when children show self-control.
- Help children refrain from dwelling on mistakes, so they can learn to move on.

## **POSITIVE DISCIPLINE AND GUIDANCE POLICY FOR CHILDREN**

If all of the steps have been followed to help a child improve his/her ability to demonstrate pro-social behavior and self-control while in class, a behavior plan will be written in partnership with the child's parents/guardians.

Behavior Plans involve the parents/guardians meeting with their child's teacher to discuss strategies to help the child develop positive social skills.

Occasionally the child's attendance schedule will be modified to reduce the amount of time he/she is in class. Modified schedules are established for periods of time with identified goals the child must achieve before the child's class time will be extended.

The goal is to help the child be successful and gain confidence in their ability to follow directions and have positive interactions with others.

### **Unacceptable Discipline Methods**

The following methods are prohibited by staff at all times, under any circumstances:

- Corporal punishment, including hitting, spanking, swatting, beating, shaking, pinching, squeezing and other measures intended to induce physical pain or fear
- Threatened or actual withdrawal of food, rest, or use of the bathroom
- Use of food as reward
- Abusive or profane language
- Any form of public or private humiliation, including threats of physical punishment or emotional abuse, including shaming, humiliating, rejecting, terrorizing, or isolating a child
- Punishment for soiling, wetting, or not using the toilet
- Bribes, false threats or false choices
- Retaliating or doing to the child what s/he did to someone else
- Labeling a child as "bad" or otherwise implying that s/he is a problem, rather than the behavior

We will also refrain from discussing a child's challenging behavior in front of the child whenever possible, and will never do so in front of other children or families.

Use of any inappropriate child discipline methods by staff or volunteers will be grounds for immediate disciplinary action.

If you would like additional information about using positive discipline and guidance strategies in the home, please speak to your child's teacher or Center Director.

## **CHILD ABUSE REPORTING LAW**

Too many children are abused. Abusers of children come from all walks of life. It should not hurt to be a child; but sadly, many children are hurt every day in our community. Laws are in place nationwide to stop the abuse of children.

All staff members at Child Start are mandated reporters of child abuse and neglect. The law requires mandated reporters to report every instance of abuse which is known or suspected per the State of California penal code 11165-11174. The intent of the law is to ensure the protection of children and to provide assistance to parents and families. As mandated reporters, staff must file a Suspected Child Abuse Report form when it is known or suspected that a child under the age of 18 is being abused. Generally, the types of abuse that require reporting include physical abuse, severe verbal abuse, sexual abuse and exploitation, neglect, willful cruelty, unjustifiable punishment, or unlawful corporal punishment and injury. When abuse is known or suspected, a telephone report must be made immediately followed by a written report within 36 hours.

These laws are the primary tools for protecting children from harm and we want parents to partner with Child Start staff to prevent child abuse. **Talking about abuse and stopping the secrecy of child abuse will reduce the number of children who are abused.** Far too often, abuse is kept secret. Because of the secrecy, the abuse goes on and so does the pain.

If you have concerns that you or someone you know is "stressed-out" and may hurt a child, talk to someone about it. Child Start staff are here to help you. There are also other supports within your community available to help you.

**In an emergency situation, if you are afraid you may hurt a child, call one of the following numbers for Child Protective Services.**

**Napa County Only: 707-253-4261**

**Solano County Only: 800-544-8696**

## **UPDATING PERSONAL INFORMATION IN CHILD FILE**

Families should inform the school of any changes to the information contained on forms completed prior to admission. Every child in the program must have an updated Emergency Form on file so you, or someone designated by you, can be reached at any time in case of an emergency. If you or anyone on your Emergency Form move or change phone numbers, let us know right away.

## **ATTENDANCE POLICY**

*Every Day Counts.* Attending school regularly helps children feel better about school and themselves. Help build a habit of good attendance so your child will learn right away that going to school on time, every day, is important. Good attendance in preschool will help children do well in kindergarten and first grade.

Children can suffer academically if they miss 10 percent of school days or about 16 days per year. That is just one day every two weeks and that can happen before you know it. Absences represent lost time in preschool and a lost opportunity to learn.

As a parent you are responsible for making sure your child develops the habit of regular attendance. We need to make sure that every child has an opportunity to learn and that means making sure they come to school regularly.

Children and their families receive the full benefit of the Early Head Start and Head Start programs when the children attend on a regular basis and their parents/guardians are actively involved in the program. Parents/guardians are responsible for getting their child to school on time, and for ensuring their child attends each day services are provided. Regular attendance is strictly monitored; irregular attendance can result in the loss of services.

If a child is going to be absent from class or a Home Visit or Socialization, the parent/guardian must call their child's teacher or Home Visitor to provide a reason for the absence. **Parents/guardians must call each day their child will be absent and state the reason for their child's absence.**

If the parent/guardian does not notify their child's Teacher or Home Visitor, the Center Director or Home Base Supervisor will call or possibly go to the family's home to find out why the child missed school. The absence will be unexcused if there has been no contact.

