



# Head Start and Great Start Readiness Programs 2021-2022 Parent Handbook



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## **Child & Family Development**

Early Head Start and Head Start promotes children's development through services that support early learning, health, safety, and family well-being.

## **NMCAA Program Philosophy**

We believe that children need strong families in order to develop into mature adults who are productive members of society. Our goal is to nurture families. We will seek whatever support is available and advocate for what is needed to enable the children in each family to be successful in school and beyond.

## **Confidentiality**

NMCAA Head Start/GSRP programs value and respect the privacy of all families, children, caregivers, and staff. Education staff will only discuss information about your child with you. You may at times feel that you need to discuss personal affairs with your child's teacher. Teachers will not share private information unless we have your written permission. Families will also respect the rights of others when visiting the center and attending program activities. Please refrain from discussing any child-to-child conversations, behaviors, or staff and family information outside the classroom.

## **Licensing Notebook**

The center maintains a licensing notebook of licensing inspection reports, special investigation reports and related corrective action plans for the last 5 calendar years. The notebook will be available for your review during regular business hours. The Licensing Rules for Child Care Centers can be viewed at [https://www.michigan.gov/documents/lara/BCAL\\_PUB\\_8\\_3\\_16\\_523999\\_7.pdf](https://www.michigan.gov/documents/lara/BCAL_PUB_8_3_16_523999_7.pdf).

## **Personally Identifiable Information**

NMCAA Early Childhood Programs will inform parents of their rights regarding the disclosure of Personally Identifiable Information (PII) from child records. The Annual Notice of Personally Identifiable Information can be found on our website:

[www.nmcaa.net](http://www.nmcaa.net).

A hard copy of the document will be provided upon your request.

## WELCOME! From Our Family to Yours

*Dear Families,*

*Welcome to the Northwest Michigan Community Action Agency (NMCAA) family! Maybe you are an expectant parent; or maybe you are enrolling in one of our programs with an infant, toddler, or preschooler. In any case, we are honored that you have chosen us to join you in providing a great start to your child's learning experience.*

*No one knows your child better than you! Building a strong connection with you is one of our top priorities because of this. During your time with us, we invite you to share your thoughts, concerns, and hopes for your little one with our team. We can better adapt our program to meet your child's individual interests and needs when we know more about them and you.*

*The health and wellbeing of our enrolled children, families, and staff is a top priority for us, especially during these changing times. We maintain close connections with area health departments and stay up to date on recommendations from state, local, and federal entities to ensure that our policies and procedures lead to the provision of safe, functional learning environments. If you have any questions about practices within our programs, please do not hesitate to reach out to your home visitor or your child's teacher.*

*While we are planning for full in person services this program year, we recognize the importance of being flexible and responsive as new information related to the pandemic arises. Our commitment to you is that we will make adjustments accordingly, in order to do our best to ensure that program environments are safe for children, families, and staff. This may mean changes to program policies and procedures, especially in the following areas of the handbook: parent participation, absences, typical daily schedule, bringing items from home, sick policy, hand hygiene, transportation, and food service delivery. Please know that you will remain informed as any program changes or updates are made.*

*Family engagement is a cornerstone of all that we do. It is participation on a number of levels, from families like you, that helps to make our programs supportive and relevant. Engagement as a parent comes in many forms. No matter your schedule, or amount of time available, we encourage you to ask your teacher or home visitor about ways you can become more involved.*

*As a program that cares about the entire family, we look forward to partnering with you on your parenting journey. Please feel free to contact us if you have any concerns, ideas, or questions along the way.*

*Sincerely,*

*Shannon Phelps (mother of Klayton and George)  
Early Childhood Programs Director*

*Brandy Keeney (mother of Amber, Jenny, Sara, Lauren, Luka, and Arthur)  
Parent Policy Council Chairperson*

231-947-3780 or 800-632-7334

[www.nmcaa.net](http://www.nmcaa.net)

## **Program Options**

***All program options are designed to include children of all abilities.***

### **Head Start Child Care Collaborations**

- Full day, year-round program
- Enrolled children receive Head Start services at their child care site
- Families receive parent/teacher conferences and are offered home visits to support parents in strengthening their child's school readiness skills
- Child care providers are trained to deliver Head Start services at their child care center or licensed home
- Child care teachers are supported in their efforts to provide individualized lesson planning based on each child's level of ability using the GOLD assessment tool and parent input
- Children are in one location all day - easier on children and parents

### **Head Start Single Session (HS)**

- Centers are open 4 hours per day, 4 days per week
- Families receive 2 parent-teacher conferences and 2 school readiness home visits
- Programs are open September – June
- Family Engagement Opportunities
- Transportation options for your child may be available

### **Head Start Extended Day (HS)**

- Centers are open 7 hours per day, 4 days per week
- Families receive 2 parent-teacher conferences and 2 school readiness home visits
- Programs start in September and end in June
- Family Engagement Opportunities
- Parents transport their children to and from the center
- Transportation options for your child may be available

### **Great Start Readiness Program (GSRP) 4 Year Olds**

- Children must be 4 years old by September 1
- Centers are open 7 hours per day, 4 days per week
- Families receive 2 parent-teacher conferences and 2 school readiness home visits
- Programs start in September and end in May
- Family Engagement Opportunities
- Transportation options for your child may be available

## **Help Us Fill Our Classrooms - Spread the Word!**

We need your help! As an enrolled family, you can help us spread the word about all our 0-5 child development opportunities. Please share information regarding our program options with other families and encourage them to complete an online pre-application at [www.nmcaa.net](http://www.nmcaa.net) or call us for an appointment with a recruitment specialist. Your efforts in sharing the benefits of these programs with others will help our program and impact the life of a child. **We are always taking applications! Use QR Code to start the application today!**



Benzie, Grand Traverse, and Leelanau Counties  
231-947-3780 or 800-632-7334

Kalkaska, Missaukee, Roscommon, and Wexford Counties  
231-775-9781 or 800-443-2297

Antrim, Charlevoix, and Emmet Counties  
231-347-9070 or 800-443-5518

### **NMCAA Head Start/GSRP Complaint Procedure**

NMCAA Child Development Programs gives program participants and the general community an opportunity to voice concerns about program services and delivery systems.

Unresolved complaints regarding NMCAA preschool programs will be referred to the Head Start Director and/or the Executive Director. If you are a GSRP parent and are not satisfied with NMCAA's service, you may contact your local Intermediate School District office and ask to speak with your Michigan Department of Education Early Childhood Consultant.

Every attempt will be made to resolve a complaint immediately. However, if an individual wishes to file a formal complaint, he or she may complete the NMCAA Complaint Procedure Form (available at each site) and send it to NMCAA, Early Childhood Programs, 3241 Racquet Club Dr. Suite A, Traverse City MI 49684. NMCAA will contact the individual within 30 days after having received a completed complaint form.

## **Head Start Parent Committee Membership and Policy Council**

In Head Start, parents play many important roles and are a vital partner in the program's success.

### **HEAD START VIEWS ALL PARENTS AS THEIR CHILD'S FIRST AND MOST IMPORTANT TEACHER. Parent Committee**

Parent meetings and family engagement activities provide opportunities which allows families and staff to work together and learn from one another while developing resilience, protective factors and accomplishing shared goals. During these opportunities, parents have opportunities to engage in the Head Start Parent Family and Community Engagement Outcomes: Family Well-Being, Positive Parent-Child Relationships, Families as Lifelong Educators, Families as Learners, Family Engagement in Transitions, Family Connections to Peers and Community and Families as Advocates and Leaders.

The parent committee from each Head Start classroom and child care collaborative site elects a representative to serve on Policy Council. Each Policy Council parent represents a classroom teacher.

### **Policy Council**

Policy Council is the governing body of the Head Start program and acts as the parents' voice in making decisions and providing input for the program. Policy Council is comprised of both parents/guardians of currently enrolled children and representatives of our community.

Some of the responsibilities of Policy Council include review and approval of all major program policies, grant applications, annual assessments, and financial audits. Policy Council members actively participate in making decisions regarding the operation of the program. A representative is present at most hiring interviews for key personnel; their input is sought and given due consideration.

