



# **Family Handbook**

**2014**



## ABOUT THIS FAMILY HANDBOOK

This handbook is intended to provide families of children enrolled in Save the Children Head Start programs with information about how the Save the Children Head Start program works – both center- and home-based services. Local program staff will assist families in understanding what program options are available in their area.

Procedures in this handbook are based on regulations and standards from a variety of sources, including the following: The Department of Health and Human Services, Administration for Children and Families; Office of Head Start; state child care licensing agencies; local, state and tribal laws as applicable; Centers for Disease Control; American Academy of Pediatrics; and good practices in the field of early childhood education.

The Office of Head Start, for general purposes, uses “Head Start” which includes Early Head Start, Expectant Families, Migrant Seasonal Head Start, and American Indian/Alaska Native Head Start. Save the Children Head Start does the same throughout this handbook. All policies and procedures in this handbook are applicable to Save the Children Head Start programs, except where noted specifically to one or the other.

Note: Migrant and Seasonal programs serve children age’s birth to five without the specific separation of Head Start and Early Head Start. The following references are to be inferred:

Birth to three years = Early Head Start  
Three to five years = Head Start

Pregnant women can also be served in Early Head Start. One section of this handbook is devoted to “*Services to Expectant Families.*”

The term teacher in this handbook refers to preschool Head Start classroom teaching staff, infant/toddler caregivers in Early Head Start centers, as well as home visitors in the home-based program option.

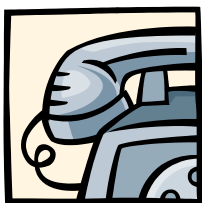
The following terms are used interchangeably throughout this manual: Family, parent, parents, and guardians in recognition of the diversity of family situations in which children live and the respect Save the Children Head Start has for those who take over the role of “parents” for the children in their lives.

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## IMPORTANT NAMES AND NUMBERS

Program Phone Number: 337-616-9556

NAME	CONTENT/SERVICE AREA	PHONE	EMAIL
	<b>Program Director</b>		
	<b>Health Services (Dental/Nutrition/Mental Health)</b>		
	<b>Disabilities Services</b>		
	<b>Education Services</b>		
	<b>Family &amp; Community Partnerships</b>		
	<b>Policy Council Chairperson</b>		
	<b>Transportation Services</b>		

My child's center is: \_\_\_\_\_. My child's room number is: \_\_\_\_\_.

My child's teacher is: \_\_\_\_\_. I can reach her/him at: \_\_\_\_\_.

The teacher assistant is: \_\_\_\_\_. I can reach her/him at: \_\_\_\_\_.

My family service worker is: \_\_\_\_\_. I can reach her/him at: \_\_\_\_\_.

The center supervisor is: \_\_\_\_\_. I can reach her/him at: \_\_\_\_\_.

My child's bus driver is: \_\_\_\_\_. I can reach her/him at: \_\_\_\_\_.

The operating hours for my child's center is \_\_\_\_\_ o'clock a.m. to \_\_\_\_\_ o'clock p.m.

The center is open the following days of the week: \_\_\_\_\_ through \_\_\_\_\_.

The program does or does not provide extended day (before/after) services.

The washing of nap linens is done by \_\_\_\_\_.

My socialization location is: \_\_\_\_\_.

Days and times of socializations: \_\_\_\_\_.

# WELCOME TO SAVE THE CHILDREN HEAD START!

## About Us

Save the Children is the leading independent organization creating lasting change in the lives of children in need in the United States and around the world. Recognized for our commitment to accountability, innovation and collaboration, our work takes us into the heart of communities, where we help children and families help themselves. We work with other organizations, governments, non-profits and a variety of local partners while maintaining our own independence without political agenda or religious orientation.

When disaster strikes around the world, Save the Children is there to save lives with food, medical care and education and remains to help communities rebuild through long-term recovery programs. As quickly and as effectively as Save the Children responds to tsunamis and civil conflict, it works to resolve the ongoing struggles children face every day — poverty, hunger, illiteracy and disease — and replaces them with hope for the future.

## Our Values

Each and every staff member and volunteer of Save the Children shares the values that, either individually or through teamwork, drive our breakthroughs for children.

- **Accountability:** We take personal responsibility for using our resources efficiently, achieving measurable results and being accountable to supporters, partners, and most of all, children.
- **Ambition:** We demand the best of ourselves and our colleagues, set high goals and firmly commit to improving the quality of everything we do for children.
- **Collaboration:** We respect and value each other, thrive on our diversity and work with partners to leverage our global strength in making a difference for children.
- **Creativity:** We are open to new ideas, embrace change and take disciplined risks to develop sustainable solutions for and with children.

### **INTEGRITY:**

We aspire to live to the highest standards of personal honesty and behavior; we never compromise our reputation and always act in the best interests of children.

### **MISSION OF SAVE THE CHILDREN HEAD START:**

Serving children and families of low income by fostering comprehensive, quality, early childhood education services in community.



More information about the Save The Children  
can be read at [www.savethechildren.org](http://www.savethechildren.org)

## HEAD START HISTORY

Acting on research findings that suggested early intervention could strengthen the ability of children and families to cope with school and their environment, the federal government convened a panel of child development experts and others in related fields to design a program that would help communities overcome disadvantages as a result of poverty. The panel report, issued in 1964, became the blueprint for Project Head Start. It was designed to help break the cycle of poverty by providing preschool age children of low-income families with a comprehensive program to meet their educational, emotional, social, health, nutritional and psychological needs, and to provide families with experiences and support that would lead to new parenting skills as well as economic and personal self-sufficiency.

In 1965, Project Head Start, overseen by the federal Office of Economic Opportunity, was launched initially as an eight-week summer program for children before they entered formal, required schooling. Head Start has evolved tremendously since its inception under the administration of the Office of Head Start (OHS), Administration of Children and Families (ACF), Department of Health and Human Services (DHHS). Today, Head Start provides full- and part-year, full- and part day, family child care, home-based and center-based services to pregnant women, children from birth to five and their families in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands and the former US Trust Territories in the Outer Pacific, native American/Alaskan native, and migrant and seasonal populations.

Head Start and Early Head Start are regulated by the Head Start Act (December, 2007); the Head Start Program Performance Standards; other requirements contained in the Code of Federal Regulations 1300 series; and, other federal documents. From its inception, Head Start has continued to look for more effective methods of addressing issues that affect the country at large, such as single-parenting, teenage pregnancy, literacy, homelessness, substance abuse, child abuse and neglect, and domestic and community violence.



# ECLKC

**Early Childhood Learning & Knowledge Center**  
**ECLKC** (Pronounced “E-Click”)

For more information about Head Start’s history and regulations go to <http://eclkc.ohs.acf.hhs.gov/hslc>

## WHAT IS HEAD START?

Head Start and Early Head Start are comprehensive child and family development programs for pregnant women and children ages birth to five and their families. Head Start promotes school readiness and future success for children. This is accomplished through a high level of parent engagement in the program and parent partnerships with well qualified staff to support the development of the children. Our program serves some or all combinations of preschool children, infants, toddlers and their families, and pregnant women. Head Start, as a quality early childhood program, is inclusive of children with disabilities.



## **Save the Children Head Start Philosophy**

The quality of any Head Start/Early Head Start program is determined by the work of its staff and involvement of the families. Save The Children Head Start therefore recognizes the importance of the employees and families to the success of program operations in all content areas. In order to be fully present for staff and thus children and families, Save the Children Head Start is committed to providing an environment that exemplifies mutual cooperation and support.

Save The Children Head Start is dedicated to providing a comprehensive child development program for eligible expectant families and children birth to five years of age and their families. The program is designed to support the family's role as the primary educator of their child.

Save The Children Head Start believes in direct involvement of parents and community volunteers as an integral part of the program. Parents are invited to assist in planning and implementing parent meetings or helping with other aspects of the program. They are also encouraged to give their time as well as other types of donations. Save The Children Head Start believes a high level of parent participation is beneficial to the program, children, families and volunteers.

Save The Children Head Start, through the employment of competent and qualified staff and volunteers and effective community partnerships, is committed to:

- Providing quality, comprehensive Head Start/Early Head Start services to all enrolled children and expectant families
- Strengthening parents and families and supporting their movement towards economic and personal self-sufficiency



### **Fact?**

Head Start/Early Head Start is a comprehensive early childhood program for low-income children and their families. The program is funded to serve some or all combinations of preschool children, infants, toddlers and their families, and pregnant women.

At least 10 percent of the total number of children enrolled by each Head Start/Early Head Start agency and each delegate agency are to be children with disabilities. These children are determined to be eligible for special education (Head Start) and related services, or early intervention (Early Head Start) services as defined under the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.) and/or by the State or local agency providing services under section 619 or part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

Nationally Head Start receives 80% of the cost of the project from the U.S. Department of Health and Human Services and the remaining 20% (non-federal share, match or in-kind) is generated locally from goods, services and space donated by parents, the community and organizations.

## Head Start Core Values

- **Quality**: Striving to consistently provide the highest level of service to children and families. Head Start leadership seeks to create a dynamic and cohesive environment that fosters commitment and supports continuous improvement. To effectively accomplish its goals, Head Start respects, values, and uses the contributions of each child, family, and staff member, and Head Start respects and values the time, effort and resources that the community provides.
- **Inclusion**: Building a community where each child and adult is treated as an individual while maintaining a sense of belonging to the group. An inclusive community values, respects, and responds to diversity - in culture, ethnicity, language, and ability.
- **Empowerment**: Believing that people can identify their own needs and interests and are capable of finding solutions and making changes. Head Start offers people opportunities and support for growth and change.
- **Collaboration**: Building relationships among children, families, staff, and the larger community. A network of community agencies and informal networks in partnership with one another serves families. Head Start does not act alone, but it is a key player in a community of providers.
- **Learning**: Creating for children, parents, and staff, a culturally sensitive environment in which enhancing awareness, refining skills, and understanding are valued and promoted. Children, parents, and staff can teach and learn from one another.
- **Advocacy**: Reaffirming that personal responsibility is critical to change, while acknowledging that social and economic factors negatively affect the lives and promise of children and families. Change occurs at the individual and systems levels and addresses both the symptoms and underlying causes.
- **Wellness**: Embracing a comprehensive vision of health for children, families, and staff assures that basic health needs are met; encourages practices that prevent future illness or injury; and promotes positive culturally relevant health behaviors that enhance lifelong well-being.
- **Nurturing**: Supporting the physical, social, emotional, and cognitive development of each child in the context of the child's family and culture. Development is supported through nurturing relationships among staff, parents, and children.
- **Diversity**: Recognizing and embracing the idea that all members of the Head Start community - children, families, and staff - have roots in many cultures. Head Start families and staff, working together as a team, effectively transform negative responses to promote respectful, sensitive, and proactive approaches to diversity issues within their programs.
- **Continuity**: Creating a continuum of care, education, and services to provide stable, uninterrupted support to families and children during the early childhood period beginning with birth through age eight.

## STATEMENT OF SERVICES

Save The Children Head Start provides comprehensive services to all enrolled children in the areas of education, health (including medical and dental health, nutrition and mental health), family services, and parent engagement. We strongly believe that you, the parents are the primary educator of your child, and that the whole family, as well as the entire community, must be involved in order for your child's experiences at Save the Children Head Start to have a lasting impact.

Save The Children Head Start provides high quality early care and education services to children birth through five years of age in appropriate program options (home-based, center-based, full-day/part-day, full-year/part-year) as available in different locations including child care for extended hours or additional days. Our programs will fully engage you as your child's first and most important teachers and as partners in making decisions about the program. Pregnant women and their families are also served in Early Head Start prior to the birth of their babies.

### THE INFANT TODDLER PROGRAM (EARLY HEAD START)

#### **Early Head Start Purpose**

*Adapted from: The Early Head Start National Resource Center and 2007 Head Start Act*

The purpose of EHS is to promote healthy prenatal outcomes for pregnant women; enhance the development of very young children (birth to three); and, promote healthy family functioning. Early Head Start incorporates current research and best practice in providing services to low-income young children and their families. The program services include the following: Quality early education both in and out of the home; parenting education; comprehensive health and mental health services, including services to women before, during, and after pregnancy; nutrition education; and, family support services including efforts to enrich parenting skills and move towards self-sufficiency.

#### **Center-Based Infant/Toddler Early Head Start Program**

The center-based infant/toddler program emphasizes nurturing through responsive care-giving, low child-staff ratios, small group sizes, and caring teachers. We provide equipment, materials, and activities suited to the age and stage of development of the child to support and stimulate the incredibly rapid physical and cognitive development of children this age. (This is often called *developmentally appropriate practice*.)

As supported by our curriculum, daily routines are individualized to meet the needs of each child and to accommodate the wishes of families. Naps, feeding, diapering and toileting schedules are individualized for each child and are documented daily. Toilet training, for older toddlers, is also individualized and proceeds at a pace mutually agreeable to families and staff and appropriate to the child's developmental level.



## Early Head Start At-a-Glance

### Ages

- Birth to 3 years

### Ratio and Group Size

- In every EHS classroom, the maximum group size cannot exceed eight children with two teachers. This regulation also applies to EHS children in community-based child care programs.
- One EHS teacher is responsible for a group of four infants/toddlers.
- Since each teacher is responsible for the direct care and well-being of the children, both staff members need to meet the teacher requirements described below.

### Teacher Requirements -- Education

- Educational requirements require EHS teachers to have a CDA credential with infant/toddler endorsement or to be enrolled in CDA training and able to obtain the credential within 1 year of hire into the EHS teacher position.
- By September 30, 2010, a minimum of a CDA with infant/toddler endorsement, plus training or equivalent coursework in Early Childhood Development is required.\*
- By September 30, 2012, the above requirements must be met plus training or equivalent coursework specifically in Infant and Toddler Development.\*

*\*See complete details on Save the Children Head Start job description.*

### Room Size

- Centers must have at least 35 square feet of usable indoor space per child available for the care and use of children, exclusive of bathrooms, halls, kitchen, staff rooms, storage places, and crib space.
- At least 75 square feet of usable outdoor play space per child is required. (Groups can be rotated on to the playgroup for use.)

### Sleeping Arrangements

- Cribs and cots must be spaced at least three feet apart to avoid spreading contagious illness and to allow for easy access to each child.
- Infants are not to be laid down to sleep with a bottle.
- To reduce the risk of Sudden Infant Death Syndrome (SIDS), all sleeping arrangements for infants must use firm mattresses and avoid soft bedding materials such as comforters, pillows, fluffy blankets or stuffed toys. No bumper pads are to be used.

### Feeding

- Save The Children Head Start provides formula. The cost of formula is reimbursed by USDA/CACFP.
- Depending on the length of time the child is in the center, EHS must meet between 1/3 to 2/3 of a child's daily nutritional needs.

- Feeding is “on demand”. This means that infants and toddlers are to be fed when their language and behavior indicate that they are hungry.
- Infants are held while being fed and are not laid down to sleep with a bottle. Bottles are never propped up.
- There will be a designated private area for mothers choosing to breastfeed their child. Pumped breast milk, for mothers who want their child to have it, will also be stored and used.

#### Diapers

- All center-based programs are expected to provide whatever diapers are needed by the child during the part of the day that the child is at the EHS center. Diapers are necessary materials for sanitary and hygienic toileting practices.
- Programs are encouraged to use a diaper service for cloth diapers (if state licensing allows)\_or are encouraged to purchase bio-degradable disposable diapers wherever possible.
- Disposable latex or water-impervious vinyl gloves, wipes, toilet paper, and disinfectant are to be provided by the program.

#### Home Visits and Staff-Parent Conferences

- 3 home visits and 3 staff-parent conferences.
- These are scheduled on the local program administrative calendar.

#### Timelines

- EPSDT schedule followed for healthcare requirements
- 45 days from entry date: developmental, behavioral, hearing and vision screenings completed
- 60 days from entry date: family partnership agreement completed
- 90 days from entry date: all health requirement completed and/or documented
- Year-round: enrollment is continuous as vacancies occur.

## **THE PRESCHOOL PROGRAM (HEAD START)**

### **Head Start Purpose**

**Adapted from: The *Head Start Act* as amended December 12, 2007**

The purpose of the Head Start (HS) program is to promote the school readiness of low-income children by enhancing their cognitive, social, and emotional development in a learning environment that supports children’s growth in all developmental areas - language, literacy, mathematics, science, social and emotional functioning, creative arts, physical skills, and approaches to learning. This is accomplished through the provision of comprehensive educational, nutritional, health, social and other services that are determined to be necessary by family needs assessments.

## Center-based Preschool Head Start Program

The center-based preschool program classrooms are based on the well-established premise that children learn through play. Your child's program utilizes a curriculum which includes individualization and emphasizes the use of positive guidance. Classroom activities, materials, and equipment support the development of problem solving, critical thinking, and logical reasoning skills.