**In the Center Base program, a family may lose services if their child has 4 unexcused absences in a month.**

**In the Home Base program, a family may lose services if their child has 2 unexcused absences in a month.**

## **ATTENDANCE POLICY**

When enrolling families with infants/toddlers, parents complete a Participation Agreement. This agreement defines the days and hours of service the family will receive. Parent commitment to regular attendance during those established times is important to maintain program funding and to provide consistency that promotes healthy development of their child. Performance Standards require that families enrolled in Home Base programs attend a weekly Home Visit, that the agency provides Socializations monthly, and that staff encourage participation in Socializations.

### **Family Vacations**

All family vacations are considered unexcused except as arranged in Full Day classrooms. No family vacation request will be approved for Part Day Part Year or 6 hour day classrooms. Please schedule vacation around scheduled classroom closures (Refer to calendar).

### **Family Emergencies**

Requests for leave due to a family emergency may not be granted if the leave exceeds four school days a month. Children who miss more than four days a month because of a family emergency may be placed on the waiting list and re-enrolled if an opening occurs. Requests for leave must be put in writing and submitted to the Center Director or Home Base Teacher as soon as possible. All requests for leave must be approved by the Regional Program Manager. **Family vacations will not be considered a family emergency.**

### **Child Care Certificates**

A referring Health and Human Services (HHS) program has authorized your child's eligibility for child care reimbursement either through Community Resources for Children, Napa County HHS, Solano County HSS, or Solano Family Children's Services. There are additional attendance requirements for your child's continued eligibility for child care reimbursement. The Center Director, Family Advocate or other Family Services staff will assist parents in their ability to maintain eligibility.

## **BEING ON TIME**

Please make every effort to see that your child arrives on time for school each day. **As the child's parent or guardian it is your responsibility to call your child's school if you and your child will be late to class.** Late arrivals miss out on the full benefit of services. **Upon arrival every child must be signed in by the adult who brought him/her to school.** Children may not be signed in before their class session begins. Parents or guardians must remain with their child until the Daily Health Check is completed.

## **WHAT IF A CHILD ISN'T PICKED UP ON TIME?**

**Children must be picked up on time and signed out by an adult (18 or older) whose name appears on the emergency form.** It is considered a late pick-up if a child has not been picked up within 15 minutes after class has ended.

- Always call your child's school if you will be late to pick up your child.
- Ask an adult listed on the emergency form to pick up your child for you if you cannot.
- Inform the adults you've listed that they are emergency contacts and may be called.

If a child has not been picked up within 15 minutes after class has ended, the teacher will call:

1. Your home/employer/school
2. The emergency numbers listed on the emergency form

If the teachers are unable to contact anyone to come for the child, a program supervisor or manager will be notified and the police may be called to provide assistance.

**The first time** a late pick-up occurs, the Center Director, Family Advocate, or other Family Services Staff will meet with the parent or guardian when he/she arrives the following day. The emergency list will be reviewed and updated to include reliable adults who can pick up the child. The parent/guardian will also receive a copy of the late pick-up policy and a verbal warning.

**The second time** a late pick-up occurs within the same 30 day period, the Center Director, Family Advocate, other Family Services Staff, or Lead Teacher/Primary Caregiver will meet with the parent or guardian within 24 hours. The parent/guardian may be given a written warning. A copy of the written warning will be given to the parent/guardian and the original is placed the child's file.

**The third time** a late pick-up occurs within the same 30-day period, a meeting between the parent/guardian and the Family Advocate will be scheduled for the next school day to develop an Improved Attendance Plan. The parent/guardian and Family Advocate will develop a plan to establish reliable pick-up or the parent/guardian may be asked to remain at the school each day with their child until a reliable pick-up plan is established. All attempts will be made to ensure that the child will be brought to school or picked up on time before Head Start services are terminated.

### **Consistent Late Pickup**

If we are unable to satisfactorily resolve consistently late pick up of a child, the school may ask the family to withdraw.

### **Do Not Leave Any Child Unattended in your Vehicle During Pick-Up or Drop-Off Time.**

The Unattended Child in Motor Vehicle Safety Act (CVC Division 6.7, §§ 15600-15632) states that a parent, legal guardian, or other person responsible for a child who is 6 years of age or younger may not leave that child inside a motor vehicle without being subject to the supervision of a person who is 12 years of age or older. Child Start adheres to all provisions of the Unattended Child in Motor Vehicle Safety Act.

### **Arrival to Pick-up a Child While Under the Influence of Alcohol Or Drugs**

If a child is picked up by a person who appears to be under the influence of alcohol or drugs, a staff person will offer to call another adult who is authorized to pick the child up or call a taxi cab. We want all families to arrive home safely.

# CLASSROOM SCHEDULES

## **Early Head Start**

Infant classroom daily schedules are based on the individual needs of the infants in the group.

Toddler classroom daily schedules include group experiences such as meal times, nap times, tooth brushing, small and large group experiences, and outside play. The schedule may vary depending on the needs of the enrolled toddlers.