Elected Policy Council members are reimbursed for child care and mileage from their home to the meeting site. Policy Council meets approximately 10 times per year. Policy Council meets approximately 10 times per year and may take place remotely or in person. For either of these options, elected Policy Council members are eligible to receive reimbursement for child care. When meetings take place in person, round trip mileage from home to the meeting site is also reimbursed. **Talk with your child's teacher or child care provider about how to become involved!**

## Great Start to Quality

NMCAA classrooms participate in Great Start to Quality, Michigan's tiered quality rating and improvement system for child care providers and preschool programs.

Great Start to Quality rates these program providers on a scale of one-to-five stars based on state quality standards of care, safety, professionalism, and early learning. These quality standards have been approved by the State Board of Education for child care and preschool, informed by early learning experts and parents.

Your child deserves the best, which is why NMCAA takes part in this important effort to help all Michigan's children have the highest quality experience.

### Volunteer Screening and Supervision Policy

#### Head Start Program Performance Standards:

A program must ensure that children are never left alone with volunteers.

#### Licensing Rules for Child Care Centers:

Supervised volunteers must receive a public sex offender registry (PSOR) clearance prior to contact with children in care. Unsupervised volunteers shall complete the Child Care Background Check (CCBC) and be found "eligible" prior to contact with children in care.

**Policy:** To ensure the safety and well-being of all children in care, NMCAA will screen all potential volunteers following the Head Start Program Performance Standards, Great Start Readiness Program requirements, and the Licensing Rules for Child Care Centers. As NMCAA shall adhere to the most stringent rules and requirements, volunteers must not be left unsupervised with children in care.

**Procedures:** Prior to contact with children in care, all potential volunteers shall undergo the following screening procedures: a PSOR clearance, complete the HS/GSRP Annual Pre-Service Orientation Training (APOT), and obtain a medical and tuberculosis (TB) clearance, as applicable. ***The PSOR clearance and APOT must be completed on an annual basis for returning volunteers.***

**Volunteers include, but are not limited to, the following:** ISD staff, Mental Health Consultants, guest speakers, and parents/family members of enrolled children. \*\*\*

***Parents who spend time in the classroom, outside of regular drop off and pick up times, are considered volunteers and must complete the required screening paperwork.***

#### Screening Process:

- All supervised volunteers shall receive a public sex offender registry (PSOR) clearance **before** having any contact with a child in care. A copy of this clearance must be kept on file at the center.

- **Any individual listed on the PSOR is prohibited from having contact with any child in care.**
- In addition to a PSOR clearance, the center will review the **HS/GSRP Annual Pre-Service Orientation Training** forms with the supervised volunteer. This includes signing the **Staff and Volunteer Mandated Reporting Policy** acknowledging the following information:
  - The individual is aware that abuse and neglect of children is against the law.
  - The individual has been informed of the center's policies on child abuse and neglect.
  - The individual knows that all staff and volunteers are required by law to immediately report suspected abuse and neglect to Children's Protective Services (CPS).
- A center shall keep on file at the center evidence to verify that each volunteer who has contact with children at least four hours per week for more than two consecutive weeks is free from communicable tuberculosis (TB). Verification of TB status is required within one year before employment or volunteering. Volunteers are responsible for the cost of their TB test.

#### **Volunteering in the Classroom:**

- Volunteers shall be supervised at all times by NMCAA staff and shall not have unsupervised contact with children.
- All volunteers shall provide appropriate care and supervision of children at all times.
- All volunteers shall act in a manner that is conducive to the welfare of children.
- The volunteers' interests shall determine their role in the classroom.
- NMCAA staff shall provide guidance and clear expectations with volunteers to assist them in successfully carrying out assigned duties.

#### **PSOR Instructions:**

- Go to [Michigan State Police Sex Offender Registry: https://www.michigan.gov/msp/0,4643,7-123-1878\\_24961---,00.html](https://www.michigan.gov/msp/0,4643,7-123-1878_24961---,00.html)
- Click on "**Search the Michigan Sex Offender Registry.**"
- On the next screen, click "**Search for Offenders in your Area**" in the top left corner.
- Click on the "**Name**" tab: type in the name of the volunteer and click on "**Search.**"
- Review the results of the search:
  - Individuals without a profile or match on the PSOR may continue the volunteer process.
  - Individuals with a detailed profile on the PSOR must **NOT** have contact with any child in care.
- **Print a copy of the search screen, regardless of the profile results; a copy must be kept on file at the center.**

## Participating in Your Child's Classroom

Adults can participate in the preschool classroom in a variety of ways depending on staff needs. There is always something to do and having an extra pair of hands is a great help to the entire classroom.

### Some ways to get involved:

**Be an observer:** Watch, listen and learn what happens in preschool. Watch your child learn during play. Become comfortable with the setting and activity schedule.

**Focus on your child:** Be a play participant. Follow your child's lead; he or she will draw you into play.

**Assist the staff:** Help with the daily program and routines. The education staff will welcome your assistance and provide you with guidance as to what tasks would be most helpful. As a volunteer, you will never be left alone with children.

Children often become more and more used to sharing their parent while at school. In the beginning, it may help to explain to your child that while you are at school, you will be a volunteer for all the children.

**PLEASE, join us when you can.** Your education staff has more specific suggestions for what you might do as a volunteer.

## Parent Participation

Head Start/GSRP could not exist without tremendous parent involvement and interest in the program. Thank you to all parents who share their strengths with the program.

### **Parents have the opportunity to provide input about the operation of the program?**

- Become active at your center.
- Talk with other parents and staff about the program and ways that each person can help.
- Head Start parents may assist and support the current parent serving on Policy Council.
- If elected, Head Start parents may serve as Policy Council representatives.
- Use the suggestion box in the classroom to share ideas or thoughts about the program.
- Offer opportunities for decision-making activities within the local advisory structure.
- Share ideas and input about ways to improve program quality.

### **Participating in the program:**

- Gives you an understanding of what the program is doing for your child and how you can help.
- Shows your child that you care about school.
- Provides the education staff with an opportunity to get to know you better.
- Staff can learn from you, and you can learn from them.
- **Parents may also request assistance in implementing fun, educational activities in their own home.**
  
- To reinforce and support the child's total preschool experience, staff members can provide parents with ideas about learning opportunities to continue the program at home.
- Teachers send home monthly calendars that describe fun activities you can do with your child. Activities are based on Creative Curriculum goals that support your child's growth and development.

### **Head Start/GSRP School Readiness Home Visits and Parent/Teacher Conferences**

Home visits are a valuable part of the Head Start/GSRP experience.

#### **The education staff visits your home to:**

- Make connections between the home and classroom setting so there are open lines of communication
- Learn more about your child and your hopes and dreams for them
- Share ideas about learning opportunities available in your home
- Tell you more about our curriculum and your child's current development

Thank you for participating in home visits! They are important in building relationships with your child's teachers and supporting your child's success in school and in life.

#### **Parent/teacher conferences are:**

- A scheduled meeting that takes place in the classroom with your child's teacher and you to discuss your child's growth and development using the data on the GOLD assessment tool.
- Scheduled in December/January and in May. The conferences are 45 minutes.
- A time for you to ask questions about your child's school experience and to set goals for your child's continued growth.

If at some point you need to cancel a home visit or a parent/teacher conference, please call the center to reschedule.

## **MyTeachingStrategies Family Mobile App**

One of the many ways for you to participate in our program is by communicating with us through MyTeachingStrategies mobile app. The mobile app is a way to inform you about your child's ongoing development and learning.

Parent/guardians must submit an email address for each adult family member who wishes to access the mobile app. Your teacher will have an email sent to you so you can set up an account to access your child's assessment information. We look forward to this additional resource for partnering with you in your child's education.

## **Parent Notice of Program Measurement\***

NMCAA is required to work with the Michigan Department of Education (MDE) to measure the effect of the state-wide Great Start Readiness Program (GSRP). Information is sometimes collected about GSRP staff, enrolled children, and their families. Program staff or a representative from MDE might:

- Ask parents questions about their child and family.
- Observe children in the classroom.
- Measure what children know about letters, words, numbers, etc.
- Ask teachers how children are learning and growing.

Information from you and about your child will not be shared with others in any way that you or your child could be identified. It is protected by law.