### Head Start At-a-Glance

#### Ages

- 3-5 years

#### Ratio and Group Size

- In every HS classroom the maximum group size depends on the age of the majority of children (i.e., 17-20) and cannot ever exceed 20 children with two staff members (one of whom meets the teacher requirements). This also applies to HEAD START children in community-based child care programs.
- Typically one staff member is a teacher and the other is a teacher assistant. Program aides are also either employed or working as volunteers and may be present as a third person in the classroom.

#### Teacher Requirement — Education

- Educational requirements require Head Start teachers to have a CDA credential with preschool endorsement or an associate's or bachelor's degree or higher in early childhood education (ECE) or a related degree plus coursework in ECE\* and experience working with preschool children.
- By September 30, 2011, a minimum of an associate's degree is required.
- By September 30, 2013, at least half of HS teachers nationally must have a bachelor's degree in ECE or a related degree plus coursework in ECE\* and experience working with preschool children.

\*See complete details on Save the Children Head Start job description.

#### Room Size

- Centers must have at least 35 square feet of usable indoor space per child available for the care and use of children, exclusive of bathrooms, halls, kitchen, staff rooms and storage places.
- At least 75 square feet of usable outdoor play space per child is required for any group on the playground at one time (outdoor time can be rotated if necessary).

#### Sleeping Arrangements

- Children who are tired and fall asleep are to be allowed to sleep.
- A rest or naptime is to be provided in programs of six or more hours per day. Children who do not nap are to be provided with alternative quiet activities.

### Feeding

- Depending on the length of time a child is in the center, Head Start must meet 1/3 to 2/3 of the child's daily nutritional needs.
- Food is served family-style whenever possible.
- Seconds of food are offered to children who request more.
- Children are encouraged but not forced to try all foods offered.
- "Dessert" is not withheld since it is counted in the food components.

### Toilet Learning (aka Toilet Training)

- Children who are not yet toilet trained are enrolled in Head Start.
- Children who have toilet accidents are cleaned and changed or assisted by staff. They are changed into spare clothes provided by the family or program. Soiled clothes are given to the family in a sealed plastic bag or washed at the program (where applicable).
- Children are never shamed, including when toilet accidents occur.

### Home Visits and Staff-Parent Conferences

- Part-year programs: 2 home visits and 2 staff-parent conferences.
- Full-year programs: 3 home visits and 3 staff-parent conferences.
- These are scheduled on the local program administrative calendar.

### Timelines

- 45 days from entry date: developmental, behavioral, hearing and vision screenings completed
- 60 days from entry date: family partnership agreement completed
- 90 days from entry date: all health requirements completed and/or documented
- 60 days before the program year end, no need to fill vacated slots (in part-year programs only)
- Year-round: enrollment is continuous as vacancies occur (full-year programs).

## **CENTER-BASED PROGRAMS (HEAD START AND EARLY HEAD START)**

The primary responsibilities of the teacher in both preschool and infant/toddler classrooms are to prepare the learning environment with a wide variety of materials and activities from which the child may choose and learn and to be a model and facilitator of learning.

The role of the teacher is to interact with children during play, to serve as a guide and role model, to provide safe supervision at all times and to extend learning through posing problems, suggesting solutions, and asking open-ended questions.

At Save the Children Head Start, the focus of services is on the family. Parents are encouraged to work with teachers and other staff to identify priorities, goals, and resources and then make plans to meet those goals, not only for their children, but for the entire family.

Concepts such as shape, color, and number are acquired naturally through child-initiated play and teacher-directed activities, as are skills such as sorting, matching, comparing, and counting.

The emergence of social skills is encouraged by providing many opportunities for children to interact in play and in small groups. Adults help children learn how to stand up for their rights and to resolve their own conflicts in positive ways. Tattling and adult-imposed solutions are discouraged.

The outcome of the child-directed, learn-through-play approach has been well-researched. Studies which followed children from the early years into adulthood (called *longitudinal* studies) have demonstrated that children who were provided this kind of preschool experience were much more likely to have succeeded in school, higher education, and employment, and much less likely to have been involved with crime, drugs, or teenage pregnancy.

Additional services offered for Head Start and Early Head Start children (with parental consent) include speech and language, hearing, and vision screening, dental exams, and follow-up as necessary. Developmental and behavioral screening are conducted (again, with parental consent) and followed-up by on-going observation, assessment and individualization of learning objectives which are written and monitored for each child.

## HOME-BASED PROGRAMS

The term “home-based Head Start program” means a Head Start program that provides Head Start services in the private residence of the family receiving such services.

### Home-based Purpose

Adapted from the 2007 Head Start Act, the Head Start Performance Standards, and the Head Start Home-Based Program Option Parent’s Guide (<http://eclkc.ohs.hhs.gov>)

The term “home-based Head Start program” means a Head Start or Early Head Start program that provides services in the private residence of the child receiving such services.

Home-based Head Start and Early Head Start services have the same goals, vision, core values, and principles as the center-based services listed above.

The purpose of the home-based program is to support parents in their parenting role and assist them in the use of the home as the child’s primary learning environment. Through the home-based program option parents experience the significance of being their child’s first and most important teacher. They learn how to turn everyday moments into learning moments.

What you can expect during a weekly home visit:

- Talk with the home-based teacher about what happened during the week
- Review plans for this week’s activity
- Carry out the activity or experience
- Observe your child and talk about how things went
- Make a plan for next time
- Receive information about program or community activities
- Receive resources and support in completing family goals
- Share ideas about what activities you would like to have at socializations



Home-based programs also include socialization opportunities for children and families to engage in activities outside of their home. Parents are key in planning and carrying out activities with their children during socializations. The types of activities focused on during socializations depend on the age and stage of development of your child (i.e. infants learn about trust in the arms of their parents while planned activities for older children allow their parents an opportunity to observe your child's development, encourage social play, and expand their learning through conversation.)

Socializations will be conducted as small group experiences that are planned cooperatively by parents and teachers. Home-based teachers will plan with each parent for the goals for the child and family during socializations and the parent's role in accomplishing those goals. Socializations will be designed to help parents' achieve these goals by providing the planned experiences and materials.

Socializations offer families the opportunity to: interact with their child in an enriching setting; observe children responding to other children and families; share and learn from others about the challenges and joys of parenting; and meet with Head Start staff and community professionals about their child's interests, strengths, needs and available community resources. Socializations are only conducted with participation from a child's primary caregiver (parents/guardian) – babysitters or other types of temporary caregivers may not participate in place of the primary caregivers at socializations.

Socialization experiences may include interactions in a classroom setting, community facility or on a field trip. It is important that the environment in which socializations for infants and toddlers are held promotes stability and predictability. For this reason, the majority of socializations planned for infants and toddlers will be in a consistent, designated location.

What you can expect during socializations:

- Parents of infants will hold their baby and watch how he or she responds to what is going on
- You will play and interact with your child and other parents and children
- You will talk with and share ideas with other parents and staff
- You will sing songs, read books, play games and have fun with your child
- You will observe your child's growth and development and growing social skills
- You will attend presentations on various topics such as safety, nutrition, behavior and guidance, or other topics designed specifically for you
- You will strengthen your relationship with your child



## Home-based HS/EHS At-a-Glance

### Ages

- Birth to 5 years (depends on if program is for HS and/or EHS only or not)

### Ratio and Group Size

- Full-time home-based teacher caseloads are typically 10 but no more than 12 families.
- Socializations for Head Start would not exceed 20 children (and less if the predominate age of the children present is three year olds). With a group size of 20, two home-based teachers would be present along with the parents.
- Socializations for infants and toddlers would not exceed a group size of eight infants/toddler and their parents (and is determined based on the developmental needs of the children attending).

### Home Visits

- The purpose of home visits is to enhance a parent's knowledge and skills in being the primary facilitator of their child's growth and development.
- Home visits are conducted with the parents or guardian (not babysitters or temporary caregivers) at the child's home.
- For part-year Head Start programs 32 weeks of home visits are provided each program year.
- For full-year Head Start and Early Head Start programs 47 weeks of home visits are provided each program year.
- Home visits are typically 90 minutes long.
- Missed home visits are made up whenever possible.

### Socializations

- Socializations must be focused on both the children and parents. They may not be conducted with babysitters or other temporary caregivers. Socialization activities support child development by strengthening the parent-child relationship.
- Socializations are provided two times per month for each family, taking into account the group sizes listed above. This means that the program may need to hold a sufficient number of socializations each month to accommodate the number of families in the home-based program and their needs.
- For part-year Head Start programs 16 socialization opportunities are provided for each family each program year.
- For full-year Head Start and Early Head Start programs 24 socialization opportunities are provided to each family each program year.
- Length of each socialization opportunity is based on the development of children in attendance. There is not a required set length of time for socializations.
- Cancelled socializations are rescheduled whenever possible.

#### Socialization Sites/Spaces

- Socialization experiences may include interactions in a classroom setting, community facility, or on a field trip.
- Space for socializations takes into consideration basic health and safety requirements such as toileting, hand washing, refrigeration, heat and use of appropriate size furniture for parents and young children. The environment must be accessible to all families, including families who may have a child with a disability.
- Socializations are to be conducted as small group experiences that are planned cooperatively by parents and home-based teachers.

#### Snacks and Meals Provided at Socializations

- Meals or snacks are served family-style whenever possible.
- Nutritious foods that meet CACFP standards are served (whether the program receives reimbursement from CACFP or not).

#### Diapering and Toilet Learning (aka Toilet Training)

- Parents are responsible for changing their child's diapers when needed during home visits and socializations.
- Parents are to assist their child with toilet learning at home during home visits and at socializations

#### Teacher Requirement—Education and Experience

- Minimum requirement\* is a current CDA credential (home-based setting preferred) upon employment, or have high school diploma or GED and be in training and able to obtain the CDA within one year. AA/BA degree in ECE or related field preferred.
- In addition, training and experience to develop: consistent, stable and supportive relationships with very young children; knowledge of infant and toddler development and safety issues including reducing the risk of Sudden Infant Death Syndrome; and, methods for communicating effectively with infants, toddlers, parents and other staff are a requirement of this position for Early Head Start home visiting.

\*See complete details on Save the Children Head Start job description (which may vary by Save the Children Head Start program location)

#### Timelines

- EPSDT schedule followed for healthcare requirements
- 45 days from entry date: developmental, behavioral, hearing and vision screenings completed
- 60 days from entry date: family partnership agreement completed
- 90 days from entry date: all health requirements completed and/or documented
- 60 days before the program year end, no need to fill vacated slots (in part-year programs only)
- Year-round: enrollment is continuous as vacancies occur (full-year programs).

## SERVICES TO EXPECTANT FAMILIES THROUGH EARLY HEAD START

The goal of serving pregnant women and their families in Early Head Start is ultimately to provide Early Head Start services to their children in the appropriate child development program option (center-based, home-based, or family child care option). It is not the intention of the Early Head Start program only to serve pregnant women without also providing services to the child upon delivery. Planning for the transition to the appropriate child development program option should begin at the time a pregnant woman is enrolled in the EHS program. It is expected that pregnant women and their families who receive Early Head Start services will enroll their child in Early Head Start following birth and until the child's third birthday through the home or center-based program.

### Services to Expectant Families Purpose

A healthy pregnancy has a direct influence on the health and development (vigor and well-being) of a newborn child. Utilizing a teamwork approach, Save the Children Head Start strives to have the greatest impact on participating children by offering supportive services as early in life as possible.

The prenatal period of growth and development has a lasting impact on the child's potential for healthy growth and development after birth. Early Head Start programs provide services to pregnant women and their families and through the child's first three years of life.

Early, continuous supports and services provide the best opportunity for:

*Healthy pregnancies and positive childbirth outcomes;*

*Supportive postpartum care for the parents and child;*

*Fathers to become fully involved in the lives of their very young children;*

*Supporting and enhancing parent child attachments;*

*Parents to develop as nurturing and responsive caregivers during their child's infancy.*

## MIGRANT AND SEASONAL HEAD START -- PROGRAM DESCRIPTION

Adapted from: National Migrant and Seasonal Head Start Association

Migrant and Seasonal Head Start was initiated as a response to the needs of migrant and seasonal farm worker families. In most states, local childcare resources are not available when migrants come into a community, especially for infants and toddlers. When resources are not available, parents have no choice but to take their children to the fields where they are exposed to pesticides, hazardous equipment, extreme heat and other health dangers. Migrant and Seasonal Head Start serves children ages birth to five years (it does not differentiate between Early Head Start and Head Start).

## Comparison between Migrant and Seasonal Head Start Program and Regional Head Start and Early Head Start Programs

Adapted from -- TAC-12/AED, April 2006 distributed at the Migrant and Seasonal Conference 2010

Regional Head Start/Early Head Start	Migrant and Seasonal Head Start
Serves primarily 3-5 year old HS or birth to 3 year olds EHS and pregnant women	Serves children from birth to compulsory school age, but not pregnant women per se

EHS began in the 1990's	Have served infants and toddlers since program inception
Families live primarily in one community	Families who move from one community to another in search of agricultural work
Families receiving public assistance (e.g. welfare to work)	Families who work fulltime 10-14 hours a day, 5 or more days per week
Traditionally single parent households	Traditionally two parent households included extended family members
Primarily English speaking – however many languages are represented	Primarily Spanish speaking, also families who speak indigenous dialects from Mexico such as Chu, Mixteco, Trike, Conjobal
Program open primarily during the school year for HS and full year for Early Head Start	Programs open during summer months. Some communities may have year round agricultural work and programs may be open year round if necessary to serve families
Programs run primarily on a set schedule	Programs designed to be flexible, based on the crops; e.g., open early in the spring, close late fall in northern and mid-western USA. Hours adjusted during the growing season, based on types of crops, planting/harvesting schedule and weather. Reverse season the southern USA border states
Program run 3½ -6 hours a day 4 days a week usually Monday through Thursday and beginning to shift to more programs 5 days a week	Centers may be open 12-14 hours a day, 7 days a week depending on harvest season.
Medical home and dental home located in local community. Timelines of 45 days for developmental screening and 90 days for medical.	Medical home and dental home not as “geographically bound.” Each is a continuous, accessible source of medical and/or dental care. Timeline for medical services tracked by program much more compressed in programs serving children with families working the shorter agricultural seasons
Transportation services not required and when it is, it is typically not provided for infants and toddlers	Transportation services offered to maintain enrollment. All ages transported including infants and toddlers (addendum to Save the Children Head Start Transportation Manual created to accommodate this)
Determination of “full enrollment” is tied to monthly enrollment figures and all vacancies must be filled within 30 days in order to count as full enrollment	Determination of “full enrollment” tied to aggregate attendance figures (cumulative enrollment)
Eligibility for the program determined by: --Age of child --Level of family income --Living in service area	Eligibility for program determined by: --Age of child --Level of family income --Type of income (50% or more in specific types of agriculture)

Eligibility: Child remains eligible --24 months in HS --Until age 3 in EHS	--Mobility of family in search of agricultural work  Eligibility must be re-determined annually. Family remaining in the community ("settling out") affects eligibility status for Migrant and Seasonal programs over time
Home Visits and Staff-Parent Conferences Part-year programs --2 home visits --2 staff-parent conferences  Full-year programs --3 home visits --3 staff-parent conferences	Even in the shortest migrant season a home visit is required (two if possible).

## PROGRAM STAFF

All staff members are qualified to provide these services to children and families. Staff receive ongoing intensive training in child development, positive guidance, CPR, first-aid, and a variety of other relevant topics.

Staff members have the background needed to work with expectant families to recognize signs related to anxiety, postpartum depression, and know when it is necessary to make referrals to outside sources. Early Head Start staff participate in trainings related directly to pregnancy and child birth. Training includes but is not limited to:

- Fetal health and development
- Child birth
- Lactation
- Mother and infant nutrition
- Substance abuse as it relates to maternal and child health
- Family services
- Mental health and other areas of health and development

Volunteers, including parents and others in the community, are actively recruited to supplement classroom staff and provide individual attention to children. All volunteers are carefully screened. They are provided with an orientation concerning basic policies of the program and they are under the supervision of staff members at all times.

Management staff are available to assist you with questions and challenges. Your family service worker or home-based teacher can tell you how to reach the managers, coordinators, and specialists for education, health, nutrition, mental health, parent involvement, disabilities, family services, and transportation services. A listing of the phone numbers and email addresses for each is located in the front section of this handbook.