## **Head Start**

The daily schedule and routine form the basic structure of the preschool day. Having a consistent schedule is important to help young children trust, feel more secure, and predict the sequence of events that will occur during their day. The daily schedule also helps give children a sense of time.

Schedule times will vary slightly in each class though breakfast should always start before 9:00am and lunch before 1:30pm. Ask your child's teachers to go over the schedule with you.

As part of the daily schedule at Full Day sites, a napping space and cot are available for all children to offer the opportunity to rest without distraction or disturbance from other activities at the center.

Children may choose to nap but are not forced. No child shall be forced to stay awake or to stay in the napping area longer than the normal napping period which is an hour and a half. Teacher to child ratios must be maintained during nap time.

### **A Typical Classroom Schedule**

Greeting / Visual Health Check / Sign-in

Family Time / Welcome Activity

Hand washing / Breakfast or Lunch / Free Choice Activities

Circle

Outdoor Activities

Free Choice/ Work and Play Activities

Circle

Hand washing / Lunch / Tooth brushing

Quiet Table Games and Books / Family Time

Departure

## SCHOOL READINESS GOALS

Head Start defines school readiness as children possessing the skills, knowledge, and attitudes necessary for success in school and for later learning and life. Child Start's school readiness goals identify what we are working toward to get children ready for school, in all areas of development: physical development and health, social and emotional development, language and literacy development, cognition and general knowledge and approaches to learning.

Domain	Head Start Goals	Early Head Start Goals
Social & Emotional Development	Head Start children will progress in forming closer relationships with peers	Infants and Toddlers will progress in forming close relationships or attachments with familiar adults
Social & Emotional Development	Head Start children will progress in developing strategies for regulating responses in socially appropriate ways	Infants and Toddlers will progress in interacting effectively with a small group of peers
Approaches to Learning	Head Start children will progress in pursuing knowledge or understanding of new materials or activities	Infants and Toddlers will progress in exploring people and things around them
Approaches to Learning	Head Start children will progress in exhibiting cooperative interactions with peers	Infants and Toddlers will progress in paying attention to things or the environment when interacting with others or exploring play materials
Language & Literacy	Head Start children will progress in their awareness of symbols and letters	Infants and Toddlers will progress in engaging in back and forth communication or conversation
Language & Literacy	Head Start children will progress in showing awareness of the sounds that make up language (phonemic awareness)	Infants and Toddlers will progress in understanding language that represents ideas
Language & Literacy	Head Start Dual Language Learners will progress toward fluency in understanding English	Infants and Toddlers will progress in using strategies to solve problems or make discoveries
Cognition & General Knowledge	Head Start children will progress in using number names to represent quantities and count objects	Infants and Toddlers will progress in comparing, matching and categorizing different people or things
Cognition & General Knowledge	Head Start children will progress in their ability to reason logically or use strategies to solve problems	Infants and Toddlers will progress in using hands to reach or manipulate objects
Cognition & General Knowledge	Head Start parents will exhibit increased understanding of the connection between consistent school attendance and the development of their children's school readiness skills	Early Head Start parents will exhibit increased understanding of the connection between consistent school attendance/home visit participation and the development of their children's school readiness skills
Physical Development & Health	Head Start children will progress in performing personal care routines	Infants and Toddlers will progress in using eyes and hands together to perform an action or accomplish a task
Physical Development & Health	Head Start parents will exhibit an increased understanding of nutritional practices and the importance of physical activity	Early Head Start parents will exhibit an increased understanding of nutritional practices and the importance of physical activity

## **TRANSPORTING CHILDREN**

Child Start does not provide children and families enrolled in the Early Head Start or Head Start programs daily transportation to and from Early Head Start or Head Start classes, appointments, or meetings.

Some alternatives for parents/ guardians needing assistance with transportation:

- Obtain bus passes and bus schedule for the parent/ guardian by submitting a Service Referral (FS05) to the Family Services/ERSEA Manager.
- Encourage families to request assistance from relatives and friends.
- Assist the family in checking with the Volunteer Center and other community agencies to determine the availability of services for transportation.

### **Bus Transportation for Children with Disabilities**

Bus transportation is not arranged by Child Start staff. This service is coordinated by the County Office of Education or school district staff in partnership with parents/ guardians as identified in the child's IFSP or IEP.

If a child will be receiving bussing services, the teacher completing the home visit completes the DI 05 (Authorization for School District Transportation) with the family at the beginning of the school year. If a child is identified during the school year or transportation services are added during the program year, the DI05 is filled out as soon as staff receives information regarding transportation services. The original is in the child's file, one copy is given to the family, one copy sent to the Education/ Disabilities Coordinator and one copy is to be placed in the site substitute folder.

The Center Director connects with special education partners to facilitate any bussing issues that may arise for any child bused to/from EHS/ HS classrooms.

Staff or special education partner who has contact with the child while being transported to/from our sites must be sure the child is "signed in" or "signed out" on the Children Sign In/ Out form (ER51).