Questions? Contact:

- [mde-gsrp@michigan.gov](mailto:mde-gsrp@michigan.gov) or 517-241-7004 or MDE, Office of Great Start, 608 W. Allegan, P.O. Box 30008, Lansing, MI, 48909
- Northwest Michigan Community Action Agency, 3963 3 Mile Road  
Traverse City, MI 49686 800-632-7334

## **Advisory Meetings**

Each center has an advisory committee meeting which meets at least two times per year. The committee consists of classroom staff, supervisors, parents, and specialists/stakeholders. The committee reviews local operations, including recruitment/enrollment, classroom observations and child outcome data, and other issues important to parents. The committee needs parents to be part of the decision-making process governing your local center. All parents are encouraged and welcome to attend these meetings.

ISDs work in collaboration with programs to provide a data advisory committee and school readiness committee which meet periodically throughout the year

All parents are encouraged and welcome to attend these meetings as well. Each region hosts a Great Start Collaborative Parent Coalition where parents and early childhood professionals gather to discuss important issues impacting children and families.

### **Health Services Advisory Committee**

The purpose of the Health Services Advisory Committee (HSAC) is to participate in planning, operation, and evaluation of program health policy and procedures. This committee also assists the program in meeting its goal of establishing community partnerships and developing collaborative relationships and agreements with community agencies and organizations. This committee meets at least 2 times per year. If you would like to be apart of the committee, please let your teacher know.

#### **The range of functions of the committee includes:**

1. Assisting the program in meeting the Head Start Performance Standards, providing technical assistance on the NMCAA Child and Family Development Health Plan and NMCAA Safety and Emergency Preparedness Plan implementation
2. Problem-Solving - needs identified by staff members, parents, or professionals (e.g. problems with dental treatment referrals)
3. Developing policies and procedures
4. Evaluating the health plan and program, participating in the program's planning process
5. Identifying health and nutritional needs of the community and of the children and families the program services, participating in the program's Community Assessment
6. Assisting Head Start to identify all medical, dental, mental health, and nutritional resources within the service area community and to establish collaborative relationships and agreements with these resources
7. Assisting in development and provision of health education programs for staff, parents, and children
8. Acting as child health advocates within the greater community.

## **Family Partnerships - the Classroom Teaching staff are an – Advocate for You**

One of the teaching staff's roles in the program is to support families throughout their Head Start/GSRP experience.

The classroom teaching staff in addition to being your child's teachers, are:

- An advocate
- A parent educator
- A resource

The classroom teaching staff offers support and helps families to:

- Locate resources
- Discover strengths
- Set and achieve personal goals
- Obtain the necessary health screenings
- Understand how the program works
- Provide home visits to enrolled families as needed

### **The Family Partnership Process**

The family partnership process begins at recruitment. It's now time to celebrate your enrollment in the program. There are multiple ways we partner with families through classroom communications, parent meetings, family engagement events, workshops, home visits and parent teacher conferences. Our program is unique in many ways, including our design to meet the individual needs of families. Families are asked to complete a required needs assessment called the **Family Needs Assessment**. Information gathered from this helps staff celebrate family strengths and areas of interest for more information and/or community resources and referrals.

Families are also asked to complete the **Family Outcomes Tool** survey twice during the year which helps staff individualize for families and determine areas of interest for more information through newsletters, handouts, links, videos, or workshops. This survey helps us determine if we have helped families grow during the school year with their personal home practices and routines.

Both surveys can be helpful when we ask families to establish **Family Partnership Goals**. These goals support school readiness skills and positive family outcomes. Families choose their personal family goals and staff support them in the process, including offering resources and/or community referrals. When families feel uncertain about setting a family goal, staff may ask them to consider their responses from both surveys.

**Family Engagement Specialists** are assigned to classrooms and are advocates for families in the family partnership process and family engagement outcomes. FES help families identify strengths, promote positive and nurturing family relationships and support families in achieving their desired goals, needs and connections to community resources.

### **Cultural Competency Plan**

The purpose of the cultural competence plan is to develop a system that can effectively provide services to children and families of all cultures, races, ethnic backgrounds, and religions in a manner that recognizes values, affirms, and respects the worth of the children and families and protects and preserves the dignity of each. NMCAA believes that by addressing the cultural and linguistic needs of our children and families, it will improve access to health care, quality of education and better school readiness outcomes. It is important to value the culture, ethnicity, race and religion in the delivery of services that NMCAA provides to ensure a comprehensive and coordinated plan that includes interventions on levels of policy and procedures making, program administration and evaluation, and most importantly quality programming for all enrolled in the program.

NMCAA has many partnerships that help to ensure the cultural competence plan is executed. The agency works with four Intermediate School Districts in its service area. Each ISD brings a unique support based on their resources and capacity. They provide special education services to ensure all children are receiving education experiences based on their needs. They also provide Early Childhood Specialists to do observations in the classrooms to monitor the cultures of the classroom are represented and activities are planned to support these cultures. The Resource Center provides resources and support through trainings that are offered in the 10 different counties NMCAA serves. Head Start provides programs with the resources they need to purchase classroom materials and equipment to support the plan. There are activities planned through language experiences, creating food from different cultures, celebrations, books, dolls so that currently enrolled children and families are reflected in the lesson plan experiences each week. The parents have a section on the lesson plan where staff reach out to them to get ideas to support the study that is taking place that week. Many times the family's culture is represented in the activities and we encourage parents to visit the classroom to implement the activity ideas they shared.

This information is shared with families through many different mediums: parent handbook, parent meetings, family engagement events, newsletters, visits to the classrooms, informal conversations, home visits, and parent teacher conferences. NMCAA staff are culturally sensitive in their interactions with children and families. The staff are trained and coached to understand and respect each family and the uniqueness that each of them bring to the program.

### **Head Start/GSRP Preschool Curriculum Statement**

The most important goals of our preschool curriculum are for children to get along well with others and become enthusiastic learners. We want children to be independent, self-confident, and curious learners. We're teaching them **how** to learn, not just in preschool, but throughout their lives. We do this by creating purposeful and productive play experiences that help children grow in all areas.

The Creative Curriculum focuses on developing the whole child by providing a developmentally appropriate learning environment and experiences. In this setting, children are observed and then assessed three times a year. We use scientifically researched objectives/dimensions in the areas of: social/emotional, physical, language, cognitive, literacy, math, science, social studies and the arts.

### **Curriculum Areas**

The activities we plan and the way we organize the classroom will accomplish the goals of our curriculum and give your child a successful start in school.

**Social/Emotional** - Strong, positive relationships help children develop trust, empathy, compassion and a sense of making positive choices. We support children and foster their resilience and their sense of comfort, safety and confidence with nurturing relationships and being a part of a school family with a structured routine and rules. Social and emotional development is a gradual process of building the capacity to understand, experience and manage emotions. Children learn to form friendships, communicate emotions, manage challenges, and develop independence, self-confidence, and self-regulation skills, which help them for school and life successes. We also promote the resilience of children's parents and/or caregivers.

**Physical** - to increase children's large muscle skills - balancing, running, jumping, throwing and catching - and use the small muscles in their hands to do tasks like buttoning, stringing beads, cutting, drawing and writing.

**Cognitive** - to acquire thinking skills such as the ability to solve problems, to ask questions and to think logically; sorting, classifying, comparing and counting, and to use materials and imagination to show what they have learned.

**Language** - to use words to communicate, to listen and participate in conversations with others, and to increase children's vocabularies.

**Literacy** – to foster an excitement about reading books and what they are hearing and learning, understand the purpose of print, recognize letters and words, to participate during interactive read aloud times, to notice print in the environment and ask questions about the meaning of print, and begin writing for a purpose.

**Math** – to develop an understanding of mathematics by letting children interact with mathematic materials in the interest areas, introducing activities with a mathematics focus, using mathematical vocabulary to describe their actions and thinking, asking questions that get the children to investigate, playing logic games and creating problem-solving stories.

**Science** – to engage children in the process of scientific thinking, gaining understanding and making connections with living things, the physical properties of materials and the earth's environment.

**Social Studies** – to teach children to learn how to be researchers, critical thinkers and active members of a classroom community and understanding how they relate to others.

**Arts** – to give children the opportunities to draw, paint, construct, mold, weave, dramatize, sing, dance and move so that they make new discoveries and integrate what they are learning.