## Smoke Free /Scent Free Work Environment

For the health and protection of young children (many with allergies and respiratory

challenges) the following policies and procedures are to be followed. In addition to the Tobacco Free Workplace and Standards of Dress and Grooming requirement in the Employee Handbook, all staff and volunteers working directly with children (e.g. teachers (center-based, home-based), assistant teachers, program aides, cooks, bus drivers, bus monitors, classroom volunteers), are to follow these procedures with regard to smoking and scents:

- Employees and volunteers are not to have smoked one and one-quarter (1¼) hours prior to reporting to work.
- Any employee or volunteer who appears in the workplace with the odor of strong scents such as smoke and/or fragrances may be required to leave the workplace until they are able to return without the condition; this is unpaid administrative leave for employees.
- The use of chewing tobacco or smokeless tobacco in the workplace is also prohibited.
- Employees and volunteers who use a nicotine patch, gum, or other nicotine delivery system that does not result in an odor or strong scent may use those products in the workplace, so long as the use does not interfere with the care of children and any used products are properly disposed of away from children.



Additional information on the Save the Children Head Start tobacco-free workplace is available in the *Employee Handbook*

### **Phone/electronics usage**

Caring for children and interaction with families is the primary focus of staff while at work. During work hours (indoors or outside), home visits and socializations Save the Children staff and volunteers are not to:

- Use phones (cell/mobile or land lines) to take or make personal calls, unless an emergency occurs
- Use other electronics and communication devices or systems at any time, including but not limited to “texting”, “tweeting”, IPODS, Blackberries and computers

## **DAILY OPERATIONS**

### **HOURS OF OPERATION**

Hours of operation are determined by your local Save the Children Head Start program and are based on funding and program options. Administrative office hours may differ slightly from center-based classroom or home-based operating hours.

Home visits and socializations will be scheduled with consideration of your family's schedule. Every effort is to be made to create consistency in the scheduling of these engagements because stability and predictability is important for children, families and staff.

### **PROGRAM CLOSURES**

#### **Center Calendar**

Your Save the Children Head Start program or center will provide you with a calendar of program dates of operation and closures.

#### **Inclement Weather, Delays, Closures**

Save the Children Head Start programs follow the decision of the local elementary school in determining delays and/or closures of our centers due to weather conditions. If the weather is bad, watch TV or listen to the radio to learn about the school closings in your area. You may call the center and speak with a staff person if you are not sure whether the center will be closed or delayed in opening.

If your local public school is operating on a delay of 2 hours or more, children in a part-day program will not attend school, but the children in a full-day program will operate on the same delay as your local school.

Other decisions regarding closure may need to be made by the program director, based on circumstances that affect the center. Our staff or volunteers will call you if a decision is made to close or close early when the school district does not.

If a home-based teacher is not able to travel to a home visit he/she will notify you by phone, when possible, to let you know of the canceled home visit. As soon as it is apparent that the weather has created a dangerous driving situation, you will be notified by phone, when possible, that socialization will be canceled.

### **ATTENDANCE AND ABSENCES**

Children who attend **center-based program services** on a regular basis do better in their education and development. Therefore, we want to maximize the number of days your child attends and provide support so your child may participate in the program on a consistent basis.

If your child is going to be absent, we ask that you contact the center supervisor or your family support services person to let them know that your child will not attend and, if possible, when you expect your child to be able to return.



**Home-based program services** are provided by staff through weekly, 90 minute home visits as outlined in the Head Start Performance Standards. Regular attendance at home visits also result in the greatest benefits to children and families. Home visits are scheduled in advance with families.

Contact your home –based teacher to cancel the home visit If you are unavailable at the scheduled time for the home visit or if a family member is contagiously ill, Your attention to communicate with staff is greatly appreciated and will result in more effective services to you and your child and will save the program the expense of unnecessary travel.

We value regular participation of children and families in program services. Many children remain on waiting lists for Head Start services. Occasionally children are unable to access services they are enrolled in for a number of reasons. If this is the situation for you and your child, please contact your family service worker or home-based teacher to explain the situation.

If your child is absent for three consecutive days (center-based), or three consecutive home visits (home-based), or has a pattern of absences, and you have not made contact with the program, someone from the program will contact you by telephone or in person. If they can't to reach you, they will send you a letter asking you to contact the program office within five (5) days. If you do not respond within five (5) days, we will send an official letter to your home telling you that your child may be dropped from the program by a specific date. If you get such a letter, please contact the program immediately to keep your child in the program. If we don't hear from you, your child's enrollment slot will be considered an enrollment vacancy and our staff will contact other parents with children on our waiting list to fill the vacant slot.

## **ARRIVAL OF CENTER-BASED CHILDREN**

Please make sure children arrive and are picked up from the center at the times agreed upon at the start of the program year and specified in the enrollment agreement.



Please enter and exit the building through the main entrance. To ensure your child's safety, you must accompany your child to her/his classroom, rather than dropping off or picking up your child from an outside entrance. You must also sign your child in and out of the center and tell the appropriate staff member that you are arriving and/or leaving with your child. Persons, other than a child's parent, signing children in and out of the center must be at least 18 years of age and must already be listed on the approved list of emergency contacts.

Please make sure your child arrives at the assigned arrival time and is picked up by the closing time.

If you have trouble bringing your child to the center or picking him/her up on time, please meet with your family services support person (or he/she will request a meeting with you) so that he/she may assist you. Picking up a child late is upsetting to your child and difficult for staff needing to go home to their own families. In addition, there may be a fee charged for late pick up (see section on Fees/Late Fees and Tuition).

## **DEPARTURE AND/OR RELEASE OF CENTER-BASED CHILDREN**

Children will not be released to any individual not designated on the emergency form that you complete in advance. There will be no exceptions. Staff members must always ask for appropriate identification before releasing your child. If you need to make changes to the emergency form, please complete and sign a change of status form in the office.

At enrollment the form you fill out to list your emergency contacts allows you to list as many people as you want. That way you can have lots of back-up in case of emergencies.

For your child's safety, if someone else is going to pick up your child, please contact us in advance and be sure you have given us advance written authorization in person. Please do not do this by phone, e-mail, text or fax because we cannot verify that it is actually you authorizing the pickup. If we are unfamiliar with the person picking up your child, we will ask him/her to show us a picture ID. If you did not previously indicate either on the emergency contact form or by presenting us with a written authorization in person, that this person was authorized to pick up your child, we will not release your child to that person.

## **LATE PICKUP**

If you fail to pick up your child at the designated time, staff will first attempt to locate you and, if unsuccessful, they will attempt to contact the emergency contact persons. If one hour after the closing time of the center, you or a designated emergency person have not contacted the center, staff will again attempt to locate you and your emergency contact persons. If unable to do so, your child will be left in custody of the local police department or appropriate state agency (i.e. Child Protective Services). A note will be left on the door letting you know by whom the child has been taken and how to reach them. Under no circumstances are staff authorized to take your child home.

## **FEES, LATE FEES AND TUITION**

Parents of children enrolled in Head Start do not pay a fee or tuition for participating in the regular program day. If additional fees are required, they would be for non-Head Start services such as extended hours child care (wrap around) or late pick up fees. If this is the case, parents would be notified at enrollment; the schedule of fees (and late fees) would be attached as an addendum to this handbook and posted in the classroom.

There may be times during field trips or family activities when an attendance fee for others is required (e.g., another non-Head Start child, a friend or relative). This will be announced and in written materials pertaining to each specific field trip.

## **TRANSPORTATION FOR CENTER-BASED PROGRAMS**



Not all programs provide transportation. However, all children and families will receive training in pedestrian safety within 30 days of enrolling in the program as required by the Head Start Performance Standards.

The rest of this section is relevant only if your child is provided transportation by Save the Children Head Start.

If your child utilizes Save the Children Head Start transportation services, you will receive training in the following areas within 30 days of the program start date (or within 30 days of when your child begins to ride the bus):

- Pedestrian safety, to include the need for an adult to accompany the child to and from the bus stop
- How to reinforce the guidance your child receives from Save the Children Head Start about riding the bus

Your signed transportation agreement indicates that you agree to Save the Children Head Start bus rules and regulations. It is especially important that you know that children will only be released by the bus driver or monitor to a parent, legal guardian, or other individual that you identify in writing. (See section on Departure and/or Release of Center-based Children, for more information.)

If no one is at home or at the bus stop/drop-off point to receive your child, your child remains on the bus and the bus driver/monitor will call the center to alert staff to the situation and then continue the bus route. The center staff will attempt to contact you and/or your emergency contacts and follow the procedures noted in the section above: Late Pickup.

Save the Children Head Start provides transportation services to Early Head Start infants and toddlers only when the child is accompanied by his/her parent/guardian, except in programs serving migrant and seasonal farm workers where an addendum to this handbook describes transportation services in migrant and seasonal Head Start.

Program staff are never authorized to drive children in a privately owned vehicle.

## **ASSIGNMENTS TO CENTER-BASED CLASSROOMS**

If you have more than one child in our program, a plan will be developed to address how the needs of all your children in the program will be met. If you feel you need to request a transfer to a different center or classroom or another program is needed for your child, please see your child's teacher or the center supervisor. If we must make a change in teachers or classrooms for your, the center supervisor will notify you of the change in writing and appropriate steps will be taken to assist your child and you with the transition.

## **CHILD TRANSITIONS, ORIENTATION, AND PHASE-IN Returning Children**

If a child is currently enrolled in Save the Children Head Start, you may re-enroll him or her for the next year, if your child continues to be age eligible. The family services support person will contact you with exact dates and times of enrollment. No income information is needed for the succeeding year.

Children enrolled in Early Head Start are automatically eligible until they transition to

Head Start or another community program at age three. At that time, children who transition from Early Head Start to Head Start will need to re-qualify. That means that you will have to provide proof of age and family income and fill out an application like you did when you applied to enroll your child in EHS. Your family services support person can assist you with this process

For migrant and seasonal Head Start programs eligibility is reassessed each program year.

## **TRANSITIONS**

Transitions such as entering or leaving a program or changing from one program option to another necessarily require thoughtful planning and preparation for the benefit of both your child and you. Through these kinds of transitions you, the family, remain the secure base for the child. We do all we can to empower you to be involved, make decisions, and advocate for your child when entering Save the Children Head Start and during transitions.

## **ORIENTATION AND PHASE-IN FOR CENTER-BASED SERVICES**

In order to ensure a happy and successful transition into Head Start classrooms, parents are asked to participate in an orientation and phase-in before your child begins the program. A thoughtful transition into the classroom helps provide a trusting, secure relationship for you, your child and your child's teachers. Orientations familiarize you with the program's various services (education, health, mental health, nutrition, family services, community partnerships, transportation and parent involvement). You will meet staff members during the orientation and each will explain his/her role and responsibilities.

Phase-in is held throughout the first week to orient and familiarize you and your child with the classroom and the teachers, meet your child's teacher and become familiar with the classroom and its routines. Parents of children who may have difficulty in separation will work with the classroom staff and center supervisor to ensure a positive experience for both you and your child. The individual participating in the phase-in period with the child does not necessarily need to be the parent. Another adult the child is attached to and comfortable with, i.e., a grandmother, aunt or adult (18 or older) sibling is fine.

An example of a Phase-In week for Head Start preschool center-based programs:

- DAY 1 - On the first day a small group, i.e.: five, children will be assigned to the classroom in the morning and a small group in the afternoon with the expectation that the parent(s) will attend with the child.
- SUCCEEDING DAYS - This schedule continues for each succeeding day of the week until all children and parent(s) have attended one session.

An example of a phase-in plan for Early Head Start center-based programs:

- DAY 1- Parent and child visit center for a few hours together. Parents educate staff about what their child likes and needs and ask questions of the staff.
- DAY 2- Parent and child visit for a half day with the parent stepping out of the room for short time periods (10 to 15 minutes) and remaining in the center.
- DAY 3 – Parent and child visit for the entire day. Parent may leave for an hour or two mid-day.

- DAY 4- Parent and child visit with the parent leaving for a couple of two hour breaks, and returning in between.
- DAY 5 –If child and parent are ready, parent may stay for the first ½ hour to an hour, then leave the child for the rest of the day.

During this week and following weeks, staff need to have a schedule of where they may reach you and we ask you to be “on call” so we can contact you if necessary. You and your child’s teachers will determine when the child seems well-adjusted to the new environment. Some children may be calm and adjusted in a couple of days, for others the adjustment may take longer. If a child continues to have separation / adjustment issues after two weeks, a family meeting will be scheduled with support from the mental health professional.

We know that young children do best when they have time to adjust to a new experience. Your family service worker will brainstorm with the family ways to provide for a smooth phase-in to the program.

Children entering the program mid-year will be provided with similar opportunities for thoughtful and successful transition into the classroom to assist them, and you, in developing secure and trusting relationships with classroom staff.

### **TRANSITION OUT OF EARLY HEAD START CENTER-BASED SERVICES**

Transition planning begins for each Early Head Start child and family at least six months prior to the child’s third birthday. A meeting is held with Save the Children Head Start staff and the family to create an individualized transition plan that takes into consideration the child’s health and developmental status, progress made by the child and family while in Early Head Start, current and changing family circumstances, and the availability of Head Start and other child development services in the community.

When it is appropriate, a child may remain in Early Head Start following his or her third birthday for a few additional months until he/she can transition into Head Start or another program.

### **TRANSITION OUT OF HEAD START PRESCHOOL CENTER-BASED SERVICES**

Each Save the Children Head Start program has an effective and smooth transition plan for children who will enter kindergarten the following year. This plan will be developed with the Local Educational Agency (LEA) and family input based on the following guidelines:

With Parents:

- Meet to develop a specific transition plan and activities (written)
- Introduce you to school personnel in the school your child will attend
- Assist parents who need help with English understand services provided by the school
- Discuss with parents the differences in governance system between Head Start and the school system
- Inform parents about their rights and responsibilities concerning the education of your child(ren)

- Provide strategies for maintaining parental involvement as your child moves from Head Start to elementary school

### **Transitions for Children with Disabilities or Developmental Delays**

The Save the Children Head Start staff person responsible for disabilities services works closely with the parents of children with an IFSP or IEP, the Early Intervention Program, and the Local Education Agency to provide a well-planned transition for children. The transition planning should be part of the IFSP or IEP meeting and for Early Head Start children planning will begin six months before the child's third birthday.

## **CURRICULUM AND ONGOING ASSESSMENT**

The Save the Children Head Start early childhood curriculum consists of:

- Goals and objectives for children's development and learning
- Experiences or activities to meet the goals
- Roles of staff and parents
- Materials, space and equipment necessary for optimal development and learning
- Sound child development principles and the Head Start Performance Standards and Head Start Child Outcomes Framework

### **Center-based Head Start**

The curriculum used at Save the Children Head Start for preschool is based on sound early child education principles and developmentally appropriate practices. Teachers look at resource materials for ideas for activities and concepts to be developed according to each child's stage of development and individual needs. To individualize the curriculum to meet each child's developmental stage and areas of interests, a number of screening and assessment tools are utilized. The teachers use anecdotal observations, information given by parents in interviews, home visits, conferences and helpful screening/assessment instruments throughout the year to gather information about the children to then plan activities for small groups and for individuals within each classroom.

The teacher's positive and nurturing interactions with the children throughout the day are central to creating quality educational experiences.

Lesson plans are prepared each week by the teaching staff with assistance and input from the center supervisor, education manager, parents and other resources available to them. Plans include activities to promote physical, cognitive, emotional, and social growth appropriate for each child's age and stage of development.

- Art/Creative Media
- Blocks
- Dramatic play or practical life
- Manipulative or table toys
- Nature and science
- Water and sand play
- Reading languages area or library
- Writing/Computer



Music and gross motor activities are scheduled daily. Cooking activities and wood-working are scheduled on a periodic basis throughout the year. The daily schedule is designed to meet the developmental needs of the children in each class. Examples of skill areas that activities in Head Start will address are as follows:

- Development of problem-solving abilities;
- Reasoning abilities including development of social relationships;
- Classification/categorization skills;
- Perceptual abilities;
- Large and small muscle coordination and self-help skills; and
- Concentration/listening/sharing through group time experiences.

### **Center-based Early Head Start**

Individualized and responsive care through predictable routines carried out by consistent teachers is the foundation of the Early Head Start infant/toddler classroom curriculum at Save the Children Head Start. Everyday routines and rituals, such as feeding and diapering, provide rich opportunities to support infant's and toddler's development of secure relationships and self-regulation skills. Early Head Start teachers understand that all learning takes place in the context of relationships. Teachers use anecdotal observations to gather information for planning individualized daily experiences and activities. Staff incorporates information provided by parents in interviews, home visits and conferences to plan based on the interests and needs of children.

The daily schedule in Early Head Start is responsive to the individual, unique needs of the infants and toddlers enrolled in each group.

### **Home-based Programs**

The home visiting curriculum used by Save the Children Head Start program staff that is in line with the Head Start Program Performance Standards and facilitates the parent's role as the primary educator of their child in achieving optimal developmental outcomes. In the context of strengthening the parent-child relationship, interactions are facilitated that address all child developmental domains, including social, emotional, language, cognitive, and motor skills.

Home-based teachers also look at other resource materials for ideas for activities and concepts to be developed according to each child's stage of development and individual needs as well as the interests and needs of the family. To individualize the curriculum to meet each family's needs and areas of interests, a number of appropriate screening and assessment tools are utilized to support goals according to each parent's family partnership agreement.