## **DIAPERING**

Since diaper-changing will be a consistent component of our infant and toddler care in the EHS program, staff will ensure that appropriate procedures for sanitary diaper-changing are followed at all times by staff, family members and volunteers.

Diapers will be checked hourly, and whenever the child indicates discomfort or exhibits behavior that suggests a soiled or wet diaper.

Diapering will not be performed on surfaces used for other purposes.

Children are not left unattended on the diaper-changing table.

The diaper-changing surface will be sanitized after each diaper change

Staff members are required to wash and scrub their hands thoroughly after each diaper change, and assist children to do the same.

The procedure for diaper-changing will be posted in the diaper-changing area at all times. Families are welcome to review them or ask for your own copy.

## **TOILETING**

Toilet training is a developmental milestone and children entering the program may be at varying stages of toilet training. Encouragement in learning to use the toilet successfully is an important part of the daily routine. Child Start staff will assist children in the process of becoming toilet-trained. and will support your child in learning to use the toilet.

When a child is ready for this transition parents will be asked to complete an individualized Toilet Training Plan with their child's classroom teacher, primary caregiver or Center Director.

Classroom staff will respond promptly when a child requests assistance using the toilet.

Classroom staff will not show disapproval or punish children for any accidents. *Children who have toileting accidents are NEVER degraded by harsh words or appearances of disgust. A conference between the Teacher(s) and the parent(s) will serve to establish common goals and methods for toilet-training.*

A child's clothing will be changed immediately following a toileting accident. Soiled clothing is placed in a sealed, labeled, moisture-proof bag and sent home with the child, so that a fresh change of clothes can be sent back to the center.

Faculty members are required to wash their hands with soap and water after each toileting, and to assist children with hand-washing, using soap and water.

Faculty members always respect a child's privacy.

If a child has challenges with the necessary self-help skills in the bathroom, the staff will assist the child and encourage parents to do the same at home.

Staff encourages the child to be independent and allow the child to become self-sufficient.

Bathrooms are cleaned and disinfected promptly after any accident, as well as on a daily basis.



## WHAT TO DO IF YOUR CHILD NEEDS MEDICAL ATTENTION WHILE AT SCHOOL

### **Special Health Conditions Planning**

Children with medical conditions requiring special care must have the Authorization for Administration of Medication and Health Plan for Medical Conditions form (HE06) completed and in their file, prior to the first day of attendance. This form is an individualized plan for the child that specifies how staff treat the child's condition. This form may be completed by the parent/ guardian and the Center Director, doctor, and/or the PHN Consultant. The HE06 form is reviewed and signed by all staff members who care for the child. It also includes any information about medications the child will need during program hours.

A Case Management meeting may be necessary prior to the child's enrollment (first day of attendance) to plan specialized care. The team may consist of Managers, Specialists, consultants, and/or other agency staff. The team collaborates to develop and complete the HE06.

### **Children with Asthma**

If a child with asthma requires medication or an inhaler at school, the HE09 is completed prior to the first day of attendance. The asthma medication, with a spacer/ mask, if prescribed, to administer the medication is kept in the locked medication box with a Medication Log(HE07b).

## **ADMINISTRATION, HANDLING, AND STORAGE OF MEDICATION**

Whenever possible, staff will work with parents and their doctor to schedule the administration of medication(s) for their child before and after school. Home Base program staff does not administer medication to children.

When necessary for the health of the child, staff may administer prescription medications or doctor prescribed over-the-counter medications. However, before medications can be given to a child by a staff person, the following procedures must be in place:

1. The Authorization for Administration of Medication and Health Plan for Medical Conditions form (HE06) must be completed and signed by the child's doctor, which authorizes the dispensing of medication according to the doctor's instructions.
2. The parent decides which staff members will be assigned to give the medication and writes their names on the form.
3. The parent signs the Authorization for Administering Medication form, giving consent for the named staff to administer medication to their child.
4. The PHN consultant trains the staff to give the medication. The staff must demonstrate their understanding of how to dispense the medication during their training session.
5. The medication is brought to school and checked by staff to ensure all required information is on the label and the expiration date has not passed.

For more information, talk to your child's teacher and/or read the complete procedure in the Parent Health Binder located in the Family Corner of the classroom.

### **Labeling of Prescription/Over-the-Counter Medications**

Staff only accept medications in the original container. Prescription drugs must be in a child resistant container with the pharmacy label attached. The pharmacy label must include the child's first/last names, name of the medication, the date the prescription was filled, the name of the doctor, expiration date, and route of administration, storage, and any special disposal instructions. Over-the-counter medications must have a prescription label or be accompanied by a completed HE06 with the doctor's instructions and authorization.

***Medication brought to the center in a plastic bag, with a different person's name on the label, and/or labeled with a different medication name, etc., will not be accepted.***

## **ADMINISTRATION, HANDLING, AND STORAGE OF MEDICATION**

### **Storage of Prescription/Over-the-Counter Medications**

Medications are stored in a locked box\*, away from food, in containers that prevent spills, in a place that is out of reach of children. Medications requiring refrigeration will be stored in the kitchen refrigerator and must be kept at correct temperature at all times. Each classroom has a lockable medication box for refrigerated medications and another for non-refrigerated medications. If staff needs to transport medications on field trip outings, the refrigerated medication must be kept in a cold storage container.