**Head Start/GSRP School Readiness Goals-To see NMCAA's School Readiness Preschool data visit [www.nmcaa.net](http://www.nmcaa.net)**

### **Domain: Perceptual, Motor and Physical Development**

Children demonstrates safe and healthy behaviors with increasing independence with support from adults.

### **Domain: Social Emotional**

Children will increasingly regulate their emotions and behaviors in order to participate cooperatively in group situations.

### **Domain: Language and Communication**

Children will use language to express their needs, ask questions, and engage in short conversations in a variety of settings.

### **Domain: Literacy**

Children will demonstrate phonological awareness by noticing and discriminating smaller units of sound.

### **Domain: Dual Language Learners**

Dual Language Learners will show progress in understanding, listening to, and speaking English.

### **Domain: Mathematics Development – Cognition and General Knowledge**

Children will use play to increase their understanding of symbolic representation as it relates to mathematical concepts such as one to one correspondence and cardinality.

**Domain: Approaches to Learning** Children will demonstrate positive approaches to learning by attending and engaging.

### **School Readiness Begins with Health**

**Physical Health:** Children who access ongoing health care have better attendance and are more engaged in learning. Consistent attendance helps children prepare for school. Routines such as handwashing help children stay healthy and avoid injuries.

**Oral Health:** Children with healthy teeth are better able to eat, speak, and focus on learning. Daily oral health hygiene and ongoing care from oral health professionals help make sure that children have healthy teeth.

**Nutrition:** Good nutrition is essential for children's brain development. Children who have access to nutritious food have energy to learn. Providing healthy snacks and meals helps children's bodies grow, giving them what they need to talk, play, and learn together.

**Physical Activity and Motor Development:** Staying active benefits young children's physical and cognitive development. Activities that get children moving build motor skills that are useful to reading, writing, and math skills.

**Sleep and Rest:** When children get enough sleep, they can pay attention, remember what they learn, and manage their feelings. When programs schedule times for a nap, rest or quiet activities, children can focus on learning.

**Perceptual Development:** When children use their senses to explore, it helps them learn about the world around them. A child's ability to see and hear affects their reading, writing, and speech and language skills. Sensory screening helps identify children who may need vision or hearing support.

**Mental Health:** Beginning at birth, children need positive relationships with the adults who care for them. When children learn to recognize and share their feelings with trusted adults, they feel good about themselves. These relationships help them develop the confidence to learn new skills. Children also learn how to manage their feelings, thoughts, and behavior.

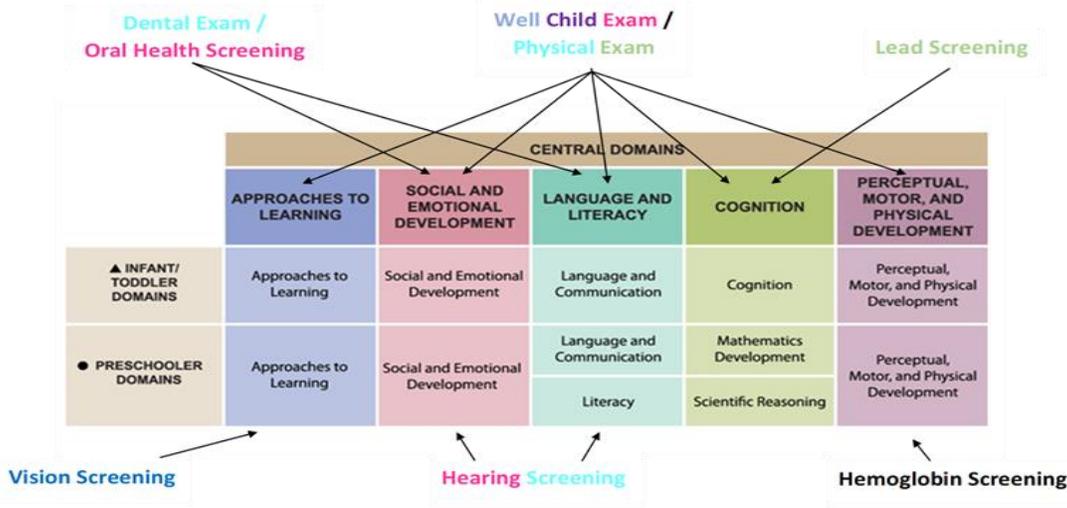
**Nurturing and Responsive Relationships:** Early relationships shape children's learning and development. Children thrive when adults support their strengths and needs. Responsive adults help children feel safe and valued and learn how to get along well with others.

**Self-Regulation:** Children who can manage their feelings can learn and play with peers. They are better able to plan, monitor and control their behavior. They can also adjust to changes in schedules and routines.

**Prosocial Behavior:** Children who get along with adults learn to work together and follow rules. They can also show concern for, and share, take turns and compromise with other children.

**Play:** When children play, they use their imagination and creativity. They also solve problems and learn to interact with others; skills that help them grow in all developmental areas.

## Early Learning Outcome Framework connects to all of your child's Health Screenings.



### NMCAA Child and Family Development Health Plan

Northwest Michigan Community Action Agency is committed to protecting the health of our children, families, staff, and community. The following health plan is designed in response to guidance from the Michigan Department of Licensing and Regulatory Affairs and Health and Human Services, in accordance with best practices from the Centers for Disease Control and Prevention, and with everyone's well-being in mind. NMCAA provides high-quality health, oral health, mental health, and nutrition services that are developmentally, culturally, and linguistically appropriate and that will support each child's growth and school readiness. Our program has established and maintains a Health Services Advisory Committee that includes Head Start parents, professionals, and other volunteers from the community.

NMCAA employees Recruitment and Health Specialist (R&H) to work with families to be up-to-date on their immunizations and determine a child is up-to-date on a schedule for age appropriate preventive and primary care (Early and Periodic Screening, Diagnosis, and Treatment-EPSDT) within the first 30 days of enrollment from their Health Care provider. Additionally, Head Start requires all children to complete a growth assessment, developmental screening, hearing screening and vision screening within the first 45 days of enrollment. Within the first 90 days, children must complete a blood pressure, lead test, anemia test and dental exam. R&H will communicate with families regarding any children needing follow-up care.

Recruitment and Health Specialist communicate with families regarding the importance of up to date medical and oral health requirements and immunizations and how it connects to school readiness. R&H determines if a family has a medical home and dental home, and if they have health insurance coverage. For families that do not have continuous care, they are given a list of professionals in the area. For families that do not have health insurance coverage, R&H will assist families in applying for Medicaid. Head Start funds can be used to help families pay for health requirements once approved.

R&H track all children's health requirements and immunizations electronically using ChildPlus and the Michigan Care Improvement Registry (MCIR). They are in regular communication with classroom staff and families about any updates or needs a family may have.

To limit the potential spread of COVID-19 and other illnesses, NMCAA Child and Family Development Programs have established procedures for handwashing, handling bodily fluids, cleaning, sanitizing, disinfecting, and controlling infection. This includes robust cleaning and disinfecting procedures and minimizing opportunities for person-to-person exposure. Staff will also follow the NMCAA Preschool COVID-19 Preparedness & Response Plan and NMCAA COVID-19 Preparedness and Response Plan. Handwashing and Routine Center Cleaning signs are posted in all classrooms for staff, children, families, and volunteers.

### **Attendance**

#### **When your child will be absent:**

Contact the classroom as soon as you know that your child will be absent. If your child rides the bus, classroom staff will notify the bus personnel. When a child is absent and the family has not contacted the classroom, classroom staff will attempt to make telephone/text contact with the family for the child's safety and well-being.

#### **Build the habit of good attendance:**

All families should strive to maintain a 90% attendance rate. Showing up on time every day is very important to your child's success and learning from preschool forward. Missing 10 percent of preschool (one or two days every few weeks) can make it harder to develop early reading skills and get ready for kindergarten and first grade. Children may develop an attendance pattern that is hard to break.

## **What you can do:**

- Keep an attendance chart at home. At the end of the week recognize your child for attending school every day.
- Set regular bedtime and morning routines.
- Keep your child home from school only when your child is truly sick.
- Complaints of a stomachache or headache can be a sign of anxiety and is not a reason to stay home.
- Talk to your child's doctor if you have any concerns.
- Classroom staff, the Family Engagement Specialist, or other parents can help with advice to support your child's comfort at school and excitement about learning.
- Make plans for transportation to school if something comes up. Ask a family member, a neighbor, or other parent for backup.
- If possible, schedule medical appointments and extended trips when school is not in session.