Weekly family lesson plans are prepared by the home-based teacher jointly with the parents. Plans are reviewed by the home-based manager/supervisor and filed for future reference. Weekly activities are planned as appropriate for each family to include each child's stage of development in areas such as fine and gross motor, sensory, perception, cognition and problem-solving. Woven throughout the activities are to be opportunities for the child to develop social competence, self-esteem, creativity and approaches to learning.

Home-based teachers will discuss with each parent his or her roles during home visits and document his or her goals on the family partnership agreement. Home visits are to

be planned cooperatively with parents and in consideration of helping parents attain their goals.

Home visit planning is based upon:

- the development of secure relationships
- an understanding of the child's family and culture
- the development of trust and security
- the opportunity to explore sensory and motor experiences with support from family members and home-based teachers

Home-based teachers are charged with helping parents use the home as the primary learning environment and through the use of items found in the home, families can continue the activities introduced during the home visit on a day-to-day basis. The greatest learning is to occur between the family and child outside of the scheduled home visits.

Home visit activity plans are prepared weekly by home-based teachers with input from the parents and the appropriate program manager. Plans are individualized to include activities appropriate for each child's stage of development in areas such as fine motor, gross motor, social- emotional, cognitive, language, and self-esteem building opportunities. These plans also indicate how the home-based teacher is to work with the parent in facilitating these activities with their child. Staff working with parents of infants and toddlers will emphasize that the greatest learning opportunities occur within the natural routines such as diapering, feeding, toileting, bathing, sleeping, dressing, greetings, etc.

In addition to home visits, families in the home-based program get invited to participate in two socialization activities each month. Socializations are planned activities; home-based teachers develop a plan/agenda for the socialization time with input from the families. Plans/agendas delineate how the time period is used, what type of activities children and parents will be engaged in and if any "special" activities are planned for the socialization (e.g., visit from the firefighters and fire truck, or, perhaps, a special music activity led by a parent or guest artist). Meals and snacks are served.

### **Expectant Families**

Services to expectant families are offered through home visits. The number and time of those visits is determined by the family. Save the Children Head Start provides resources and support to the family for a healthy pregnancy outcome. This includes access to comprehensive prenatal and postpartum care through referrals. Referrals include medical and dental care, mental health services, and nutrition services.

The program uses a curriculum designed specifically for pregnant women and her family. The curriculum is culturally and linguistically appropriate for all families served. The curriculum includes, but is not limited to, prenatal education for pregnant women and their families including:

- Fetal development, including the risks from smoking and alcohol
- Labor and delivery
- Postpartum recovery, including information on maternal depression
- Information on the benefits of breastfeeding



It is important to note that the curriculum offered to the expectant families also provides a smooth transition to the education services offered within the Early Head Start program option in which the child will become enrolled after his/her birth.

## OUTDOOR PLAY



Save the Children Head Start views the outdoor setting as an extension of the classroom and a natural, nature-based setting in which learning and interaction can occur. The outdoor setting is not viewed as a playground where “recess” happens but rather as an “outdoor learning environment.”

Unless it is raining or the weather service has issued a warning to remain indoors, all children will go outdoors daily. State child care licensing regulations require that all children have outdoor play daily because even in cold weather your child still needs fresh air, sunshine, and exercise. If you want your child to remain indoors, you must have a note from your family health care provider.

In general, if your child is well enough to attend school he/she is well enough to go outside. However, we will address an individual child’s needs. For example, some children (like a child with exercise or cold-induced asthma) may have different needs in terms of outdoor activities. We will work with you and your health care provider, to find out your child’s triggers so they can be avoided and so that he/she may enjoy outside time.

In special circumstances, for instance, if your child is recovering from an illness and you feel that the weather will jeopardize your child’s health but you don’t have a health care provider’s note, Save the Children Head Start will honor your request to keep your child indoors for one day only, if staffing permits, after which a health care provider’s note will be required.

Please dress your child for outdoor play and supply appropriate clothing for the season, allowing for weather extremes. As mentioned before, please dress your child in “play clothes”, so he/she may enjoy the time outdoors and your child’s teacher can relax knowing that you won’t be upset when they get dirty.



**Inside Tip:** Many children are not getting to explore the out-of-doors to such an extent that one author has coined the term “nature-deficit disorder.” [Richard Louv, *Last Child In The Woods: Saving Our Children From Nature-Deficit Disorder*, 2005] “...the lack of nature in the lives [of children] links directly to disturbing childhood trends such as obesity, ADD, and depression. Environmental-based education [aka nature-based play] dramatically improves standardized test scores and grade point averages and develops skills in problem-solving, critical thinking, and decision making. Even creativity is stimulated by childhood experiences in nature.”

Sunscreen and insect repellent shall be applied as needed. The approval for application of these is on a one-time permission form that you and your health care provider signed at enrollment.

In the home-based program, home visitors and parents will create a balance of indoor and outdoor learning experiences for children during home visits and socializations. The outdoor setting should be viewed as a natural setting in which learning and interaction can occur. When outdoor activities are planned, staff and parents are expected to be outside with the children to facilitate the learning process and environment in the same manner as indoors.

Parents are encouraged to appreciate the importance of their child's physical development, provide opportunities for and engage in outdoor and indoor active play with their child, and guide their children in the safe use of equipment and materials.

## **TOUCH AND NURTURING**



Physical touching is an important part of the care and nurturing of young children. Children feel loved, accepted and supported through the sensations of touch by nurturing adults and peers. Staff will be respectful of children's body cues and touching only occurs with children's permission. Staff members will be sensitive to children's responses and requests for physical interaction and model appropriate nurturing touches. Except for safety or cleansing, children will always have the right to refuse touch. Even the very youngest children will be approached with a verbal announcement and a request for permission before being picked up or moved by an adult. Children are also taught to respect adults' and other children's touch preferences.

The nature and type of routine physical contact your child might experience while enrolled in the program include the following types of nurturing touches: hugging at greeting, when a child needs comfort, or in response to a child initiated hug, holding on laps for comfort or story, rocking in a chair while reading a story or soothing an infant, rubbing and patting backs at nap time or along with a comment, "Thank you!", holding or carrying, and kissing an injured finger or the top of a child's head, etc.

## **GUIDANCE AND DISCIPLINE**

Save the Children Head Start staff want to support the social-emotional development of all children by building trust, being responsive and fostering independence. Providing clear, consistent limits and having realistic expectations for the children also contributes to this development, as does encouraging respect for others feeling and rights and showing respect of home language/culture.

The long-term goal for children enrolled in the program is to provide a setting where children can slowly develop a sense of inner self-control or self-regulation. They can begin to understand the reasons for limits that are set, and develop a sense of both

being respected and respecting other's rights and feelings.

When adults use positive guidance techniques they assist children in developing self-control and problem-solving skills over time. Positive guidance techniques include problem-solving, redirection, offering choices, refocusing, engaging in play, using positive statements, and active listening. When you are involved in the Save the Children Head Start program at the center, socialization activities, or even during home visits, you are encouraged to adhere to Save the Children Head Start discipline policies.

Home visits create an environment for tremendous discussion, modeling and learning to take place. Parents and home-based teachers who engage in their visits with this philosophy and intention are able to address sensitive topics, such as guidance and discipline, in a supportive and open minded manner. Both parties must be clear that you, the parents, are responsible for providing guidance and discipline for your child during home visits and socialization activities. While it is appropriate for Save the Children Head Start to model certain techniques for you (with your permission), it is important for staff to respect your parental role and never contradict you in front of your child.

When behavior problems arise, staff are encouraged to look at classroom routines, the environment, and individual needs of the child to help the child overcome the behavior. It is important for all adults to be aware of the language, the tone of voice and the manner of speech used when working with young children. Providing each child with choices, foreseeing problems and responding to their needs immediately enables us to help the child positively without having to use more aggressive discipline strategies.

Unacceptable behavior by children is to be considered by the staff as "mistaken" behavior. This behavior is the result of the child's level of development. The staffs are to reinforce reasonable limits and teach children "what to do instead" and not just "what not to do." Staffs realize that everyone makes mistakes and, when they do, that they are capable of taking care of their mistakes (with staff guidance). Staffs are to demonstrate awareness of the idea that acceptable behavior takes time to learn. Opportunities to problem-solve and work through mistaken behavior is to be incorporated as part of the child's curriculum, both individually and in small group situations.

Adults model problem-solving skills for children, by first looking at classroom/daily routines, the environment, and the individual needs of the child to help the child overcome the behavior challenges. It is important for all adults to be aware of the language, the tone of voice, and the manner of speech used when interacting with young children

One of the goals of guidance and discipline is to help children develop tools to problem-solve. Discipline is the external tool to help children develop internal control. Young children learn by experimenting, testing limits and experiencing the consequences of their behavior.

While you are gaining understanding of appropriate or new guidance and discipline methods, you are asked to follow the guidance and discipline policies used by Save the Children Head Start when you are interacting with your child at any Save the Children Head Start program activity. Staff will provide you with support and coaching.

Staff are available to share with you the Save the Children Head Start philosophy of guidance and discipline as an option for you to consider at home as well. You will be encouraged to:

- Look at the total picture
- Identify the issues and challenges
- Clarify your goals
- Identify possible alternatives for how to handle the situation
- Become aware of new information/resources
- Plan how you will handle guidance of discipline of your child in the future

The following methods of guidance and discipline define what is and is not appropriate in Save the Children Head Start programs. Staff will support you in understanding and using the methods that are appropriate.

### **Acceptable/Appropriate Actions**

#### **Method: Indirect Guidance**

- **Prevention:** A well-designed and well-equipped classroom tailored to the developmental level of the children prevents frustration, interruption and hazards. It offers privacy, independence and easy adult supervision. In addition, the daily routine provides enough time for play, a sense of security, little waiting and planned transitions. Home environments can also provide children with regular routines and safe, familiar materials and people to provide stability and care.
- **Modeling:** Teacher/parent-modeled appropriate behavior and communication, as well as positive peer models, are to be provided to help children learn responsibility for their actions. Staff/parent actions and interactions set forth the tone through their actions, body language and voice level. Children copy what they see and hear. If we wish to provide a peaceful and cooperative environment for children to grow and learn, then staff/adults must demonstrate this in actions and voice. When voice levels are soft and calm, the children set their tone in a similar fashion. Adults need to model appropriate expression of their feelings.
- **Descriptive Praise and Encouragement:** When opportunities arise for genuine, descriptive praise and encouragement, staff/adults are to recognize appropriate behavior with positive statements such as, "Look how high you are building the blocks," or "Thank you for helping set the table."
- **Clear Expectations:** Environments that have a few, clear, simple rules that vary according to the developmental level of the children help children know what is expected. Teachers/parents are to set limits that are clear, kept to a minimum and that make sense to the age and stage of children in the classroom. In establishing rules, teachers/parents are to follow these guidelines:
  - Tell children what they are to do in a positive tone;
  - Post rules prominently throughout the classroom for parents and staff to read;
  - Specify results of following rules; and,
  - Explain rules to children and apply rules consistently.

### **Method: Direct Guidance**

Prior to utilizing any direct guidance method, staff/parents must be sure to have the child's attention: arm around child's shoulder, kneeling down, eye contact (where appropriate), confident voice; avoid calling across the room.

- **Problem-solving:** Teachers/parents appeal to the child's growing intellectual and moral reasoning by using natural and logical consequences and asking questions to encourage problem-solving. Teachers can help identify the child's needs, feelings, causes, alternatives and choices. Staff/parents can provide cues such as the statement, "I see you both want to use the same tractor, what do you think we can do?"
- **Redirection:** A child who is out of control, throwing blocks because he/she seems frustrated or angry could be redirected to throwing bean bags into a tub or pounding clay. This is a good chance to "look at the total picture" and use creativity and problem-solving abilities by assessing why the child may be doing this and figuring out how to best respond. A child may need redirecting to one-on-one interaction with a teacher /parent (e.g., in a rocking chair together or a story in a quiet corner).
- **Distraction by Focusing Play:** Teachers/parents can enter into play directly by helping children refocus using the materials constructively. This can be timed so it happens before the situation gets too out of control. Also, teachers/parents can provide a few different props that might stimulate further interest.
- **Using Positive Statements:** Teachers/parents are to use positive statements as much as possible, for example, "Please keep the play dough on the table." As opposed to "Don't throw the play dough on the floor."
- **Active Listening:** Staff/parents are to listen closely to the child to help determine the underlying cause of the behavior.
- **Time Out:** Save the Children Head Start programs do not support the use of "traditional" time out. Positive, empathetic statements such as, "Do you need to be by yourself for a while?" are to be used to help the child recognize the need to quiet him or herself. Other statements such as, "This seems to be hard for you right now, so can I help you find something else to do?" allows children a choice in choosing a more appropriate activity for that time. Children may be invited to work independently for a short time in order to gain self-control, and, in those cases, the child has an open invitation from the teacher/parent to return to the group when she or he feels ready.
- **Separation:** A child may be separated from the group only when many less intrusive methods of guiding his or her behavior have been ineffective. A child is to be separated from the group only when his or her behavior causes concern for his or her safety or that of the other children. When separated from the group, the child is to remain in an area of the room where his or her physical presence can be seen and heard by the teaching staff/parent. In most instances when a child is this upset or out of control, a staff member /parent is to remain with the child to help him or her feel safe to cope with such strong feelings. When a child

has been removed from the group, she or he may return when the child has calmed and is no longer a threat to him or herself or the rest of the group. The child shall return to the group at the earliest possible opportunity.



**Inside Tip** “Traditional” time-out is when you put a child in a ‘time-out chair’ or area of the room where they sit with nothing to do for a designated time -- traditionally one minute for each year of the child’s age. Why Save the Children Head Start does not support the use of this method in our programs is that it doesn’t call upon the child to learn internal controls and self-regulation or natural consequences of their behavior.

### **Persistent Behavior**

Persistent, unacceptable behavior is to be dealt with in the following manner:

- The child’s behavior is recorded in writing using the anecdotal system or behavior log which is to include date and time, what part of the classroom or outdoor space the behavior was occurring and which other children were around.
- Classroom staff are to meet to review the anecdotal log; review the child’s file for any developmental issues, health or family related concerns (consulting with the family services staff); and, develop a program plan, with the parents, to meet the individual needs of the child in question
- If the child does not respond to the program plan, a family meeting is to be held in which parents and staff review the concerns and develop an action plan to meet the needs of the child and family. Any consultation or referral action is to be authorized by the family.

The behavior log and plan are not a type of behavior modification. This would only be appropriate in special circumstances, with individual children, when specified in writing by a mental health professional.



**Inside Tip:** One type of behavior modification is when you give stickers, candy or prizes to children who behave in a way that you want them to in hopes that the ‘reward’ will have them repeat the desired behavior(s). Save the Children Head Start does not support this type of management system because we believe that typically developing children can learn appropriate behaviors and self-regulation through internal motivation without the need for external rewards.

A child could be placed on a modified program plan or excluded from the classroom and offered home visits if a child’s behavior poses a significant risk to the health and safety of the child, other children or anyone else in contact with the child. Program modification may include shortening the child’s day until the child becomes more successful while in attendance or having the child attend fewer days. Other strategies could include transferring the child to another classroom, collaborating with other programs to find a more suitable environment, or assigning an additional person (e.g., a program aide) to be with the child consistently.

Examples of behaviors that may require program modification or exclusion are behaviors

that are continuous, excessive and dangerous:

- Repeated biting
- Repeated kicking
- Repeatedly throwing objects
- Inflicting harm to self
- Oppositional behavior or non-compliance in times of urgency, running from the teacher or from the room or playground.

### **Early Head Start – Additional Guidance**

Responding to a child's needs immediately and building trusting relationships is to be the primary focus of Early Head Start staff. Staff are to watch children closely to help foresee and avoid problems. With infants and toddlers use of the following strategies is required:

- Change the environment
- Offer choices
- Help toddlers with tantrums
- Focus on "do's" instead of "don'ts"
- Model appropriate behavior
- Provide acceptable alternatives
- Appreciate and encourage behavior you want to see repeated
- Clearly share concerns about hurting
- Help children make connections
- Teach words to express strong emotions
- Use hugs and humor

### **Inappropriate/Prohibited Actions**

Any staff member who engages in the following inappropriate and/or prohibited actions is subject to disciplinary action, up to and including termination:

- Corporal punishment, including rough handling, shoving, hair pulling, shaking, slapping, kicking, biting, pinching, hitting or spanking
- Emotional abuse, including name calling, ostracism, shaming, making derogatory remarks about the child or his/her family, or using language that threatens, humiliates, or frightens the child
- Yelling or raising voice (unless a child is in some type of danger, such as running into the street and traffic is coming)
- Withdrawal of food, rest, or bathroom activities
- Inappropriate or untimely diapering procedures (e.g., leaving a child in a soiled diaper)
- Unsupervised isolation
- Use of restrictive environments such as play pens, high chairs, infant swings, walkers or car/infant seats
- Application of traditional "time out" procedures
- Punishing or humiliating a child for toileting habits or lack thereof
- Any type of punishment hazardous to the physical, emotional, or mental health of the child

Parents participating in Save the Children Head Start program activities are asked not to engage in these actions as well.