\*The only medication that is not locked in the box is the Epi-Pen injection units. These must be stored out of reach of children yet be readily accessible to staff if needed for emergency use.

### **Expired Medications**

Medications will not be used beyond the date of expiration on the container or beyond the dosage instructions of the doctor. Medications kept in the classroom for "as needed" situations must be reviewed by the doctor at least once a year. Staff reviews the expiration date of medications and will note if the medication will require renewal before the end of program year and note it on the (HE07b) Medication Log.

### **Documenting Administration of Medications**

Each time medication is administered during program hours, the following information is written in the Medication Log (HE07b): dosage, route, time, and date. If special circumstances occur, such as spillage of the medication, or any unusual reactions are observed, this information is noted on the Medication Log, with the date and time. The Medication Log is kept in the locked medication box with the HE06 or HE09.

### **Observing and Recording Changes That May Indicate Adverse Reactions**

After medication is given, staff watches for changes in the child's normal behavior patterns or physical symptoms such as fatigue, moodiness, aggression, rashes, swelling, or breathing difficulties. If changes are observed, the parent/ guardian is contacted and informed immediately. If the reaction is serious or life threatening, staff call 911 and follow emergency procedures. Observed changes and/or reactions are recorded on the (HE07b) Medication Log, as well as in the (ER34) File Log. Parent/ guardians are informed each day of any medication(s) administered to their child. A copy of the Medication Log may be offered to the parent/ guardian each day and at the end of a specified period for a long-term medication. The original Medication Log is to be placed in the child's file when the medication will no longer be administered during program hours.

The (HE07b) Medication Log includes space for the parent/ guardian to initial it each month, indicating the staff has reviewed the information on the form with the parent/ guardian.

**Medical information is confidential and not shared with anyone except designated staff and partners. Please see the Confidentiality section on page 9 for more information.**

## **WHEN TO KEEP YOUR CHILD AT HOME**

**In order to protect the health of the children, families, and staff in the Early Head Start and Head Start programs, it is very important to contact your child's teacher if your child comes down with a suspected or diagnosed contagious condition.**

Please **do not** bring your child to school or participate in a Home Visit or Socialization if:

- you think he/she has a contagious condition.
- your child has had an oral temperature of 101°F or higher within the past 24 hours.
- Your child has diarrhea.
- your child has vomited within the past 24 hours.
- your child has live head lice
- your child has a rash associated with a fever of an unknown origin or rashes that are draining or crusted.
- your child has red eyes with drainage or discharge
- your child has sores that are open and draining or appear inflamed
- your child has a sore throat and/or coughing associated with fever and/or breathing difficulty
- your child shows signs of moderate to severe asthma: wheezing, dry cough, or breathing difficulty
- your child has persistent pain including:
  - earache(s)
  - stomach pain
  - pain on urination
  - pain associated with an injured limb/bone.
- Your child is tired, listless, and generally not feeling well enough to participate in classroom activities.

**If your child develops one or more of the conditions listed above, you may be asked to come to the center and take your child home.**

***Please Note: Call your child's teacher each day (before class time) to tell her that your child will be staying home!***

## HEAD LICE POLICY AND ROUTINE HEAD LICE CHECKS

Child Start follows the recommendations of the California State Department of Health Services to maintain a “no lice” policy. This means children will be temporarily excluded from attending class if live lice are observed in the child’s hair. Children may return to class after treatment has been completed and no live lice are found in the hair.

Head lice are a common issue in child care settings. Head lice are **not** caused from poor grooming. Anyone can get head lice. ***It is important for both staff and parents to share the responsibility to do routine screening for head lice.***

Parents can be very helpful by checking the hair of all family members once a week. The Teacher can show parents how to do lice checks. Pictures of head lice can be found in the Health Binder for staff and parent reference.

Center Base Routine Lice Checks– Are done every Monday (or the first day back from winter/spring break or a long holiday weekend) during the Daily Health Check, sometime during the day, and every day for a week after a head lice case has been identified at the site.

Home Base Routine Lice Checks– Are done during one socialization each month, as part of the Daily Health Check routine and at one home visit a month, in collaboration with the parent to monitor for head lice issues.

As much as possible, staff reduce the opportunity for cross contamination of head lice by implementing the following routine prevention practices in the classroom:

1. Provide an individual cubby for each child’s personal belongings. Items, such as coats, hats, and scarves, etc., will be stored in the children’s cubbies in a way that prevents one child’s personal belongings from touching those of other children.
2. Ensure that brushes and/or combs will not be used at school.
3. Complete a thorough site cleaning the same day a head lice exposure is identified.
4. Increase head lice checks of all children to an everyday practice for at least one week after each exposure incident.