### **If your child has too many absences--excused or unexcused:**

If your child has too many absences, the Head Start or GSRP staff will work together with you to make an attendance success plan. We want to help remove any barriers to regular attendance, if possible. If there is not any improvement in attendance, the Child Development Program Director will determine if your child has ceased to attend and your child may be placed back on the waitlist.

### **Admission, Withdrawal, Fees and Exclusion Policy**

Children are enrolled based on a priority list developed by the federal government, staff, and parents. Those not enrolled are placed on a wait list based on the highest family needs. Classroom vacancies will be filled within 30 days of their occurrence. Families are asked to notify classroom staff as soon as possible if they are planning to leave the program so another child can accept that placement.

Head Start does not require a fee/tuition for preschool. On occasion, GSRP families who exceed income guidelines may be charged tuition based upon the local ISD GSRP income requirements. Tuition would be based on sliding fee scale from the ISD.

Children will not be excluded from the program. Education staff and administration will work with families to support children's social emotional success in the classroom. Alternate means of serving a child and family may be considered to maintain the health, well-being, or safety of all children and staff in a classroom.

## Quiet Time Routine for Extended Day Programs

Children will be given an opportunity to rest during a designated time every day according to each individual classroom's daily schedule. Quiet time is mandated by licensing regulations, Head Start and GSRP; all require that children have a rest time when in care for more than five hours a day. When quiet time starts, children will be on their cots for 20 minutes. After that time, the non-sleepers will participate in quiet, planned activities. The duration of rest time is 30-60 minutes and allows for the individual needs of the child.

### Toileting Guidance

**Children do not have to be toilet trained to be enrolled in preschool programs.**

We will support and encourage the child's readiness for independent self-help skills. Education staff and the child's primary caregiver will work together to make sure that the toilet routine is consistent both at the center and the child's home.

### Typical Daily Schedule

Routines are very important for preschool children.

The classroom establishes a daily schedule that allows for:

Arrival/Greeting/Breakfast – Children enter the classroom at their own pace. Parents are encouraged to stay until their child is comfortable. Once all children have arrived, adults share the daily announcements.

Group Time/Music and Movement – All adults and children participate in activities planned around children's interests, developmental levels, music and movement, and cooperative play.

Planning Time – Children share their plans for the day with adults. Adults use a range of strategies to support children's planning.

Free Choice/Work Time – Children explore the classroom and initiate activities during this time. Adults interact with children and engage in activities to help children develop school readiness skills and problem solving skills.

Recall Time – Adults provide a variety of props for children to use that help encourage them to reflect on the areas in which they chose to play during free choice.

Small Group Time – An adult-initiated learning experience based on children's interests and development. Children explore and use the same set of materials in their own individual ways.

Outside Time – Children have many choices about how they play in the outdoor learning environment. Adults supervise children for safety, and also join in their active outdoor play and problem solving.

Bathroom/Wash Hands/Prepare for Meals – Children assist in preparation and set up. Adults engage with children in meaningful ways during meal times.

Lunch (2 meals if attending more than 5 hours) - Family-style meals support children doing things for themselves (e.g., serve themselves, pour beverages, wipe up spills). Adults eat and have meaningful conversations with the children.

Tooth Brushing – Adults assist children to brush their teeth once a day.

Quiet Time/Rest Time (if attending more than 5 hours) – Quiet Time plans should be individualized to meet the needs of each child.

Wake/Bathroom/Snack – As children awake from rest time, adults and children work together to put away cots/mats and set up for snack.

Outside/Dismissal – Children will be dismissed. Adults will assist children during this transition.

Occasionally the center may have the opportunity to offer educationally sound field trips. **Parents will be notified and complete a permission slip before each field trip event.**

### **Screenings, Observations and Developmental Assessments**

The program individualizes instruction to support each child's strengths, needs, and overall development.

Teachers learn about children through screenings, observations, assessments, parent-teacher conferences, individual time with each child, and home visits. The knowledge gained from these experiences is shared with you and also used for individualizing instruction for children.

Head Start/GSRP uses the ESI-R Early Screening Inventory and Ages and Stages Questionnaire (ASQ) for a developmental screening tool. Each child is screened once a year to monitor their development. If concerns are noted, further resources and support can be provided by special education professionals. A referral for this special education service is discussed with parents and a parent signature is required on a consent form for the referral.

Children are assessed three or four times a year using the Teaching Strategies GOLD. This assessment is used to measure child growth and learning. To support social and emotional needs, we may use the Devereux Early Childhood Assessment (E-DECA) or the (E-DECA Clinical), and Diana Henry's Sensory Processing Measure (SPM-p).

**Please contact your child's teacher if you have any questions regarding any of the above screenings and assessments.**

### **Special Needs**

At least 10% of the children enrolled in Head Start have been diagnosed with a disability. Through the screenings, assessments, and observations, children are sometimes found to need further evaluation with a specialist trained in the area of concern, such as oral language/speech or motor/movement skills. If your child needs an evaluation, you will be informed immediately, and you will be asked to give written permission for further evaluation. We will work together to ensure that your child's needs are met and that you are aware of your rights every step of the way.

### **Michigan Alliance for Families - Call 1-800-552-4821**

Michigan Alliance for Families provides information, support, and education to families of children and young adults with disabilities from birth to age 26. Michigan Alliance connects families to resources in their own community. The groups also help facilitate parent involvement as a means of improving services Individuals with Disabilities Education Act (IDEA). Michigan Alliance can assist you in knowing your rights, effectively communicating your child's needs, and advising how to help your child develop and learn.

## NMCAA Early Childhood Guidance Policy

### **Staff, Collaborative Center Staff, Parents and Volunteers will adhere to the following:**

- Encourage positive self-esteem, cooperation, self-control and self-direction.
- Model positive behaviors- be composed, empathetic, helpful, and respectful to all.
- Support social and emotional growth through observation by noticing and acknowledging specific behaviors/actions.
- Redirection is a primary tool for supporting infant and toddler behavior and will be used with all children, ages 0-5, when appropriate.
- Develop positive relationships and teach/model classroom and home visit expectations.
- Protect children/parents/staff/volunteers from harm.
- Practice and model personal space/boundaries and respect for ourselves and others.
- Supervise all children at all times and support parents in supervising their children at all times.

### **Staff, Collaborative Center Staff, Parents and Volunteers will refrain from the following:**

- Carrying, dragging, hitting, shaking, biting, pinching, spanking, or inflicting physical violence.
  - Exception: Infants and non-mobile children may be carried for comfort, safety, and mobility.
- Placing any substances in a child's mouth, including but not limited to, soap, hot sauce, or vinegar.
- Restricting a child's movement by binding, tying, or confining in an enclosed area (closet, locked room, box, cubicle, etc.).
- Mentally/emotionally punishing such as: sarcastic remarks, humiliating, shaming, threatening, degrading, ridiculing, or time-outs.
- Depriving children of: meals/snacks/water, rest, toilet use, outdoor play, daily learning or gross motor activities.
- Using toilet learning/training methods that punish, demean, or humiliate a child.
- Isolated one-on-one interactions, favoritism or gift giving to individual children.
- Establishing a relationship with children outside of program activities or exchanging personal email, phone numbers or private interactions through social media or computer devices.
- Photographing children for purposes other than for program activities or for their family.

**Specific Exceptions-Non-severe and developmentally appropriate discipline or restraint may be used when reasonably necessary, based on a child's development, to prevent a child from harming him/herself or to prevent a child from harming other persons or property.**

### Good Things to Remember...

1. It is important to speak in a calm, kind voice.
2. Get down to the child's physical level, if possible. Stoop or sit on a low chair so that s/he can see your face.
3. Go to the child; avoid calling them from across the room.
4. Speak in short, meaningful sentences that the child can understand.
5. Try to express your request in a positive way. This will help the child learn a better, more acceptable way of doing things.
6. Answer the child's questions but try not to monopolize the conversation; s/he needs to associate with peers.
7. Keep your voice, tone, and facial expressions kind.