### **MULTICULTURAL, ANTI-BIAS, AND DIVERSITY COMMITMENT**

Save the Children Head Start is committed to diversity and multicultural education. This means we share a commitment to human rights, dignity of the individual and social justice. Staff strive to create programs that truly reflect the lives of our children, families and community. Because we recognize the impact culture plays in families, the program is to make every effort to provide culturally responsive child development services by affirming human differences and the right of people to make choices about their own lifestyles. The program strives to recognize, appreciate and respect the uniqueness of each child regardless of race, gender, special needs, religion or composition of the family.

Staff are committed and take responsibility to:

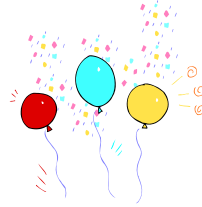
- Recognize the unique nature, value and contributions of each child and his or her family
- Foster high self-esteem and positive self-concept in children
- Encourage children and their families to share with and teach others about their own cultures
- Introduce children to other cultures within the group
- Provide children with a positive experience exploring similarities and differences
- Encourage children to respect other cultures and languages
- Increase children's ability to talk to and play with people who are different from themselves
- Help children be a small group member
- Help children live happily and cooperatively in a diverse world
- Help children notice and do something about unfair behavior and events

### **CLASSROOM DISPLAYS**

Displays in classrooms and socialization spaces are to reflect the culture, traditions, families and activities of all children in the early childhood classroom. Staff will use photographs of the children and their families, as well as specific rituals and landmarks, which are relevant to the specific experiences of the children and families enrolled in the program.

Items made by the children and their families are desirable as they are highly personalized expressions of culture, values and identity. Displays are to be at children's eye level. In an infant room, art work or photos are to be placed at an appropriate height or directly on the floor so a child will see them while being carried, rocked in a rocking chair, and crawling or toddling on the floor. Displays are part of the learning environment.





## **HOLIDAYS AND OTHER CELEBRATIONS**

Save the Children Head Start provides meaningful experiences for children that are reflective and respectful of family traditions from all children in the classroom.

Families are encouraged to share their traditions in centers and at socializations. We encourage you to talk with your child's teacher if you would like to share some of your family's celebrations or holiday traditions and work closely with the teacher to provide developmentally and culturally appropriate experiences for our children. Conversations about the many ways people celebrate are encouraged and will be included as we plan with you to create a multicultural and anti-bias curriculum.

## **FOOD AND CELEBRATIONS**

Please do not bring food to school that are homemade. All food is to be purchase from a grocery store. We encourage you to purchase healthy and nutritious foods

If celebrating birthdays is part of your family's traditions, you may ask the teacher about arranging this event.

However, a potluck is appropriate and homemade or store-bought food can be brought in:

- **During program operational hours** for parents or community members only
- **After operational hours** food may be brought in by parents. Parents are responsible for their children and can choose what their child consumes. A potluck may be planned after hours for family nights or socializations.

## **END OF YEAR CELEBRATION**

At the end of the school year we want to celebrate by having children, families and staff sharing fun activities together. Especially for those children going on to kindergarten, we will celebrate how much they have grown, what they have learned and how exciting it is to be moving on to "the big school."

The end of year celebration focuses on activities which allow for parent, child, and staff interaction. Such activities may include picnics, potluck gatherings, child and family fun days or outings, etc. Staff and Parent Committees will work together to design the exciting, fun, interactive festivities.

Because we want families and children to have fun together, not to be stressed, and to continue to associate school with the joy of learning, we do not include in these end of year celebrations performances by children or have them wear caps and gowns or other "graduation" attire, the significance of which they don't yet understand. We also would never want to create undo economic hardship on families by requiring "special clothes."



## **REST/NAPTIME**

Save the Children Head Start provides a rest/naptime in all of our center-based programs. Staff/child ratios are maintained during naptime and teachers continue to supervise and care for children during this time.

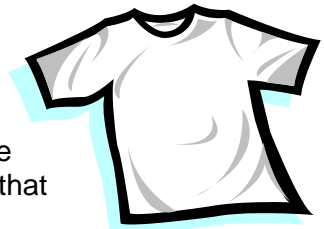
Head Start children may need a rest time to help them relax and unwind from their busy morning schedule. A quiet time in the daily schedule enables them to have a more positive afternoon and be a happier child at home at the end of the day. In a classroom where children attend only part-day, naptime may not be required. If a child does not go to sleep during rest or nap time, he/she is allowed participate in a quiet activity that does not disturb the other children.

We recognize that if a child falls asleep, his/her body requires the rest, so we don't try to keep a child awake if he/she is sleepy. Also, many children fall asleep on the bus ride home. Again, we will let him/her sleep.

Early Head Start children are allowed to rest and nap based on their individual needs and sleep patterns. The older two-year olds and three-year olds may begin resting at a more consistent time; however they will be permitted to take additional rest periods as needed.

## **CLOTHING, LINENS AND TOYS FOR CENTER-BASED CLASSROOMS**

Please dress your children in comfortable 'play clothes' so they may participate in all activities, both indoors and outside; bring appropriate outer wear for the current weather conditions. For safety, shoes should be flat with non-slick soles.



You are asked to provide a clean change of clothing to be kept at the center at all times and exchange clothes as the seasons change so that children are appropriately dressed. When a child wears home the change of clothing left at the center, please provide the center with another set of clothing as soon as possible.

Each child will be provided with his/her own clean bed linen, a sheet, towel or small blanket identified with your child's name to place on his or her cot/mat for daily rest time for those centers that schedule this. Linen is to be laundered at least weekly and more frequently as needed. The decision of who launders the linens will depend upon the program option, resources available to the program and resources available to parents.

In Early Head Start, crib sheets will be changed at least daily (or more often if needed) and laundered at the center.

Videos, however, are not part of the curriculum and should not be sent to school.

Toy guns or other weapons are not offered as play options and should not be brought to class. Material that is violent, sexually explicit, stereotyped, or otherwise inappropriate

for children is also not allowed. Please do not allow your child to bring these types of items.

## **TOILET LEARNING (AKA TOILET TRAINING) IN CENTER-BASED PROGRAMS**



Children are enrolled in the center-based program without regard to whether they have learned to use the toilet independently or not. We will change diapers and assist children in learning to use the toilet when they are ready. Accidents are to be expected. Children who are not yet ready, forget and have accidents will never be made to feel ashamed, if they have an accident.

Coordination between you and program staff around toilet learning is imperative. A conference between parents and teacher will be held to establish common goals and methods.

If your child is currently learning to use the potty, please dress your child in clothing that is easy to get on and off. Also, please provide a change of clothing just in case the need arises. We expect potty accidents to happen.

If your child is wearing diapers, the program provides the diapers for your child. Some programs may provide cloth or biodegradable diapers, due to the negative effect the disposable diapers have on the environment and possible health issues associated with usage. If this is the case, staff will discuss this with you.



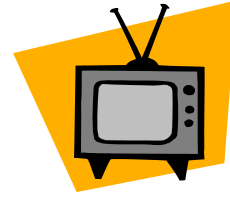
### **Inside Tip?**

Child development specialists suggest that teaching a child how to use the toilet is best started sometime between 30 months (2 ½ years old) and 36 months (3 years old), and sometimes later, depending on the child. Earlier toilet learning is discouraged. Toilet learning is a developmental process not a disciplinary process. Children must be ready to participate if the process of toilet “learning” is to be a positive one. Otherwise, toilet “training” can be a battle of the wills and endless disciplining and disappointments. The purpose of toilet learning is to help children gain control of their body functions.

Adapted from Healthy Young Children, NAEYC #704 [www.naeyc.org](http://www.naeyc.org)

## **VIDEO, DVD, TV, AND COMPUTER USE AND VIEWING**

Appropriate early education programming for young children focuses on active learning and exploration. Use of videos or DVDs is discouraged in the Save the Children Head Start program because they encourage only passive listening and viewing experiences for the children.



Some live action videos/DVDs may be appropriate periodically for preschool children's viewing to illustrate animals or scenes of interest to the children, which they may not be able to experience first-hand. It is the policy of Save the Children Head Start that Early Head Start teachers in center-based programs are not to plan for or provide videos/DVD's for children to watch.

Preschool Head Start teachers in center-based programs must ensure that any video or DVD use must be integrated into the classroom learning experience and therefore are to be indicated on the weekly plan/lesson plan if used periodically. Current popular children's videos or DVDs are not to be a part of the lesson plan. Videos or DVDs may only be used after having been previewed by classroom staff for appropriateness and relevance to children's learning prior to use. Head Start children are not to watch videos or DVDs for more than 30 minutes per month.

Children are not to watch TV, play video games on TV or engage in other electronic games while at Head Start/Early Head Start.

If a computer is used by the Head Start children, the teacher is to monitor the child's computer time. Software that is used is to promote children's active involvement, small group or paired participation, learning, creativity, or fun is to be previewed by staff prior to its use. Computers are not a part of the Early Head Start curriculum or classroom setup.

## **VIDEOTAPING OR PHOTOGRAPHING OF CHILDREN**

Teachers and other Save the Children Head Start staff may occasionally want to take photographs of your child and you for program use such as classroom displays, newsletters, etc. You must sign a consent form before anyone is allowed to videotape, audiotape, and/or photograph your child.

## **ANIMALS IN CLASSROOM AND SOCIALIZATION ACTIVITIES**

Animals can play a valuable role in an early childhood program, providing a wide variety of learning experiences for children. Animals will be appropriately integrated into planned classroom and socialization activities, and interaction between children and animals will be carefully planned and monitored for safety. The inclusion of animals will comply with all child care licensing requirements and state laws applicable to keeping animals in the classroom or socialization sites for children to engage with. Any health issues of children, and any other concerns of parents, must be addressed. The program director and other program staff (e.g., center supervisors, home-based manager/supervisor, teachers) are responsible for preparation of required policy materials, revising existing program materials and maintaining current information as it relates to animals in the program. This includes development of an "Animal Plan" describing the health and safety rules that apply to having animals in the classroom or socialization area.



Parents of all children assigned to classrooms or socialization spaces where animals are present will be informed, in writing, of the animals that will be present. If parents request that their child not be placed in a classroom or socialization space with an animal, the child must be placed in an animal-free space. Such a request might be based upon children or parents who are immune-compromised; have allergies to animals; or fear of certain animals.

Some Save the Children Head Start programs have determined that animals will not be allowed in the program at all. For those programs who do allow animals, they are required to provide a statement regarding their “No Animals” policy which is provided to all teachers and program staff. The “No Animals” policy would apply to animals brought into the classroom or socialization space by children, parents, or others. Please check with your child’s teacher before bringing an animal to class or socializations.

## **FIELD TRIPS**

All trips more than one-quarter mile distances from the center are considered “field trips” and parents’ signed permission is required in advance. Walking trips or “strolling” trips are less than one-quarter mile from the center. Prior permission for walking trips less than one-quarter mile from the center must be signed by you at the time of enrollment and will be kept on file in your child’s record. For any other field trips, permission slips must be signed for each one by you.

Safety is our first concern during field trips and the chosen activity should be safe for children and families. Field trips involving animals will only be made to facilities licensed as zoos or petting farms. Appropriate hygiene will be followed during field trips, including hand washing or disinfecting (e.g., hand gel) after contact with animals.

**Head Start:** In Head Start, field trips enhance children’s learning and promote active exploration in a setting away from the center. All field trips are relevant and integrated into the curriculum.

**Early Head Start:** The purpose of a field trip for Early Head Start is focused on enhancing parent-child interactions while supporting the role of the parent as the primary educator of their child, and will be relevant and appropriate to the developmental age of the children. Walking field trips near the center are encouraged (i.e., to a neighborhood park).

Parents and staff in the home-based program may also plan appropriate field trips or walking/strolling trips following the above guidelines.

## **FAMILY SERVICES**

### **OUTCOMES AND STRATEGIES**

The primary outcome of family services is to provide support to family members as they work to strengthen their family unit and to improve the quality of their daily lives. The family services support person or home-based teacher serves as a link between the family, the program, and the community. The broad basic needs and the specific social, emotional, and parenting challenges faced by families can effectively be met through a comprehensive social service program. In coordination with other program efforts, the family services staff uses the following strategies to support families:

- Confidentiality of information
- Community outreach and partnerships
- Recruitment and enrollment of children
- Family needs assessment
- Family partnership agreement
- Family interests
- Family strengths
- Family goal setting
- Referrals
- Emergency assistance and/or crisis intake
- Follow-up
- Record keeping/child file
- Advocacy
- Home visits; staff-parent conferences, and family meetings
- Family activities, socializations
- Child files, Program Information Report (PIR), data collection and tracking, etc.

### **FAMILY PARTNERSHIP AGREEMENTS**

The staff and family have the flexibility to determine what family services will be provided through the individualized family partnership agreement process. This process includes completion of a family needs assessment and the family partnership agreement. The process is designed to support you and your family in identifying your own strengths, interests and goals. This includes writing down these goals and determining resources and timelines for achieving them. Your family service worker or home-based teacher will schedule a time and place with you to begin the family partnership agreement process. After the initial meeting, the family service worker or home-based teacher will continue to follow up and work with you to achieve identified goals and record accomplishments.

Family partnership agreements are developed with the family and may include the following:

- Developing family goals in relation to their own safety or self sufficiency
- Building knowledge of child development
- Building knowledge of how to plan daily routines that individualize and stimulate learning for the child
- Increase understanding of general childhood health and nutrition and how it relates to their child
- Building knowledge about community resources and skills in problem solving to better utilize available resources.

Expectant families can use the family partnership agreement to identify services to be provided by Early Head Start and how often they will be offered in their homes, community or other settings. The prenatal needs assessment may be used in addition to the family needs assessment to assist in identifying needed resources and supports.

## **HOME VISITS AND STAFF - PARENT CONFERENCES**

In both center and home-based programs additional staff may participate in the home visit or conference (or another family meeting) to assist with coordination and integration of services, as appropriate (e.g., the health and nutrition staff may be invited if there is specific information to share, the family service worker may attend to follow up on family goals, etc.)

**Center-based:** Home visits are made to inform you of what is going on in the program and to form a partnership with you. Family participation and observation of your child's development is highly encouraged – in fact, it is key to your child's success in our program.

Teachers will schedule with you a minimum of two (2) home visits each year for part-year and three for a full-year program. In addition to the home visits, teachers in center-based programs will also conduct with you staff-parent conferences, as needed, but no less than two per program year in part-year and three for a full-year program. These conferences are held to enhance the knowledge and understanding of both staff and parents of the educational and developmental progress and activities of children in the program. The schedule for home visits and staff-parent conferences is determined by the program in coordination with you.

**Home-based:** Parents in home-based programs have weekly opportunities to meet in their homes with staff as well as regular opportunities for socialization. Home-based teachers address family services during these regularly scheduled visits.

## **FAMILY-STAFF RELATIONS AND COMMUNICATION**

Save the Children Head Start believes parents are the most significant adults in a child's life. We strive to create mutual respect between parents and staff and to develop a partnership for the benefit of the child. While these partnerships might become strong throughout the child's enrollment in the program, staff and parents must also recognize the professional nature of their relationship while their child is enrolled in Head Start.

We ask that you tell your child's teacher about any unusual behavior or incident that may have occurred with your child at home so that teachers can take care of your child in the best way possible. Please also share your observations of your child's development with the teachers as well as the positive impacts the program is having on your child and family.

Please be aware of the following opportunities which will strengthen your relationship with program staff and support your child's progress:

- Centers are open to families during all business hours
- Families may expect cheerful greetings from classroom staff and bus drivers and monitors on a daily basis, as well as an attentive ear to specific concerns and instructions
- Parents will want to communicate with program staff to let them know when their child will not be able to attend class or when they are available or need to cancel home visits
- Staff-parent conferences, home visits, or family meetings
- Notes and information about your child from program staff including the EHS daily record, incident reports, events of the day, etc.
- Regular contact with staff during drop off and pick up times, home visits, and socializations
- Home activities that are sent home from the classroom teacher or planned with the home-based teacher to help parents reinforce concepts and skills
- Bulletin boards and newsletters are important sources of current center and program-wide information
- Requests for assistance or information can be shared verbally or in writing
- Formal complaints should be made in writing. All such matters will be followed up in writing in a timely manner by the appropriate staff member
- Out of respect for the parents' role during home visits and socializations parents will be the child's primary contact person. Staff will facilitate interactions between parent and child rather than a staff member and child

Staff record daily notes/anecdotal observations of concerning each child's developmental progress, social skills, and any other incidents that may be interesting and helpful when planning the curriculum or sharing progress reports with parents. As the parent, you are welcome to see these notes at any time.