## **INJURED CHILDREN**

If a child is injured at a center, staff will follow the Emergency Injury and Illness Procedures, as posted in each classroom. Any child injury requires parent/ guardian notification using the Non-Staff Accident Report (SA06) and/ or phone call, depending on the severity of the injury.

In case of a **Minor injury not requiring professional medical treatment** (those requiring NO MORE than a band-aid or ice), a member of the teaching staff removes the child from the group (when possible) and provides first aid following Universal Precautions- Exposure Control Plan with the classroom first aid kit materials. Staff obtains assistance as necessary to ensure that other children are well supervised.

In case of a **Major injury requiring professional medical treatment** (those requiring MORE than a band-aid or ice), the Teacher 1 or Center Director assesses whether the injury is severe enough to call 911 and contact the parent/guardian. The Center Director accompanies the parent/ guardian and the child to the doctor when necessary.

In the event that the parent/guardian cannot be contacted, and if the child needs to be transported by ambulance to the hospital, the Center Director or Regional Program Manager will accompany the child. Staff must take the child's Emergency Information and Release Form (ER41) and the Non-Staff Accident Report (SA06a) to the hospital.

The RPM, Center Director, or Child Development Director will report the incident to Community Care Licensing if it includes any of the following:

- Death
- Catastrophes
- Poisoning
- Epidemic Outbreaks
- Fire or explosions
- Serious or non-serious injury requiring medical treatment
- An unusual incident or child's absence that threatens the physical or emotional health or safety of the child.
- Suspected Abuse (Follow procedures in the Child Abuse Reporting section)

## **WALKING FIELD TRIPS**

During the year the teaching staff plan various ways to enhance children's learning experiences. Opportunities to experience real life, hands-on learning may be offered by taking children on walking field trips.

Walking field trips can play an important role in young children's educational development. They provide opportunities for children to be exposed to varied backgrounds and experiences and to explore the neighborhood and community beyond the center. In addition, walking field trip experiences often stimulate further the classroom educational experience and are documented on the Weekly Lesson Plan.



Walking field trips are planned around:

- 1) the developmental level of the children
- 2) the children's current interests and experiences.

Field trips are within safe, walking distance of the center. The number of walking field trips will vary. Parent volunteers must be present to assist the teaching staff on field trips.

Parent/ guardian notices and permission are required for all walking field trips, at least one week in advance. In addition, the notice will be clearly posted on the building when the class is away from the center on a field trip.

Volunteers are urged to participate and assist on walking field trips.

Teaching staff must observe the Adult to child ratio (1 adult per 3 children).

Children, parent/ guardians, and staff should experience a part of the classroom routine on the day of the trip. Walking field trips are integrated with the rest of the program and do not over-stimulate or exhaust children.

There will not be more than two walking field trips per month.

Walking field trips are approved in advance by the Center Director.

## PETS IN THE CLASSROOM



Due to the high incidence of asthma among enrolled children, furred and feathered pets are not allowed. Cockroaches are also a known asthma trigger and not allowed for that reason.

Other pets not allowed in the classroom include ferrets, turtles, iguanas, lizards and other reptiles. Some examples of allowable "pets" are walking sticks, ant farms, and small fish.

Site staff must be responsible for the routine care and cleaning of any pet containers (cages, fishbowls, etc.) and adhere to strict sanitation procedures.

**Due to the sensitive environment of the Therapeutic Child Care Center, no animals are allowed at the center.**

## IN-HOUSE GUESTS

During the year the teaching staff plan various ways to enhance children's learning experiences. Opportunities to experience real life, hands-on learning are offered by inviting guests (parents and community members) into the classroom.

Guests can play an important role in young children's educational development. They provide opportunities for children to be exposed to varied backgrounds and experiences and to explore the neighborhood and community beyond the center. In addition, in-house guest experiences often stimulate further learning inside the classroom.

Guest visits are planned around:

- 1) the developmental level of the children
- 2) the children's current interests and experiences.

Parents and community members are always welcome to share family traditions, talents, hobbies, demonstrations, and information with Head Start children and staff. These sharing times should be arranged in advance.



## **CHILD AND ADULT CARE FOOD PROGRAM (CACFP)**

Child Start receives reimbursement from the child nutrition program offered by the United States Department of Agriculture (USDA). All children enrolled in the Early Head Start and Head Start programs are automatically eligible for free meals at the centers through the Child and Adult Care Food Program (CACFP) regardless of race, color, national origin, gender, religion, age, disability, or political beliefs.

Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). If you believe that you or your child have been discriminated against in any USDA related activity, you should write immediately to:

USDA, Director, Office of Civil Rights, Room 326-W  
Whitten Building, 14<sup>th</sup> and Independence Avenue, SW  
Washington, D. C., 20250-9410.

USDA is an equal opportunity provider and employer.

The Complaint Coordinator with the California Department of Education, Child Nutrition and Food Distribution Division, may be contacted regarding program complaints or assist in the determination as to whether a complaint involves discrimination.

The contact number is (916) 322-8316 or toll free (800) 952-5609.