It's "HOW" You Say It That Counts	
Say what you want the child to do	Avoid saying it this way
Sit down when you slide	Don't stand up when you slide
Dig in the sand	Don't throw the sand
Sit in the swing	Don't stand on the swing
Use both hands when you climb	Watch it or you'll fall
Put the stick down	Don't play with the stick, you'll hurt someone
Keep the puzzle on the table	Don't dump the puzzle pieces on the floor
Talk in a quiet voice	Don't shout
Wipe your hands on the paper towel	Don't touch anything
Move back on your rug so everyone can see	You're in the way, the other children can't see
Walk around the swing	Watch it, the swing will hit you
Put a paint shirt on	Don't you want an apron on?
Walk in the classroom	Don't run

## **NMCAA Early Childhood Parenting Curriculum: Your Journey Together**

“YJT” is designed to provide families with knowledge and skills that promote resilience, which supports families in better coping with life's challenges. The YJT shows parents how to use everyday routines, activities, and interactions as resilience-building opportunities, while also promoting the social and emotional well-being for children and families, infancy-preschool, including some resources through age 18. Concepts and parent handouts can be used for: home visits, parent-teacher conferences and individual family needs and parent discussions. YJT is a trauma-sensitive program, with the key elements of focusing on empowering parents and promoting a safe, trusting and healing environment

### **ReadyRosie**

ReadyRosie is an early education tool that helps families, schools, and communities across the nation deepen and scale their family engagement efforts. Parents will receive an email/text to sign up for ReadyRosie and will then begin receiving weekly emails/and or text messages with videos and activities. The free subscription also allows parents to download the ReadyRosie mobile app for their iPhone or Android device. Parents will have access to the entire ReadyRosie video library. ReadyRosie tools leverage the power of video modeling, family workshops, professional development opportunities, and mobile technology to build powerful partnerships between families and educators, resulting in preparing children to be lifelong learners.

### **Conscious Discipline® in Head Start and GSRP**

Conscious Discipline® is an emotional and behavior management program that teaches us to be aware of our own emotions. Our e-deca system gives Conscious Discipline Strategies within each child assessment. These can be used individually but can also be adapted for implementing Conscious Discipline within the classroom and home. Conscious Discipline helps us learn to think and cope with emotions and manage responses rather than react to life events.

Conscious Discipline® is based on safety and building strong relationships; it helps decrease power struggles and builds life skills in relating to others. These concepts are from the Conscious Discipline® program and Loving Guidance

[www.consciousdiscipline.com](http://www.consciousdiscipline.com)

Research shows that schools/families using Conscious Discipline® have:

- Increased academic achievement and positive teaching time at home/school; increased social skills, character development and positive home/school relationships
- Decreased impulsivity, hyperactivity and aggression

## 7 Skills of Conscious Discipline®:

1. Composure ~ be the person you would like your children to become
2. Encouragement ~ build strong relationships
3. Assertiveness ~ set limits respectfully
4. Choices ~ build self-esteem and willpower
5. Positive Intent ~ create teachable moments
6. Empathy ~ handle fussing, fits and upset moments
7. Consequences ~ help children learn from their mistakes

### Relaxation Techniques to Increase Calming and Coping

The S.T.A.R. - **S**top/Smile; **T**ake a deep breath **A**nd **R**elax.  
Release your breath slowly.

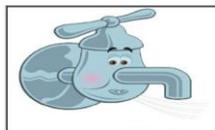


The Pretzel Exercise (Brain Gym) - Stand; cross your ankles and hold your arms in front with your palms facing each other. Cross your arms and place hands together (like a clap). Fold them under your chin with your tongue pressed against top of the inside of your mouth; this integrates the brain.

**Modification:** Hug yourself - cross legs standing or do criss-cross apple sauce (sitting). Breathe in and slowly release your breath.



The Drain - Hold your arms out in front - make your hands into fists. Tighten muscles in your arms - squinch your shoulders up to ears. Tightly squeeze muscles in your face. Take a deep breath and then breathe out slowly - relax, opening fists to let all of your stress drain out hands. Let mad feelings drain out of your body like flowing water.



The Balloon - Put hands on head and lock fingers together. Breathe deeply - raise hands over head as you let breath fill up a pretend big balloon. Breathe in deeply and then let the air out as you drop hands down to head.



## **Active Supervision**

Keeping children safe is a top priority for our Head Start and GSRP programs. Education staff ensure that children are supervised at all times.

Active Supervision is an effective strategy for creating a safe environment and preventing injuries in young children. It transforms supervision from a passive approach to an active skill. Staff use this strategy to make sure that children of all ages explore their environments safely.

All staff are responsible for making sure that no child is left unsupervised. Active supervision is a strategy that works. It can be used in classrooms, playgrounds, during transitions, and on buses. It can also be practiced by families as a tool to use at home. Please ask your child's Teacher or Family Engagement Specialist for more resources.

### Six Strategies

- Set up the environment
- Position staff
- Scan and count
- Anticipate children's behavior
- Engage and redirect
- Listen

## **Injury Prevention Starts at Home**

You can protect yourself and your family by taking action to prevent injuries at home!

### **You Can Prevent Burns at Home**

- Keep matches and lighters out of reach of children.
- Install and maintain a smoke alarm. Remember to change the batteries!
- Cover electrical outlets.
- Turn pan handles on the stove inward and use back burners when cooking.
- Set the hot water heater to 120 degrees Fahrenheit (F) or less. Ask a friend or your landlord if you need help.
- Test bath water temperature before putting your child in it.

### **You Can Prevent Falls at Home**

- Watch your child CONSTANTLY when they are in the bathroom.
- Install window guards on upper windows.
- Use stair gates at the top and bottom of stairs.
- Always use the safety latch in your child's chair or strollers.

### **You Can Prevent Poisonings at Home**

- Keep all medicines and cleaning supplies in containers with safety caps and store them in a locked cabinet.
- Buy and install a Carbon Monoxide (CO) detector in your home to save your child from CO poisoning.
- Act fast if you think your child has been poisoned! Call the Poison Control Centers 1-800-222-1222.

### **You Can Prevent Choking at Home**

- Don't let children put small things in their mouths.
- Toys, household items, and food can all be choking hazards.
- Teach your child to chew his or her food fully before swallowing.
- Choose the foods you feed your child carefully—popcorn, hard candy, nuts, hot dogs, grapes—and avoid fish with bones.

### **You Can Prevent Drowning at Home**

- Never leave your child unattended in a bathtub, bathroom, pool or even near a bucket.
- Install lid locks on all toilets and keep the lid closed.
- Never leave a child alone around water.
- Empty buckets after each use.

### **You Can Prevent Suffocation at Home**

- Keep plastic shopping bags and trash bags away from your child.
- Keep toy chests, car trunks, and washer/dryer doors closed when not in use.
- Don't put pillows, blankets, bumpers, or toys in crib—these things can sometimes keep a baby from breathing.
- Place babies to sleep on their backs.

## **Safe Ways to Dress Your Child for School**

We have a few suggestions about dressing your child for school:

- It is great when children wear comfortable play clothing that can get dirty....we do lots of messy things in preschool.
- For playing outside in the winter, it is important to have your child come to school with a snowsuit, mittens, hat and boots each day. **Put your child's name on these items.** Outside activities are a required part of our program and a vital part of your child's whole development.
- Shoes that tie, Velcro, or stay securely on your child's feet (like athletic shoes) will help prevent accidents. Sandals and flip-flops can be dangerous.
- Clothes that are easy for your child to fasten and unfasten can help them be more successful using the bathroom independently.

Classroom staff can provide resources for those who may need children's clothing.

## **Bringing Items From Home**

There are many reasons that children may want to bring things to school like their favorite toy, stuffed animal, or security blanket.

Except for rare occasions, we encourage children to leave these things at home. While we try to keep track, items from home can be damaged, lost or end up in someone else's backpack. Please keep things at home that are not necessary at school.

Check your child's backpack and pockets every day before they come to school. There is a chance that something dangerous could find its way into a backpack. Preschoolers have little understanding of dangerous items such as guns or knives. **PLEASE** help us keep all children safe and secure.

## **Pedestrian Safety**

Head Start/GSRP provide training for parents and children in pedestrian safety at center orientations and/or home visits. This training is also reinforced throughout the program year.