In the Early Head Start classrooms, staff will record and share information daily about the child's bottle and food intake, introduction of new foods, diaper changes and developmental milestones like crawling, rolling over, etc. Parents will also want to provide information to the teacher daily as well regarding when the child last ate, how they slept, and any other observations of development the parent has noticed that they want the teacher to be aware of.



# FOOD AND NUTRITION SERVICES

## NUTRITION ASSESSMENT

During enrollment, you will complete a nutritional assessment form which will be reviewed by the health and nutrition staff. Eating patterns, cultural and religious preferences, and special dietary concerns will be noted and communicated to all staff involved in the child's nutritional program. If your child has any food allergies, please tell staff about them, your child's symptoms and what to do in case of an allergic reaction. If your child needs a special food, the program will purchase it; a note from the family's health care provider indicating this is needed.

## MEALS



### Center-based Head Start

Breakfast, lunch and/or afternoon snack are provided for children enrolled in center-based Save the Children Head Start programs based on the hours that they attend. Meal times and the number of meals served vary based on the hours a child is in the program. Meals and snacks are planned in consultation with a registered dietitian and meet all federal nutrition standards as outlined under the Child and Adult Care Food Program (CACFP). Parental requests for individual variations in the menu for medical, religious, or personal reasons are honored when requested in writing by the family's health care provider. Additional documentation may be required.

Breakfast, lunch, and/or snack provided by the program is a benefit of participation in the program. Because of CACFP guidelines and nutritional practices, no outside food is to be brought to the center for the children (except for pumped and stored breast milk for infants); this includes foods purchased from a grocery store.

The CACFP program is a sub-art of the U.S. Department of Agriculture (USDA). In accordance with USDA policy, Save the Children Head Start does not discriminate on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital or family status. Save the Children Head Start also prohibits discrimination on the basis of breastfeeding.



Because Save the Children Head Start participates in the Child and Adult Care Food Program (CACFP) it is important for you to be aware of this and if you have any concerns about discrimination related to the food program please address those with us first. However, if you have any unresolved concerns about discrimination in the food program there is a form in the back of this handbook for you report any food discrimination concerns to the USDA federal oversight office.

Meals and snacks are all served family style whenever possible. As a part of family style meal service and good early childhood education practices, classroom staff and volunteers sit at the tables with children, eat the same foods being served to the

children, and converse with the children during meal time.

Staff, classroom volunteers, and children always wash their hands before meals and meal preparation. Children and staff work together in setting tables for meals. We encourage families to do this at home as well. Meal time is designed to be a pleasant social experience shared by children and adults.

Self-help skills such as pouring, serving, and cleaning up are encouraged. Children are also encouraged (but never forced) to eat a wide variety of nutritious food. If a child does not want to eat a particular food item, the child is encouraged to have a taste but is never forced or coerced. Adequate food is prepared to make second servings available if a child desires.

Families are always welcome to eat with their children when their schedules allow. Parents should notify staff in advance in order for enough food to be prepared. Parents are required to follow the same CACFP guidelines as staff and not bring coffee, sodas, tea, snack food, chips, candy, etc. into the classroom.

### **Early Head Start**

Since infants and toddlers may not yet be eating on a schedule, food will be available at all times and will be served when the child is hungry. Even very young children will be encouraged to serve and feed themselves. Children receiving a bottle will be held when fed and will not be put in a crib with a bottle and bottles will not be propped. Children of any age will not be placed in high chairs, walkers, or bouncy chairs during meal time or any other time while participating at the program. Toddlers and preschool age children will be offered child-sized chairs and sit around a table while eating similar to how meals are conducted in Head Start.

Teachers will work closely with you and your doctor (if needed) to introduce solid foods between the ages of four and six months. New foods will begin after introduction of cereal. The teacher will work with you to introduce one new food at a time, allowing sufficient time before introducing the next new food, to determine if allergies occur.

### **Home-based**

Socializations for children and families served in the home-based program will include meals and/or snacks that comply with Head Start nutrition requirements as well as Child and Adult Care Food Program (CACFP) guidelines. All information mentioned in the Food and Nutrition sections regarding family style meal service above, also applies to socializations. Families and home-based teachers will cooperatively plan and conduct food preparation and nutrition education experiences during socializations on a regular basis in accordance with the Head Start Performance Standards and following CACFP guidelines.

# HEALTH, SAFETY, AND EMERGENCY SERVICES AND PROCEDURES

## HEALTH SERVICES

The goal of health services is that each child receives ongoing, continuous healthcare. Promotion of good health and preventative healthcare involves children, parents and all staff. Save the Children Head Start is to ensure that physical exams, dental exams, and nutritional assessments must be completed within 90 calendar days of entry into the program. These services will be updated according to the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program of the Medicaid agency of the state in which the program is located.

Dental care and hygiene is an important focus of Head Start health services. Preschool age children in center-based programs are provided with toothbrushes and taught to brush their teeth after meals at the center. In Early Head Start center-based programs, infants and toddlers mouths and teeth are gently cleaned using age appropriate methods.

Through the Save the Children Head Start program, a system is established to involve the parents in accessing needed medical and dental health services for their child, to track and report completion of needed services, and to identify health concerns to be addressed through individualized plans for follow-up and treatment.

## EMERGENCIES / EMERGENCY CONTACTS

For your child's well-being it is critical that we have up-to-date emergency contact information for your family in our files *at all times*. In case of an emergency we must know how to reach you or your emergency contacts as soon as possible. Please provide any changes in your personal or emergency contacts to your family service worker, center supervisor, or home-based teacher to ensure that we always have the most current information.

Each Save the Children Head Start program has an Emergency Response Team (ERT) responsible for creating a program Emergency Preparedness Manual to be followed in the event of an emergency or major disaster (e.g. missing child, fire, earthquake, etc.). In the event of an emergency, either you or the emergency contact person(s) will be contacted immediately. In the event you or your emergency contact person cannot be reached, staff will follow program procedures until your child can be reunited with you.

Contact your program to learn more about the emergency preparedness procedures they will follow in case of an emergency.

Center-based programs follow a schedule for monthly fire drills with the children. All families are encouraged to practice emergency preparedness activities and fire drills in their home. During home visits, home-based staff assists the family in conducting fire drills in their home twice a year.

In the event a parent, during a home visit, is involved in an emergency and is unable to make decisions regarding him/herself and the child, staff will call your designated

emergency contact person(s).

## **DAILY HEALTH CHECK**

In center-based programs and as part of regular Save the Children Head Start procedures, a staff member conducts an informal daily health check of each child as soon as possible after the child enters the bus or center. They will check for changes in appearance or behavior (lethargy or drowsiness), skin rashes, itching, complaints of not feeling well, and other signs of illness. If anything of concern is noticed, the responsible health services staff is notified. You will be contacted regarding any immediate concern.

## **SICKNESS - EXCLUSION POLICY – INFECTIOUS DISEASES**

Parents are expected to be considerate of each other and children in the program by notifying staff, not sending their children to class, and cancelling the home visit, or not attending socializations in the case of illness as defined below.



If you or your child becomes ill while at the center or socialization activity, your child or you exhibit any of the following medical conditions or is not feeling well enough to participate in class or socialization activities, you and your child will need to go home. The person who is ill will be isolated from the other children and adults while arrangements are made for them to return home.

If your child is at the center without you, you or the emergency contacts you have provided will be contacted and asked to make arrangements to take your child home. If your child is injured or becomes severely ill and you cannot be contacted immediately, we will make sure that appropriate medical attention until you can be reached.

Save the Children Head Start reserves the right to send your child home and/or require a note from your family's health care provider before readmitting your child into the center if he/she has been sick.

Children should always see a health care provider for diagnosis, local exclusion regulations and release. Staff are not to diagnose. Below are illnesses that require exclusion from the program and the requirement for when a child may return:

- Fever of 101 degrees F, or any fever accompanied by behavior changes or other signs or symptoms of illness until a medical professional evaluation finds the child able to participate at the center again
- Symptoms and signs of possible severe illness until a medical professional evaluation find the child able to participate at the center. Symptoms and signs of possible severe illness includes:
  - lethargy that is more than expected tiredness
  - uncontrolled coughing
  - inexplicable irritability or persistent crying
  - difficult breathing, wheezing, or other unusual signs for the child
- Diarrhea, defined by more watery stools, decreased form of stool that is not associated with changes of diet, and increased frequency of passing stool, that is

not contained by the child's ability to use the toilet. Children with diarrheal illness of infectious origin generally may be allowed to participate at the center or at socialization site once the diarrhea resolves, except for children with diarrhea caused by *Salmonella Typhi*, *Shigella* or *E. Coli*. For *Salmonella Typhi*, three negative stool cultures are required. For *Shigella* or *E. Coli*, two negative stool cultures are required. Children whose stools remain loose but who, otherwise, seem well and whose stool cultures are negative can participate at the center

- Blood in stools not explainable by dietary change, medication, or hard stools
- Vomiting illness (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health care provider determines that the cause of the vomiting is not contagious and the child is not in danger of dehydration
- Persistent abdominal pain (continues for more than 2 hours) or intermittent pain associated with fever or other signs or symptoms
- Mouth sores with drooling, unless a health care provider or health department official determines that the child is noninfectious
- Rash with fever or behavior change, until a health care provider determines that these symptoms do not indicate a communicable disease
- Pink Eye (purulent conjunctivitis defined as pink or red conjunctiva with white or yellow eye discharge), until after treatment has been initiated. In epidemics of nonpurulent pink eye, exclusion shall be required only if the health authority recommends it
- Head Lice (pediculosis), from the end of the day until after the first treatment
- Scabies, until after treatment has been completed
- Tuberculosis, until a health care provider or health official states that the child is on appropriate therapy and can participate at the center
- Impetigo, until 24 hours after treatment has been initiated
- Strep throat or other streptococcal infection, until 24 hours after initial antibiotic treatment and cessation of fever
- Chickenpox (Varicella-Zoster), until all sores have dried and crusted (usually 6 days)
- Pertussis, until 5 days of appropriate antibiotic treatment has been completed
- Mumps, until 9 days after onset of parotid gland swelling
- Hepatitis A virus, until 1 week after onset of illness, jaundice, or as directed by the health department when passive immunoprophylaxis (currently, immune serum globulin) has been administered to appropriate children and staff members

- Measles, until 4 days after onset of rash
- Rubella, until 6 days after onset of rash
- Unspecified respiratory tract illness: Children without fever who have mild symptoms associated with the common cold, sore throat, croup, bronchitis, rhinitis (runny nose), or otitis media (ear infection) are not to be excluded from participation, sent home, or separated from other children in the center unless their illness is characterized by one or more of the following conditions:
  - The illness has a specified cause that requires exclusion, as determined by the local health department or health provider
  - The illness limits the child's comfortable participation in center activities
  - The illness results in a need for more care than the staff can provide without compromising the health and safety of other children

Treatment with antibiotics is not to be required or otherwise encouraged as a condition for attendance of children with mild respiratory tract infections unless directed by local health authorities.

- Shingles (herpes zoster): Children with shingles must keep sores covered by clothing or a dressing until sores have crusted. The need for excluding an infected person is to be decided based on the recommendations of the person's health care provider. If a conflict or question about participation at the center or socialization site arises, the program staff person responsible for the health content area is to consult personnel at the health department. Until the conflict is resolved, readmission is to be delayed
- Herpes simplex, (herpetic gingivostomatitis) children who do not have control of oral secretions are to be excluded. In some situations, children with mild disease who are in control of their mouth secretions may not have to be excluded. The staff person responsible for the health content area, health consultant or health department officials are to be consulted

If a difference of opinion or question about a child being temporarily excluded from attending or returning to the center or socialization site arises between parents and staff, the staff person responsible for the health content area will consult personnel at the health department or the child's health care provider and will have the final say.

## **IMMUNIZATIONS**

Immunizations and immunization records must be kept as current as medically possible, not only to protect your child, but also to comply with state child care licensing regulations. Your family service worker or home-based teacher will support you in your efforts to keep your child current with his/her immunizations. When your child receives an immunization, please share the information with your family service worker or home-based teacher who will keep a record of it in your child's file.



## **ADMINISTRATION AND STORAGE OF MEDICATION**

Please inform staff of any medications your child has received. Medications to control a fever of 101 degrees F orally will not be administered by program staff. Children with a fever are considered sick; please keep them at home.

All medication (including over-the-counter medications) needed while your child is in the center can be administered by program staff, but require both the written consent of the parent and a prescription signed by a health care provider. All medicine (both prescription and over-the-counter) must be in the original, labeled container with the child's name, expiration date and dosage on it. Dosages and times will be recorded and initialed by the staff member. All medication must be signed in daily by the parent/guardian.

The Save the Children Head Start medication policy and procedures serve as the minimum requirement. If state or local requirements are more rigorous, those shall prevail.

The administration of medicines at Save the Children Head Start centers is limited to:

- Prescribed medications ordered by a health care provider for a specific child, with written permission of the parents or legal guardian
- Nonprescription (over-the-counter) medications with written directions from a health care provider which includes the dose, time, route and length of time the medication is to be given for a specific child or for a specific circumstance for any child in the center, with written permission of the parents or legal guardian
- Sunscreen, insect repellent, diaper creams, petroleum jelly, etc. will not be administered without written directions from the health care provider
- Medications that have previously been given to the child

Note: Initial or first time doses of medications must be given by the parent.

Parents are to inform staff of the time of any medications given to their child before they leave the child at the center or before putting the child on the bus. Staff will notify parents of any medications given while at the center. Medications to control a fever are not to be administered by program staff. Children with an oral temperature (fever) of 101 degrees F are considered sick and are to stay home.

Staff will keep a record all medications administered while a child is at the Save the Children Head Start program. All medications kept at the center or socialization site will be in a locked box away from children's access at all times. All empty or unused medication containers will be returned to the parent. Prescriptions and over-the-counter medications are only to be administered when:

- The staff person administering the medication has attended training
- The medication is in the original container

- The medication is not expired
- The medication has the name of the child and the dosage to be administered
- The name of the prescribing health care provider is listed on the original container (for prescription medication)
- The health care provider has provided written notice of approval (for over-the-counter medication)
- The parent provides written consent
- The medication is to be given more than three times in a day unless a specific time is required or ordered by the child's health care provider (i.e., at noon, at naptime)

Socialization activities are to be attended by the parent and child. Parents are responsible for administering any medication to their children during home visits and socializations. All medications brought to socializations will be stored in a locked container inaccessible to children and returned home with the parent/child immediately after the socialization activity.

Staff who administer medication are trained to:

- Check that the name of the child on the medication and the child receiving the medication are the same
- Read and understand the label/prescription directions in relation to the measured dose, frequency, and other circumstances relative to administration (i.e., in relation to meals/snacks)
- Administer the medication according to the prescribed methods and the prescribed dose
- Observe and report any side effects from medication
- Document the administration of each dose by the time and the amount given

For special medication needs, an individual health care plan or a plan for injectable medications form must be completed for individual children as applicable.

## HAND WASHING

Keeping hands clean is one of the most important steps we can take to avoid getting sick and spreading germs to others. Save the Children Head Start staff, volunteers, and children use proper hand washing techniques throughout the day, including when they arrive each day. Parents are encouraged to reinforce proper hand washing at home. The following is the hand washing procedure used by Save the Children Head Start:



- Use liquid soap, disposable towels, and running water
- Wet your hands with clean running water and apply liquid soap
- Rub hands together to make lather and scrub all surfaces for 10 seconds. Continue rubbing hands 20 more seconds. This can be timed by singing the "Happy Birthday" song two times or using a timer. It is the friction of the hands rubbing together with the soap that actually removes the dirt, bacteria, etc.
- Rinse hands until they are free of soap
- Dry hands with a clean, disposable paper towel or air dryer
- Shut off water with paper towel





## **ACCIDENTS AND FIRST AID**

Save the Children Head Start staff have both first aid and child CPR training to rely on if there is a serious injury to a child. All centers and socialization sites have first aid kits that are well supplied and kept in a designated location. Only soap and water will be used to clean a wound. No antiseptic or ointment will be applied.

Minor accidents requiring first aid will be treated by the teacher or in the center office by staff certified in first aid. If a child sustains any type of head injury, bump or broken skin, you or your emergency contact will be notified by the teacher, family service worker or center supervisor.

If a serious accident occurs in the center or on the playground, a staff member will notify you or your emergency contact. If basic first aid is sufficient and the child can be moved, we ask that you transport your child to a doctor or emergency room. The center supervisor will call ahead to alert the emergency room or doctor with pertinent information.