### **MEALS PROVIDED**

Head Start is committed to the goal of providing nutritious, well-balanced meals and snacks to ensure that each child can grow and learn to his or her potential. Meals and snacks are planned to provide important nutrients and calories for young children. Reasonable modifications and substitutions can be accommodated for children with special dietary needs.

Breakfast, lunch, and snacks are provided at Head Start, and the meals your child receives will vary depending on the session he/she attends.

Full Day/ Full Year and 6 hour day programs receive breakfast, lunch, and snack.

Part Day A.M. sessions receive breakfast and lunch and P.M. sessions receive lunch and snack.

You will receive a menu each month to inform you of food offered each day. The menu is a useful tool to begin conversations about the meals and foods your child experiences on a daily basis.



## **MEALTIMES**

Family-style Meal Service is a significant part of each day's activities. Please plan for your child to eat at the center each day he/ she attends. Children sit together in groups of six to eight with an adult present at each table. Children serve themselves in order to learn proper mealtime behaviors.



Mealtimes often include discussions about nutrition principles, colors, shapes, textures, cultural preferences, or the day's activities. In addition to these topics, teachers incorporate math, science, social studies and literacy into discussions about food and meals. While the children are doing food activities, a child may be encouraged to count how many banana slices are in his/her dish or to talk about the differences between cooked and raw carrots.



Parents are encouraged to join their child's class at mealtime. Please be sure to follow Family Style Meal Service guidelines and allow the children to serve themselves. Mealtimes provide many experiences for the children.

In Early Head Start, parents are encouraged to discuss breastfeeding with their doctor during pregnancy and consider breastfeeding as an option for the child's first year. Center based programs also offer a private area for mother's to breastfeed or pump their milk as necessary.

Center Base infants are bottle fed on demand and always held during feedings. Infants are introduced to new foods based on the American Academy of Pediatrics recommendations for introduction of solid foods in conjunction with the feeding recommendations of the parent.

## **BOTTLE FEEDING**

Formula provided by the program must be stored and prepared according to label directions. Ready to feed formula is commonly supplied by the program.

Formula container lids/caps must be washed before opening. Opened containers of formula are to be labeled with the date, time opened, and then refrigerated and used within 48 hours of opening. All bottles used to feed infants must be unbreakable.

Microwave ovens are not to be used to warm bottles or heat food for infants. For infants who prefer a warm bottle, staff may hold the bottle under running warm (not hot) water immediately before the feeding or use a bottle-warming unit, such as a crock-pot .

**Purchase and Replacement of Infant Bottles** Only non-polycarbonate baby bottles and sippy cups will be purchased for use. All bottles purchased must have a 1, 2, 4, or 5 in the triangle at the bottom of the bottle. Silicon bottle nipples will be used. All bottles must be replaced at least every 6 months in July and January. They must also be replaced anytime they appear scratched or discolored.



### **Feeding**

Bottle fed infants must be fed “on demand” at least once every four hours. Staff utilizes infant hunger cues to know when feeding is appropriate for individual infants. The same “on demand” feeding schedule applies to infants who are fed breast milk from a bottle. Infants must be held by a staff person or other adult for any bottle feedings. Bottles must never be propped for infant feeding. Older infants are not to be allowed to carry and drink from a bottle while walking.

### **Sanitation of Bottles**

Bottles (all components) must be washed and sanitized in the dishwasher or sanitized by boiling for 1 -2 minutes and air-dried. Bottles and nipples used by one infant must not be shared with or used by another infant unless properly cleaned and sanitized/sterilized.

## **FOOD POLICY**

Out of respect for the importance and value of food, food ingredients such as rice, noodles, beans, etc. are not used for art projects or motor development. The exceptions to this are flour for play dough, cornstarch, and food items that may be used in some sensory exercises for oral stimulation and speech therapy.

Left over foods from classroom meals may not be sent home with families. We are very concerned about food safety and want to avoid food poisoning that can occur when foods are not stored at the proper temperature for a long period of time. The only exception to this is uneaten whole fruit and unopened prepackaged food items. Food that is sent home must be eaten off the premises of the Head Start/Early Head Start site.

### **Food at Child Start Sponsored Events and Meetings**

Food is served on many occasions throughout the year at a variety of Child Start functions and events. Some variable issues include the place for meetings and the time of day, as well as the choice of foods to be served. Parents/ guardians plan some meetings and may plan food to be served within program guidelines.

Safety of children is the primary consideration in the planning of any event. The same food is to be served to adults and children to the extent possible at all program sponsored events.

Nutrition is a consideration in the selection of food to be served. These events are an opportunity to teach and reinforce principles of good nutrition by example. Food served must follow the Dietary Guidelines for Americans 2010 and be simultaneously tasty, healthy, and economical. In keeping with this philosophy, the program has instituted a policy of not serving food items with high sugar and/or fat content at program sponsored functions.

Some foods and hot beverages can be safety hazards for young children. Other safety considerations are food consistency.