### **Children Receive Safety Education Training which includes:**

- Safe riding practices.
- Safety procedures for boarding and leaving the vehicle.
- Recognition of the danger zones around the vehicle.
- Emergency evacuation procedures, including participating in an emergency evacuation drill conducted on the vehicle the child will be riding.

### **Safety Education Training for Parents includes:**

- The need to escort their children to and from the bus or their own vehicle.
- Helping parents to reinforce bus safety procedures with their children.
- Encouraging parents to practice vehicle safety in their everyday routines.

### **Parking Lot Guidance includes:**

- Do not allow your child to get out of the car until you are at the child's door.
- Never leave children unattended when going to and from your car to the child care.
- Turn your car off, remove all children from the vehicle, lock it, and take the keys with you.

## Program Safety

Safety is an important part of our program. Our goal is for you and your child to feel safe at our centers and events. It is also important that our staff feel safe at our centers, events, and when they are in your home.

At centers, events, and during home visits, staff and parents will communicate in a calm, positive manner that allows everyone to feel comfortable.

Our policy also requires that our staff let someone know where they are at all times. Because of this, staff may need to make a phone call when they arrive at your home for a home visit.

Regarding home visits, we ask that:

- Animals/pets are under control or contained
- The home visitor is aware of others in the home
- The home visitor is aware of any one in the home that is contagious or has a communicable disease
- Language and actions are non-threatening
- Firearms are stored safely

## Safety Drills

Programs will conduct ongoing safety drills as required by Head Start/GSRP, the State of Michigan Licensing Rules for Child Care Centers and the local school district.

## Weather Policy

Severe weather closings are determined by the local public school district.

- If the public school is cancelled for the entire day, the local Head Start/GSRP will also be closed.
- If the public school is delayed in the morning, then half-day sessions will be cancelled. **Extended Day programs** with a morning delay will follow the public school schedule.
- If the public school closes early, the local Head Start/GSRP will also close.
- If the program provides transportation, parents can contact the center prior to the bus run to let staff know the conditions of their rural roads. There may be times when the center is open but the buses do not travel their whole route.
- **If weather is questionable, parents have the right to keep their child at home.**

## **Classroom Emergency Closures**

If the center closes for an emergency, the teacher will contact parents/guardians by phone, text, or email. Emergency closures may be due to illness, severe weather, or loss of utilities. During these unprecedented times it is vital that your child's emergency contacts are current. Please contact your child's teacher to make any changes.

## **Periods During Which the Center is Closed**

The dates and periods when the center is closed vary considerably from site to site. Please check with your child's education staff to find out how the program year calendar, holidays, and breaks coincide with the public-school calendar.

## **Request for Identification**

Individuals who arrive to pick up your child but are not known to center staff will be asked for identification. Their name will be matched with the Child Information Record **before any child is released**. A copy will be made of the identification.

## **Releasing Children to Authorized and Unauthorized/Unknown Adults**

Children will only be released to persons authorized by the parent. Children will be released to either parent unless a court order prohibits release to a particular parent. Children may only be released to adults authorized by parents or legal guardians whose identity has been verified by photo identification. Names, addresses, and telephone numbers of persons authorized to pick up child should be obtained during the enrollment process and regularly reviewed, along with clarification/documentation of any custody issues/court orders. The legal guardian(s) of the child should be established and documented at this time.

## **Child Custody Issues**

It is our intent to meet the needs of children, especially when families may be experiencing difficult situations such as divorce, separation, or remarriage. Sharing information about such situations can help classroom staff and Family Engagement Specialists support your child through potentially difficult and challenging experiences. Staff hold this information in strict confidence. Our centers cannot legally restrict the non-custodial parent from visiting the child, reviewing the child's records, or picking up the child. A child shall be released to either parent or the child's guardian, unless a court order prohibits release to a particular parent. A copy of the order prohibiting release must be kept on file at the center. In case of conflicts, the proper authorities will be contacted to ensure safety of all staff and children.

## In Kind

The funding we receive for our program is SO very important, and we need your help. When you become a part of our program, one of the words you begin to hear is "In Kind." What is it? Head Start programs are partially funded by the federal government. We must raise 25% of our funds through community support - and that is known as In Kind.

Ways you can help our program collect In Kind:

- Volunteer in the classroom
- Do at home activities with the monthly In Kind calendars
- Spend time with your child working on the school readiness goals that are set by you and the teacher
- Participate in field trips, parent meetings, and family engagement activities
- Make/prepare materials for the classroom
- Donate goods or services to be used for program use
- Please ask your child's teacher for additional ideas

Your involvement in your child's education is key to their future success. You and your child benefit from time you spend participating in the types of activities listed above; that time and effort also benefits the overall program since it is considered In Kind.

**Your In Kind contributions keep Head Start going! We thank you!**

### **Parent Notification Plan: Illness/Incident/Accident Reporting**

Staff will notify parent(s)/guardian(s) by phone, text, or a predetermined communication app as soon as possible when a child experiences any of the following:

- Changes in a child's health.
- A child experiences an accident, injury, or incident.
- A child is too ill to remain in the group.
- Staff will also complete and send home an Illness/Incident Report. If emergency action is taken, staff will make a verbal report to Licensing within 24 hours of the occurrence and submit a written BCAL-4605 Incident Report within 72 hours of the verbal report to the Michigan Department of Licensing and Regulator Affair

### Emergency Procedures Posting

**Policy:** Provide care for children and staff during an emergency following Head Start Program Performance Standards, Child Care Center Licensing Rules, Great Start Readiness Program Requirements and Great Start to Quality Guidance.

**Procedure:** Staff will be trained on emergency procedures upon hire. Refer to the Drill and Safety Check Log for additional documentation as needed. Also, refer to the Safety and Emergency Preparedness Plan for additional emergency and crisis management guidance.

#### **FIRE-EVACUATION**

- \_\_\_\_\_ declare emergency. Alert staff about emergency and begin evacuation procedure. Call 9-1-1
- \_\_\_\_\_ retrieve Child Information Records, Emergency Care Plans, Safety & Emergency Preparedness Kits, Grab and Go Binder, daily attendance record and emergency telephone.
- \_\_\_\_\_ gather students at the nearest emergency exit and complete a head count.
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as Individualized Education Program (IEP's), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- Staff will refer to the posted evacuation route and safely move children to the evacuation meeting site. If blocked, use secondary evacuation route.
- **The evacuation meeting site is \_\_\_\_\_.** **The secondary evacuation meeting site is \_\_\_\_\_.**
- Upon exiting, staff will survey the scene, proceed if safe and repeat head count. If a child or adult is unaccounted for, alert first responders.
- Staff will notify families by phone, email, or text as soon as possible to inform them of the emergency and reunite with their child.
- **Reunification Site is: \_\_\_\_\_.**
- Wait for all clear before returning to the building.

#### **TORNADO-SHELTER IN PLACE**

- \_\_\_\_\_ declare emergency. Alert staff about emergency and begin shelter in place. Call 9-1-1.
- \_\_\_\_\_ retrieve Child Information Records, Emergency Care Plans, Safety & Emergency Preparedness Kits, Grab and Go Binder, daily attendance record, and emergency telephone.
- \_\_\_\_\_ gather students at the nearest emergency exit and complete a head count.
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as Individualized Education Program (IEP's), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- Staff will refer to the posted evacuation route and safely move children to the designated meeting site. If blocked, use the secondary route.
- **The designated shelter in place site is \_\_\_\_\_.**
- **The secondary designated shelter in place site is \_\_\_\_\_.**
- Upon guiding children to shelter in place, staff will survey the scene, proceed if safe and repeat head count. If a child or adult is unaccounted for, alert first responders.
- Staff will notify families by phone, email, or text as soon as possible to inform them of the emergency and reunite with their child.
- **Reunification Site is: \_\_\_\_\_.**
- Wait for all clear before leaving shelter and resuming daily activities or begin evacuation procedures if the building is no longer structurally safe.