If your child is to be transported by an emergency medical vehicle, he/she will be accompanied by a staff member if allowed by the EMS staff, if you or your emergency contact is not there. We will let you or your emergency contact know immediately where your child is being taken.

## **SAFETY PRACTICES AND INCIDENT REPORTS**

It is important for you to report to the center supervisor or another staff member any health and safety hazards or unusual or strange circumstances in the center, socialization site, or surrounding area that may cause an accident or become a safety issue.

Save the Children Head Start have checklists to be used to assess the safety of its center-based settings both indoors and outdoors. These and specific Head Start Performance Standards are to be used to make sure all center-based settings comply with all safety requirements.

We also keep incident reports for each child. If your child gets a minor scratch, bump or bruise while in school, we will note it on the incident report, give you a copy that day, and put a copy in your child's file. All incident reports are kept confidential.

Balloons are not used in Early Head Start because they can be choking hazards.

## **AUTHORIZATION FOR EMERGENCY MEDICAL OR DENTAL TREATMENT**

In case an emergency occurs and you or one of your emergency contacts cannot be located to give permission at the time of an emergency, Save the Children Head Start requires you to sign an emergency treatment and transportation information consent form at enrollment. The consent form is used to seek treatment until you arrive.

## DENTAL CARE



Dental care and hygiene is an important focus of Head Start health services. Preschool age children in center-based programs are provided with toothbrushes and taught to brush their teeth after meals at the center. In Early Head Start center-based programs, infants and toddlers mouths and teeth are gently cleaned using age appropriate methods.

In the event of a dental injury during program hours of operation or during socializations, the following steps are to be followed:

- One staff member (who is first aid certified) is to assess to determine if first aid is needed and then, if appropriate, initiate first aid as another staff member supervises the remainder of classroom or group of children
- Contact parents immediately if follow-up treatment is needed. If unable to contact parents, call emergency contact(s)
- Notify center supervisor, home-based manager/supervisor, and program director
- Complete and submit an incident report (within 24 hours)



## FIRE DRILLS

Save the Children Head Start holds monthly fire drills and posts evacuation plans. Please do not be alarmed if a fire drill occurs while you are in a classroom or at a socialization site. We suggest that families practice fire and other safety drills at home so that all family members are familiar with what to do in case of a fire. In home-based programs, staff will assist the family in conducting fire drills in their home twice a year during home visits.

# CHILD ABUSE AND NEGLECT IDENTIFICATION AND REPORTING

## PROTECTING CHILDREN FROM CHILD ABUSE AND NEGLECT

It is a responsibility of Save the Children Head Start staff to promote the healthy and safe development of the children in our program. It is our goal to promote the healthy family functioning of families enrolled in Head Start.

Being a parent can bring much joy but at times it can be a tough job and sometimes it becomes overwhelming. If you feel that you or someone in your family needs help to keep your child safe, talk to a Head Start staff member so they can help you find assistance to keep your child safe. Together we can all make the world a safer place for children.

### Identification and Reporting

Any staff that recognizes the signs and symptoms of reportable events related to abuse or neglect of a child enrolled in the program (i.e., observing the signs they were trained to identify) is required by law to report to the appropriate state agency. Staff do not need permission to report; in fact, staff are mandated reporters.



To learn about your state's laws regarding mandatory reporting of child abuse and neglect you can search the on-line state data base on the website of the Child Welfare Information Gateway at [www.childwelfare.gov/systemwide/laws\\_policies/state](http://www.childwelfare.gov/systemwide/laws_policies/state)

Reportable situations include, but are not limited to:

- Signs of malnutrition
- Poor hygiene
- Unattended physical or medical problems
- Unexplained bruises, burns, or welts or explanations that don't fit the injury
- Child appears frightened of a parent or caregiver
- Pain, bleeding, redness, or swelling in anal or genital area
- Sexual play with toys, self, or others that is not age appropriate
- Knowledge of sex that is not age appropriate
- Extremes in behavior ranging from overly aggressive to overly passive
- Delayed physical, emotional, or intellectual development
- Abandonment of a child by a parent or guardian; Absence of proper parental control or subsistence, education, medical or other care of control necessary for the child's well-being
- Child is constantly belittled, berated, or blamed by the parent

## **SERVICES PROVIDED FOR CHILDREN WITH DISABILITIES, DEVELOPMENTAL DELAYS, OR AT-RISK FOR DEVELOPMENTAL DELAYS**

### **SEEING THE CHILD FIRST AS A CHILD**

Save the Children Head Start uses the motto “children first” to articulate the position of viewing a child as a child first (and not as their disability would describe them). Children with disabilities, developmental delays or at-risk for delays are more like their peers than different, and it is important that the child is seen from that perspective. Save the Children Head Start employs early childhood education approaches that are based upon the best available research and practices in the field to benefit all children enrolled in the program.

Save the Children Head Start programs believe it is important to implement an integrated, developmentally appropriate, universally designed curriculum framework that is flexible, comprehensive and linked to assessment and program evaluation. Such a curriculum framework can help ensure successful access, which in turn facilitates participation and learning of all children and families, regardless of need, ability or background.

Save the Children Head Start, as an inclusive early education program, actively recruits children with disabilities. If you know or think that your child may have a disability or delay in any of the following areas, be sure to tell a Save the Children Head Start staff member.

- Hearing
- Speech
- Vision
- Emotional Development
- Physical Development
- Mental Development
- Learning
- Health
- Other

Under the Individuals with Disabilities Education Act (IDEA) Head Start programs are to develop collaborative relationships and written agreements with the Local Education Agency which provides services to children three to five years of age with disabilities (Section 619) and the Early Intervention Program for children birth through two years of age (Part C).

Through the LEA and the Early Intervention Program preschool age children with disabilities receive a comprehensive Individual Education Plan (IEP) and infants and toddlers with disabilities have an Individual Family Service Plan (IFSP). The plan is written by a team of the child’s parents, teachers and appropriate professionals, such as speech and occupational therapists. Save the Children Head Start staff will also participate on the team for children enrolled in our programs and to determine if Head Start is an appropriate placement for children not yet enrolled in Head Start.

If your child has a diagnosed disability, you will be contacted by the staff person responsible for disabilities services upon enrollment and asked to provide copies of all assessments or evaluations completed for your child. This information will be kept confidential and will be used to assist staff in planning for your child's developmental needs and educational growth.

Some children's disabilities will be identified through the Head Start process of screening, ongoing assessment, or sharing a parent or staff concern. With the parents' consent, they will be referred to the LEA or Early Intervention Program for further evaluation.

Following that evaluation a family meeting will be scheduled with the LEA/Early Intervention Program and the Head Start staff to determine the next steps and to review your child's information, such as health information, screening and assessment data and input from the teachers working with you and your child.

Inclusion in an Early Head Start or Head Start setting provides children with disabilities an opportunity to learn, to play, and to live with non-disabled children. It helps all children develop healthy attitudes about each other and themselves and teaches them lessons of friendship, compassion and caring that they will carry for their whole lives.

## **PARENTAL RIGHTS**

Public Law 106-17, the Individuals with Disabilities Education Act (IDEA) Amendments of 1997, strengthens the rights of parents to participate in the educational decision-making process. This includes the right to:

- A free appropriate public education for your child. Free means at no cost to you as parents. Appropriate means meeting the unique educational needs of your child.
- Request an evaluation if you think your child needs special education or related services.
- Be notified whenever the school wants to evaluate your child or change your child's educational placement, or refuses your request for an evaluation or a change in placement.
- Informed consent. Informed consent means you understand and agree in writing to the evaluation and educational program decisions for your child. Your consent is voluntary and may be withdrawn at any time.
- Obtain an independent evaluation if you disagree with the school's evaluation.
- Request a reevaluation if you think your child's present educational placement is no longer appropriate. The school must reevaluate your child at least once every 3 years, but your child's educational program must be reviewed at least once during each calendar year.
- Have your child tested in the language he or she knows best. For example, if your child's primary language is Spanish, this is the language in which he or she

must be tested. Students who are deaf have the right to an interpreter during the testing.

- Review all of your child's school records. You may request copies of these records, but the school may charge you a reasonable fee for making the copies. Only you, as parents, and those persons directly involved in the education of your child will be permitted access to personal records. If you feel that some information in your child's records is inaccurate or misleading or violates the privacy or other rights of your child, you may request that the information be changed.
- Be fully informed by the school of all rights that are provided to you under the law.
- Participate in the development of your child's individualized education program (IEP) or individualized family service plan (IFSP), if your child is under school age. The school must make every possible effort to notify you of the IEP or IFSP meeting and then arrange it at a time and place that is convenient for both you and the school.
- Participate in all IEP or IFSP team decisions, including placement.
- Request an IEP or IFSP meeting at any time during the school year.
- Be kept informed about your child's progress at least as often as parents of children who do not have disabilities.
- Have your child educated in the least restrictive environment possible. Every effort should be made to develop an educational program that provides your child with the services and supports needed in order to be taught with children who do not have disabilities.
- Voluntary mediation or a due process hearing to resolve differences with the school that cannot be resolved informally. Be sure you make your request in writing, date your request, and keep a copy.

### **What Resources are Available to Help You?**

Your local and state education agencies have information to help guide you through the special education process. Since the specific criteria and procedures used by school districts may vary, your local director of special education and his or her staff can help you access such information. Additional resources are available from national organizations. Some of them will also be able to direct you to local and state chapters that can provide more local support.

# MENTAL HEALTH SERVICES

Mental Health is an essential part of well-being. It is foundational to the ability to think, learn and grow. For young children the term “mental health” is synonymous with social and emotional development. A definition of early childhood mental health is summed up as:

The developing capacity of children birth through age five to:

- Form close and secure relationships with adults and peers
- Experience, regulate and express their emotions in appropriate ways
- To explore their environments, try new things and learn – all in the context of their family, culture and community

## THREE-TIERED APPROACH TO EARLY CHILDHOOD MENTAL HEALTH

Save the Children Head Start provides a range of activities through a three-tiered approach to early childhood mental health. The plan to address early childhood mental health includes supporting children and families as well as staff through:

- **Promotion:** Emphasizes the provision of nurturing and responsive relationships with children, teachers, staff and families. The curriculum and environments strongly support social and emotional development. Staff and families engage as partners to promote and support the building of secure relationships through various means such as parent and staff collaborative meetings, staff and parent training opportunities, and implementing program policies and procedures. All children and families take part in promotion.
- **Prevention:** Involves providing families, caregivers, and teachers with information and specific support related to social and emotional development of children who need extra support related to their social and emotional development. Children, families and teaching staff are provided with specific information and instructions related to supporting the child's development. Mental Health professionals are resource personnel with experience and expertise in serving young children, their families, and expectant mothers. Parents and staff receive assistance and guidance from the Mental Health professional with input from the Health Services Advisory Committee. Within 45 calendar days of entry, all children's social and emotional development is screened using a standardized screening instrument.
- **Intervention:** For a small number of children, where serious social and emotional development concerns exist, a family-centered comprehensive intervention plan is created. The family, teacher, and mental health resource person is involved in developing this assessment-based plan that focuses on skill building for the child.

All aspects of development, including children's social emotional competence, are essential outcomes of the Save the Children Head Start program. Save the Children Head Start provides mental health services through staff or consultants licensed or certified with experience and expertise in serving young children and their families.

# INTEGRATED SERVICES APPROACH

A critical element of Save the Children Head Start services is that the child and family are at the center of the circle of support. Head Start standards refer to child and family centered services. Head Start staff work together and with community partners to provide children and their families with a seamless system of caring, coordinated services and supports.

Key components of the integrated services are noted in your child's file. These include contact logs that list all contacts with the family and community agencies contacted to support the family. Family meetings, home visits, staff-parent conferences are all based on a "team" approach with the family. All of these meetings are also documented in the child's file. This is why you are often asked to "sign" so many forms; to ensure that all services that Head Start is required by law to provide, have been provided to you.

## CHILD FILES

### **Confidentiality of Records – Access to Child Files**

A confidential, individual file for each child in the Save the Children Head Start program is maintained in accordance with state and federal laws and regulations and information in those files is released only in accordance with those laws and regulations.

Save the Children Head Start takes the position that a parent has the authority to inspect and review records relating to his or her child unless Save the Children Head Start has been advised that the parent does not have the authority under applicable state or federal law governing such matters as guardianship, separation, custody, or divorce (e.g., court order, state statute or other legally binding document). In a situation where parents are not living together, either parent having not been legally barred is to have access to the child's file.

Parents and legal guardians have the right to inspect their child's files.

- The parent/guardian shall use the child file access request form to gain access to their record.
- This review is to occur no later than ten (10) working days after a request is received.
- Inspection and review is to be conducted during normal working hours and the custodian of the file is to be present.
- All records are to remain within the program. Parents (with children currently enrolled or those with children no longer enrolled in the program) wishing to make copies of any records in their child's file for themselves or for a third party may indicate so on the child file access request form. For parents with currently enrolled children there is no charge (budget allowing) and for parents with children no longer enrolled there will be a charge for copies based on the cost to the program.
- If after inspection and review, the parent/guardian is not in agreement with information maintained in their child's file, she or he may make a written request



- to the program for an explanation, amendment, or correction. The written request is to detail reasons for the requested change.
- Save the Children Head Start will take all written requests into consideration and weigh their impact, if any, on child services. If Save the Children Head Start elects not to amend the record as requested, the program is to notify the parent of the decision and maintain the parent's written request for amendment in the child's file.

Only authorized persons are permitted to view children's records or files. Save the Children Head Start internal audit teams, state child care licensing agencies, and Head Start federal review teams are the only outside agencies, individuals or groups allowed to review records without a consent form signed by the parent or guardian. Anyone reviewing a record or file must sign a third-party access form. The third-party access form is maintained as a record of all parties reviewing records if these parties are not the main custodian of the file (a Save the Children Head Start staff working in program where the child is enrolled). Anyone other than regular HS/EHS staff entering data into the file must sign the third-party access form.

### **Authorization to Release Confidential Information**

Parents and staff are to jointly decide if all or part of the child's records are to be forwarded to the school system, or other children's services programs or agencies. If a parent does not give consent for release of all or part of the records that contain personally identifiable information, this fact is clearly documented by Save the Children Head Start staff in the file and the information is not to be released.

Written parental consent (via the child file access request form) must be obtained before any personally identifiable data, information, or materials from the child's file can be released, disclosed or shared with any third party. Written parental consent must clearly identify the program participant and information subject to third party release. The term "participant" includes children and families currently enrolled in Head Start services, Children and families previously enrolled and information provided in connection with application for enrollment.

Exceptions to the parental consent rule include:

- Information required through a subpoena or other legal process;
- Situations that pose an immediate threat or danger to an individual or the community;
- Information that must be disclosed as part of a statutory or legal obligation, particularly the reporting of suspected child abuse and neglect and related investigative activities; or,
- Official representatives of funding, auditing, licensing, investigative and other regulatory agencies entitled to conduct program reviews and/or audit activities.

When a Save the Children Head Start program transitions to a new, replacement grantee and enrolled children remain in the same program, parental consent for the transfer of records is not required (as per legal ruling for Save the Children Head Start

National Interim Contract). Children moving from Save the Children Head Start to another program (a different HS/EHS program or early care and education program, or for any other additional service) require parental consent for the release of records.

## **DECLINING OR REFUSING SERVICES**

In the event you wish to refuse any services, after staff has explained the benefits of those services, you may be asked to sign documentation of your refusal or staff will document in your child's file your verbal refusal. Staff will always try to share with you any services that will be of benefit to your child and family. No additional services of any type will be provided to your child without your prior written approval if you decline them whether you sign a declination of services form or not. A notation of your verbal declination will be made in the Save the Children Head Start child master file indicating who refused the services, to whom the refusal was made and the date. Your refusal of services does not negate the program's responsibility to effectively support your child and family. Program staff will strategize ways to provide the best services to your child while honoring your decisions.

## **PARENT AND COMMUNITY VOLUNTEERS**

Save the Children Head Start believes that parents are a child's first and most important teachers because they are the most significant adults in the child's life. It is our goal to promote the parent/child relationship and support you in your role of child rearing.

### **PARENTS**

All parents are encouraged to become fully engaged in the program in a variety of ways. For instance, you may:

- *Observe* your child's classroom at any time
- *Have input* into your child's daily experience by identifying specific goals and objectives for your children
- *Volunteer* in the classroom or in other parts of the program as often and for as long as you wish
- *Encourage friends and other family members* to share their time and talents and get work experience by volunteering in the program



As parents you are always welcome in Save the Children Head Start classrooms. By visiting and volunteering, you can gain a deeper understanding of your child and the Head Start program, gain many new experiences, and give something back to the program. When parents volunteer, their time may be counted as part of the local "match" required to receive funding to run the program.