The following is a list of food and beverage restrictions when children are present for safety reasons:

- Whole grapes
- Hot beverages (coffee, tea, hot cider)
- Uncut hot dogs
- Fruit with seeds/ pits that may pose a choking hazard
- Popcorn
- Nuts

This listing is a guide and is not intended to be an all-inclusive list. Please contact the Health/ Nutrition Manager for further assistance if needed.

## **FOOD POLICY**

Home prepared food is never allowed in any Head Start/Early Head Start classroom or at any program sponsored function as we have no way of monitoring preparation, appropriate storage, or refrigeration. Only pre-packaged, unopened, store bought food is allowed.

Staff and parents/ guardians may prepare food at Head Start sponsored events in accordance with program food handling standards or provided by licensed commercial food establishments. Commercially pre-packaged items such as bread and crackers are also acceptable choices. No food is prepared at home and brought to sites by staff or other individuals, including parents/ guardians. The policy applies to all Child Start sponsored events, e.g., Parent Meetings, Family Fun Events, End of Year Celebration, etc.

**Bringing food to any Head Start/Early Head Start classroom by a parent/ family member requires prior approval from the Center Director and the Health/Nutrition Manager.** Some examples of when food may be brought into the classroom are; classroom cooking experiences, cultural events, Star of the Week/ Month activities, or Parent Engagement Events.

If parents wish to bring food they are encouraged to select nutritious food items such as; string cheese, pretzels, fresh fruit and vegetables, whole grain crackers, or sandwiches (this is not a complete list).

The following food items are not allowed during Child Start events:

- Potato chips, doritos, cheetos or similar snack chips (corn tortilla chips are okay)
- Fried food
- Soda
- Juice that is not 100% fruit juice
- Candy
- Cupcakes

This listing is a guide and is not intended to be an all-inclusive list. Please contact the Health/ Nutrition Manager for further assistance if needed.

## **PARENT CONCERNS**

Child Start deeply values feedback from parents/guardians. The following is a process that we encourage parents/ guardians to follow to ensure that concerns are heard and adequately addressed. Attention to confidentiality of all parties involved will be paid throughout the steps of the following procedure, and resolutions will be reached within a reasonable time frame.

### **Step 1: Meet with Appropriate Staff Person**

The first step in the process for parents/guardians is to meet with the appropriate staff person with whom there is an issue. For instance, if parents have a concern about something occurring within the classroom, they are encouraged first to meet with the classroom teacher. If the parent/guardian feel that their concern has not been properly addressed, they may proceed to step 2.

### **Step 2: Meet with Supervisor of the Staff Person**

If meeting with the appropriate staff person does not yield a mutually agreeable outcome – or if it is uncomfortable to speak directly to the relevant staff person – you are encouraged to meet with the appropriate manager, such as your child's Center Director - or if appropriate, the Regional Program Manager (RPM). We encourage parents/ guardians to be straightforward in discussing the issue with the manager and to set a date for a follow up check-in. If the parent does not feel that their concern has been properly addressed, they may proceed to step 3.

### **Step 3: Submit a Customer Service Report**

If you feel your concerns have not been resolved, you may follow the complaint process detailed on the following page to submit a Customer Service Report form. This report will be reviewed by the Child Development Director and a resolution will be reached.

## **COMMUNITY CONCERNS, COMPLAINTS, SUSPECTED MISCONDUCT**

Anyone in the community has the right to file a complaint about what they perceive to be an unjust or unfair practice or a violation of agency policies, procedures or Head Start standards.

Two types of complaints may be lodged with the agency with the resolution process handled in distinct ways for each, depending on the findings that result:

**Program Complaints** are those that relate to agency practices, procedures or the perception that an agency practice has violated some rule or requirement (including our own internal procedures); or failed to deal fairly with members or our community.

**Personnel Complaints** are those that allege inappropriate action on the part of any employee of the agency. If, as a result of reviewing the allegations, it is determined that an employee has acted inappropriately, the agency reserves the right to handle the complaint as a personnel action. In accord with regulations and agency policy, Child Start will not divulge the results of such action, allowing the affected employee the confidentiality to which they are entitled. The only announcement the agency will make will be a clarification of agency policy relating to the issue raised by the complainant.

### **Process**

Complaints can be submitted in writing, in person, or on the telephone to the Child Development Director. You can call our office at 252-8931 to ask for us to send you a Customer Service Report form or you can pick one up at one of our centers. The complaint should describe completely the allegations and provide specific documents, materials, literature, or other evidence in support of such allegations.

- Upon receipt of such forms, the Child Development Director will conduct a thorough review and examination of the information and all available facts surrounding the allegations made in the complaint
- After completion of the investigation, the Child Development Director will prepare a written report of the facts involved in the complaint and recommend a course of action to resolve the matter.
- The Child Development Director will inform the Business Services Director, the Executive Chairs of the Policy Council, and the Child Start Board of Directors if the complaints are of serious nature.
- The Child Development Director will communicate in writing to the complainant and maintain written records of the correspondence.
- If resolution is not reached, the matter is referred to the Executive Director.
- If still unresolved, the matter is referred to the Board of Directors. The Board has the final authority in resolving all community complaints.