### **PARENTS AND COMMUNITY MEMBERS AS VOLUNTEERS.**

Come and join us in the classroom; read, sing, dance, play games, write children's words, and share cultural experiences with children. Volunteer to make classroom resources at home, assist with a field trip or set up the outdoor play space; work on your classroom or center newsletter, help in the office, fix toys or equipment, or just talk with us about what you enjoy doing and we will find a place for you as a Save the Children Head Start volunteer!

A Volunteer Handbook with important information for all volunteers to read will be provided. All volunteers go through a training session before assisting in classrooms. If you plan to volunteer more than eight hours per week, a health exam, TB-test and criminal background check are required.

Detailed records are kept on the number of volunteer hours you donate and any items you contribute, like toys, books, or art supplies. From these records, we recognize our volunteers each year for their outstanding contributions to the program.

For more information about volunteering, contact your center supervisor, your child's teacher, or the staff person responsible for the family and community partnerships service area.

## **BENEFITS OF VOLUNTEERING**

The benefits of volunteering in the program are many.

- Research shows that parent involvement in their child's education and school has a positive impact on children's success in school
- You will have fun and make friends
- You will gain knowledge about child development
- You will gain experience that you can include in your resume and may be useful in your current job or in getting a new or different job
- If you are considering a career in early childhood education, human services, health or nutrition, office work, maintenance or many other areas that are part of Head Start services, you can "try out" that career and see if you enjoy it, while gaining valuable experience
- Parents who meet the minimum job qualifications are given preferential consideration for employment in the program

## **WAYS PARENTS AND COMMUNITY MEMBERS CAN VOLUNTEER**

- Actively participating with a teacher in working with a child or children in the home
- Accompanying children on field trips
- Volunteer in the classroom
- Working in the office
- Being a bus monitor
- Providing child care for other parents during program related activities
- Providing transportation for parents to and from program related activities
- Carrying out tasks for the program at home, such as: making sheets and pillows for the classroom; doing laundry for the classroom; mending equipment; creating classroom resources, cleaning, etc.

- Helping with outdoor maintenance or development of nature –based play area on playground, building, gardening, etc.
- Working on a program newsletter or website

## **VOLUNTEER CONDUCT IN THE CLASSROOM**

All classroom volunteers, including parents, are expected to follow program standards and policies. Volunteers in Save the Children Head Start classrooms will:

- Receive assignments and direction from Save the Children Head Start staff
- Follow through with assigned activities or projects
- Support classroom activities
- Interact in a positive and professional way with staff, children, and other volunteers
- Defer to Save the Children Head Start staff in all matters concerning child guidance and discipline
- Maintain absolute confidentiality-Staff and volunteers strictly adhere to program confidentiality policies
- Focus on children and facilitate their activities.
- Keep adult conversations to a minimum and be focused on supporting the children.
- Follow common sense guidelines for public behavior. Drug, alcohol and tobacco use, swearing, threatening, shouting, fighting, and firearms are all examples of common sense prohibitions.
- Express any concerns in private – never in the classroom- to the staff member who has the ability to address your concern.
- Take opportunities to talk with the teacher outside of class time to discuss center policies, child development, guidance and discipline.

## **Head Start Standards of Conduct for Staff, Consultants and Volunteers**

The following standards of conduct are set out in Head Start Program Performance Standard 1304.52(h)(1):

- I agree to respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion or disability
- I agree to follow program confidentiality policies concerning information about children, families and other staff members
- I agree to never leave a child alone or unsupervised while under my care
- I agree to use only positive methods of child guidance and will not engage in corporal punishment, emotional or physical abuse or humiliation. In addition, I will not employ methods of discipline that involve isolation, the use of food as punishment or reward or the denial of basic needs.

Save the Children Head Start reserves the right to deny access to Save the Children Head Start facilities to parents and volunteers who violate the above guidelines for classroom conduct and/or standards of conduct.

## PROGRAM GOVERNANCE

Save the Children Head Start programs include parents and community members as active decision-makers in policies, procedures and other important issues that affect your child's education and how the program operates. This process is called shared governance.

If you are interested, you might become an officer of the Parent Committee, a member of the Policy Council, Health Advisory Committee or other program committee, or attend meetings and special training sessions for parents, including some out-of-town conferences. Participating on the Parent Committee or Policy Council of a Head Start program is a privilege and wonderful opportunity to serve your child, program, and community and to learn and grow as an individual.



For more information on this topic see  
*The Parent Voice: An Introduction  
to Shared Decision Making in Head Start*

### PARENT COMMITTEES

Parent Committees are organized at the center level and involve home-based parents as well. All parents are automatically members of a Parent Committee and are invited to attend meetings and serve on committees of the Parent Committee.

Parent Committees serve as a forum where parents can explore a wide variety of issues which impact both home and center (such as curriculum plans), identify training needs, and organize support groups. As a member of the Parent Committee you plan, conduct, and participate in informal or formal programs and activities for parents and staff (e.g., Parent Committee meetings, family picnics, family field trips, etc.). Parent Committees are encouraged to discover and discuss what parents would like to do; what they would like to learn; and how ideas can be carried out with or without staff assistance.

Often Parent Committee members help in recruiting and interviewing employees; helping determine how and where to recruit potential employees and participate in the interview process.

As a part of the Parent Committee you also have opportunities to advocate on behalf of low-income family needs and assist in recruiting parents and other resources to support activities that you yourselves plan.

The Parent Committees also elect Head Start and Early Head Start parents to serve on the Policy Council,

## **POLICY COUNCIL**

The Policy Council (PC) is composed of elected parents and community representatives. It meets monthly to review and approve business such as plans for the program, personnel recommendations and policies, enrollment criteria, and the annual program budget. It functions as a link to Parent Committees and PC members operate as the voice for the parents who have children currently enrolled in the program. A majority of Policy Council members are parents of currently enrolled children; the remainder are community members.

A parent member and an alternate parent member are elected from each Parent Committee annually. A key role for Policy Council representatives is to express the ideas and viewpoints of the parents at the center- or home-based program they represent. Policy Council members receive formal training on their other roles and responsibilities.

Policy Council members cannot be Save the Children Head Start employees, nor can they be related to any Save the Children Head Start employee by blood, marriage or domestic partnership. There is a lifetime limit of three (3) one-year terms to serve on the Policy Council.

## **SAVE THE CHILDREN HEAD START BOARD OF DIRECTORS (Governing Board)**

The Save the Children Head Start Board of Directors has the administrative and fiscal responsibility for the Save the Children Head Start program. As the governing board for the program, the Save the Children Head Start Board of Directors is a partner in the shared governance of the local Save the Children Head Start program.

# COMPLIMENT AND COMPLAINT POLICY AND PROCEDURE

Save the Children Head Start is open to hearing your positive feedback and suggestions as well as we also want to be sure that we respond to any concerns or complaints that you may have about any part of the program.

## COMPLIMENTS

Anytime you see something you like and you would like staff to continue or repeat it, please let them know. Research shows that programs that receive at least three positive comments to everyone negative comment are much more successful in creating positive long-lasting changes. You can share this information with staff or volunteers verbally or in writing.



Attached is a sample parent compliment form that you can use to formally provide written positive feedback to the program or individual staff members. Copies of the form are available in your local program.

## COMPLAINTS

If you have a concern about your child's development, please discuss it with his/her teacher (center- or home-based) right away. This includes any concerns about behavior, activities, health or emotional well-being. The more information that you share about your child, the better we can care for your child and help him/her develop his/her learning and life skills.

We are committed to working closely with you and your child to create a positive learning experience. Please share your comments and concerns with Save the Children Head Start staff. Your concerns will always be addressed.

If you are dissatisfied with any part of the program, please have a conversation first with your child's teacher (center- or home-based) or with the individual with whom you have an issue. Hopefully, together we can resolve the issue just by talking about it openly, courteously and respectfully. If you still are not satisfied after that conversation, please discuss the issue with the center supervisor or the supervisor for home-based services. If that conversation still does not resolve the issue, please talk over your concerns with the program director.

We encourage you to try to resolve the problem through neutral, polite and open conversations with the staff members involved and/or their supervisors. But at any time you may file a formal written complaint and it will be answered in writing.

This entire process needs to be addressed in a mutually respectful way. We respect your rights as parents and we ask that you also respect program staff. Save the Children Head Start program administrators will not tolerate staff who behave disrespectfully toward parents or parents' blatant disrespect of any staff member. Disrespectful staff will be disciplined appropriately. Any parent who is unwilling or unable to handle interactions with staff respectfully risks having his/her child suspended from receiving future services from Save the Children Head Start.



See the parent complaint form sample on one of the following pages. Please use this method to address a complaint only after you have tried to have the conversations with appropriate staff members as described above. Copies of the form are available in your local program.

## **PARENT/COMMUNITY COMPLAINT POLICY AND PROCEDURE POLICY**

In compliance with Head Start Performance Standards 1304.50 (d) (2) (v), the Save the Children Head Start Board and Policy Council are required to establish and maintain a procedure for working to resolve community complaints about the program.

Save the Children Head Start assists the Policy Council members in developing a procedure for receiving and addressing parent and community complaints. This procedure is provided to all families and is available to the community served by STC Head Start. Save the Children Head Start promotes the philosophy that the individuals involved in a complaint should make every effort to resolve issues between themselves as the first step in any disagreement, misunderstanding or complaint.

### **PROCEDURE**

Regardless of the origin of the complaint, whether in the community at-large, a parent meeting, the bus stop, or the center, the following procedure will be utilized in an effort to resolve the issue at the earliest possible opportunity at the lowest possible level.

#### **Step One**

**Step One: The person(s) with the concern should discuss the concern with the person(s) involved.**

The individuals involved should meet informally and make every effort to resolve the issue together immediately. If the issue is not resolved through conversation, the employee [or contractor], should provide the person(s) with a concern the work contact information for his/her direct supervisor and notify the supervisor of the unresolved concern.

#### **Step Two**

**Step Two: The person(s) with the concern should discuss the concern with the person's supervisor.**

The person(s) with the concern should contact the responsible supervisor to discuss the issue. The supervisor will listen to the concern and as appropriate, engage the person(s) with the concern with the employee(s) involved, other program staff or contractors to resolve the issue through conversation.

#### **Step Three** (when the issue has not been resolved during step one or two)

**Step Three: The person(s) with the concern will submit a written complaint to the supervisor involved.**

If the person(s) with the concern does not believe that the issue has been resolved following a conversation with the supervisor, a written complaint should be submitted to the supervisor involved. The person(s) making the complaint is free to ask for assistance in writing down the complaint, if needed.

The written complaint should be factual, free of opinion and focus on what happened.

The supervisor receiving the written complaint must submit a copy of the complaint to the Program Director or designee within one working day of receipt, to ensure the Program Director is aware of the situation.

#### **Step Four** (required follow-up to the written complaint by the supervisor who received the complaint)

**Step Four: The supervisor receiving the complaint contacts the person(s) making the complaint to schedule a face-to-face meeting to facilitate resolution to the concern.**

The responsible supervisor will contact the person(s) making the complaint within one working day to determine the date, time and location for the face-to-face meeting.

Other program employees or contractors providing related services will be invited to participate in the meeting as necessary to understand all factors impacting the concern.

The goal of the face-to-face meeting is to restate the concern/ complaint and create an acceptable resolution to the concern whenever possible. The supervisor will facilitate the meeting and ensure that each person's point is heard and respected. The group will determine one of the following next steps:



1. It may be decided that no further action is needed if the discussion resolved the issue.
2. It may be determined at the meeting that more information is needed; if so, the meeting will be rescheduled.
3. An action plan may be developed that is acceptable to all parties.
  - a. The plan of corrective action is then implemented.
  - b. The action plan must include a time line of actions to be taken and identify the person responsible for each action.

If the action plan includes information that must be shared with all staff at the center level, this will be done at the next scheduled staff meeting. Administrative staff will be notified of this action.

If the participants at the meeting are unable to resolve the issue or design an acceptable and agreed upon action plan, the supervisor will notify the group and the written complaint is presented to the Program Director within one working day.

If the person(s) making the complaint is unwilling or unable to meet, options may include:

1. The supervisor will hold Informal conversation with the employee or contractor involved in the report;
2. The supervisor will contact administrative staff as needed; or
3. The supervisor will determine that the complaint has been resolved and is closed.

**Step Five** (if the face-to face meeting does not result in resolution or an agreed upon plan)

**Step Five: involves the Program Director in the process.**

The Program Director will review the written complaint with appropriate staff.

The Program Director's actions may include:

1. Contacting the person(s) with complaint and working to resolve.
2. Issue a written response to the complainant within five days.
3. Devise an action plan developed with staff and person(s) with complaint.
4. Determine no action is needed.
5. Develop a change in procedure. If a change in procedure is recommended, the Program Director will take the issue to the Deputy Director, stating the recommendations. If the Deputy Director agrees with the changes in procedure, the issue will be considered resolved. If not, the complaint will remain unresolved.

**Step Six**

**Step Six: involves the Program Director and the Deputy Director in the process.**

The Program Director and Deputy Director together will address and work to resolve the complaint. If they are unable to resolve the complaint, the complaint will be forwarded to the Early Childhood Advisor along with a SMART! Report.

**Step Seven**

**Step Seven: involves the Early Childhood Advisor**

The Early Childhood Advisor will address the complaint until resolved.

The decision of the Early Childhood Advisor is considered final and is the final step of this procedure.



The Parent/Community Complaint Procedure must be approved by the initial Policy Council. If there are any changes to this policy/procedure an updated version will be provided as an amendment to this handbook.

# Save the Children Head Start PARENT COMPLIMENT FORM

**Name of person filing this compliment:** \_\_\_\_\_

**Address:** \_\_\_\_\_

Mailing address City State Zip Code

Email address: \_\_\_\_\_

**Telephone Number** (include area code): (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

**Best time to call:** \_\_\_\_\_am/pm

**Please describe in detail what it is that the program or staff are doing that you like and want to see continue. Please provide specific, positive feedback (who, when, where, why, etc.):**

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**Signature**

Date \_\_\_\_\_

Please deliver to Program Director.

**Thank you for your feedback!**

**Save the Children Head Start  
PARENT COMPLAINT FORM**

**Name of person filing this concern:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
Mailing address City State Zip Code

**Email address:** \_\_\_\_\_

**Telephone Number:** (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

**Best time to call** (include area code): \_\_\_\_\_ am/pm

**Please describe your concern: (who, when, where, why, etc.)**

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**Please state the action that you think would resolve this concern:**

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\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

Please deliver to Program Director.

**Thank you for your feedback!**

**Save the Children Head Start**

# CHILD AND ADULT CARE FOOD PROGRAM (CACFP) DISCRIMINATION COMPLAINT FORM

*Please complete all sections.*

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Your Address: \_\_\_\_\_  
\_\_\_\_\_

Your Telephone #: \_\_\_\_\_

Save the Children Head Start Program: \_\_\_\_\_

Center Name: \_\_\_\_\_

Please describe your specific discrimination complaint:

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Please list names, titles and business addresses of persons who may have knowledge of your concern. \_\_\_\_\_

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Please mail to:

USDA Director,  
Office of Civil Rights,  
1400 Independence Avenue, SW  
Washington, D.C. 20250-9410 or call  
1.800.795.3272 or 202.720.6382 (Voice and TDD)

**In accordance with U.S. Department of Agriculture policy, Save the Children Head Start does not discriminate on the basis of race, color, national origin, gender, religion, age, disability, political beliefs, sexual orientation, marital or family status.**

**Save the Children Head Start also prohibits discrimination on the basis of breastfeeding.**

## FAMILY HANDBOOK ACKNOWLEDGEMENT PAGE

My initials and signature below acknowledge that I have:

1. Been accepted by SAVE THE CHILDREN HEAD START for my child to receive services in the local Head Start or Early Head Start program and services have been explained to me \_\_\_\_\_
2. Received a copy of the SAVE THE CHILDREN HEAD START *Family Handbook* \_\_\_\_\_
3. Received a copy of SAVE THE CHILDREN HEAD START *The Parent Voice* \_\_\_\_\_
4. Been informed that the SAVE THE CHILDREN HEAD START program participates in the Child and Adult Care Food Program (CACFP) \_\_\_\_\_
5. Been informed of the compliment and complaint policies and procedures of SAVE THE CHILDREN HEAD START \_\_\_\_\_
6. Been informed of Parental Rights contained in Public Law 105-17, the Individuals with Disabilities Education Act (IDEA) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

Your Child's Name: \_\_\_\_\_

Center Child Attends \_\_\_\_\_ or Home-based \_\_\_\_\_

Save the Children Head Start Staff Signature: \_\_\_\_\_

*Staff signature verifies that Save the Children Head Start services have been explained to the family, the compliment and complaint forms have been reviewed with the parents/guardian, and that the parents/guardian have been given a copy of the Save the Children Head Start Family Handbook.*

*(Be sure this last page can be signed and torn out without anything else on the other side)*