**LOCKDOWNS AND OTHER CRISIS MANAGEMENT PROCEDURES are included in the SAFETY AND EMERGENCY PREPAREDNESS PLAN located in the GRAB and GO BINDER**

#### **OTHER NATURAL OR HUMAN CAUSED EVENTS (I.E.: GAS LEAK, CHEMICAL SPILL, SEWER BACK-UP, FLOOD, POWER OUTAGE)**

- \_\_\_\_\_ declare emergency and decide the best emergency response: **evacuate or shelter in place.**
- \_\_\_\_\_ retrieve Child Information Records, Emergency Care Plans, Safety & Emergency Preparedness Kits, Grab and Go Binder, daily attendance record, and emergency telephone.
- \_\_\_\_\_ gather students at the nearest emergency exit or shelter in place and complete a head count.
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as Individualized Education Program (IEP's), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- Staff will refer to the posted evacuation route and safely move children to the evacuation meeting site. If blocked, use secondary evacuation route.
- **The evacuation meeting site is \_\_\_\_\_.** **The secondary evacuation meeting site is \_\_\_\_\_.**
- **The designated shelter in place site is \_\_\_\_\_.** **The secondary designated shelter in place site is \_\_\_\_\_.**
- Upon exiting or guiding children to shelter in place, staff will survey the scene, proceed if safe and repeat head count. If a child or adult is unaccounted for, alert first responders.
- Staff will notify families by phone, email, or text as soon as possible to inform them of the emergency and reunite with their child.
- **Reunification Site is: \_\_\_\_\_.**
- Wait for all clear before re-entering the building, leaving the shelter in place location, and/or resuming daily activities; begin evacuation procedures if the building is no longer structurally safe.

## **SERIOUS ACCIDENT/INJURY PLAN**

- Ensure that all staff and volunteers are aware of the location of the First Aid Kits (one kit for the classroom and one for outside), Safety and Emergency Preparedness Kit, the Child Information Records (located in the Grab and Go Binder and on the bus if applicable) and the emergency phone numbers.
- \_\_\_\_\_ stay with the injured child and administer the appropriate first aid.
- \_\_\_\_\_ locate in the Grab and Go Binder both the emergency phone numbers and the Child Information Records to contact a parent or other emergency contacts listed on the card.
- \_\_\_\_\_ care for the other children present during this time by removing them from the immediate area if possible.
- Staff members will accommodate for children with chronic medical conditions and/or special needs during an emergency by following individual emergency plans such as Individualized Education Program (IEP's), Emergency Care Plans, and Action Plans. Ensure all required medications are available.
- According to the parent's wishes and/or nature of the emergency, staff will make arrangements for the child to be picked up or for an ambulance to transport the child to the hospital.
- Meetings sites and reunification sites will be determined by circumstance and/or emergency personnel.

## **INCIDENT, ACCIDENT, INJURY, ILLNESS, DEATH, FIRE REPORTING TO LICENSING AND REGULATORY AFFAIRS**

- The center shall make a verbal report within 24 hours to Licensing for the occurrence of any of the following: a child is lost or left unsupervised, an incident involving an allegation of inappropriate contact, the death of a child in care, the center is evacuated for any reason, a fire on the premises of the center that requires the use of the fire suppression equipment or results in loss of life or property.
- In the event of death of a child in care, immediately report it, in person or via phone, directly to the child's parent. Other incidents, accidents, injuries or illnesses will be reported to the child's parent in a timely manner.
- A center shall make a verbal report to the department within 24 hours of notification by a parent that a child received medical treatment or was hospitalized for an injury, accident or medical condition that occurred while the child was in care.
- Incident Report BCAL-4605 Licensing Regulation. A center shall submit a written Incident Report within 72 hours of the verbal report to the department. A copy of the report shall be kept on file at the center. Additionally, staff will provide a copy to their Supervisor and

**NMCAA Lockdown/Active Shooter Notification**

Policy: Notify parents that a lockdown will be practiced, has been practiced, or was conducted in their child's classroom. Refer to the Safety and Emergency Preparedness Plan for more details.

Procedure: If parents will not have access to the building during a drill, parents will be notified of the plan in advance when possible. The safety of children and staff are a priority. In the event of an actual lockdown, communication with families will take place as soon as possible, but is secondary to the safety of those in the situation. Notify LARA of an actual lockdown. Follow the Drill and Safety Check Log documentation requirements. **Complete this form and send home to families when the following take place.**

Date: \_\_\_\_\_

- We will practice a** lockdown/active shooter drill.
- We did practice a** lockdown/active shooter drill.
- We had an actual** lockdown/active shooter situation.

We are required by the *Department of Licensing and Regulatory Affairs* to have a crisis management plan, which is located in our Safety and Emergency Preparedness Plan, including planning for a lockdown/active shooter. A lockdown is a procedure used by staff to make every effort to keep your child safe during an emergency situation. A lockdown may be put into place for emergencies, such as an intruder, bomb threat, or other situation that may arise. Due to the confidential nature of some lockdowns, limited information may be available. Please contact the classroom at \_\_\_\_\_ if you have any further questions.

Teacher Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

## What to do When Your Child is Sick

If a child, staff member, or volunteer has a temperature above 100.4 degrees and/or symptoms (fever or chills, shortness of breath or difficulty breathing (without recent physical activity), continuous cough, fatigue, extreme fussiness, flushed cheeks, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, rash, nausea or vomiting, and/or diarrhea) they will be sent home immediately with the recommendation to contact their primary care physician/medical provider. If anyone shows emergency warning signs (for example, trouble breathing, persistent pain/pressure in the chest, new confusion, inability to wake or stay awake, or bluish lips or face), we will seek medical care immediately.

### **If a child develops sick symptoms during care hours:**

- Parents will be contacted for prompt pick-up.
- The child will be isolated from other children and as many staff as possible (the child will not be left alone).
- The child will wait with a designated staff person
- The child and designated staff will wait outside or in a safe, isolated location
- Child Information Records must be up-to-date with working emergency contact phone numbers.

### **Children Returning to the Program After Being Sick**

- If your child has a fever or a continuous cough, they must be fever free for 24 hours after symptoms resolve without the use of medicine that reduces fevers.
- If your child was vomiting or had diarrhea, they must be symptom free for 24 hours before returning to school.
- If your child has a communicable disease, we will use the primary care providers recommendations for returning back to school.
- If your child has been exposed to a contagious disease, classroom staff should be notified so that the incubation period can be discussed and it can be determined what dates, if any, your child should stay at home.

**Head Start/GSRP classrooms are required by Michigan Law to report confirmed or suspected cases of communicable diseases to the local Health Department.**

**“Local reporting plays a key role in state and community efforts to control communicable disease.”**

Head Start/GSRP classrooms are required to notify families when a child in care has contracted a diagnosed communicable disease. The center is not allowed to release the name of the ill child to any other parent. In situations where the ill child has a diagnosed communicable disease that is more serious than the common nuisance diseases (head lice, ringworm, scabies, impetigo, pinkeye, etc.), Michigan Law requires that the program notify the local health department. The local health department will help determine what information can be released to families and inform the center of any exclusion and re-admission time lines.

*Adapted from: Caring for Our Children, American Academy of Pediatrics and American Public Health Association, 1992.*

### **NMCAA Communicable Disease Policy**

Northwest Michigan Community Action Agency, Inc. recognizes that employees with communicable diseases, including HIV may wish to continue to engage in as many of their normal pursuits as their condition allows, including work.

- If an employee has been exposed to a contagious disease, management should be notified. Management will consult with the local Health Department to determine if a notification plan and/or needed facility sanitation requirements are needed. The local Health Department will help determine if a communication plan is necessary, and which information can be released to clients, employees, and volunteers, and inform the agency of any required exclusions and re-admission time lines.
- As long as these employees are able to perform the essential functions of their positions with or without reasonable accommodation and medical evidence indicates their conditions are not a direct threat to themselves or others, they will be permitted to continue working and be treated consistently with other employees. At the same time, Northwest Michigan Community Action Agency seeks to provide a safe work environment for all employees and clients. Therefore, precautions should be taken to ensure that an employee's condition does not present a health and/or safety risk to other persons.

## What NMCAA Child and Family Development Programs are Doing to Keep your Family Safe



NMCAA is committed to protecting the health and safety of our children, families, and community. We appreciate your cooperation in implementing the protocol described below.

	<p>Upon arrival, your child's temperature will be taken. Families will be asked if their child is in quarantine or has other signs of illness described in the sick policy. You will also be asked if your child has felt unwell in the last 24 hours (a fever of 100.4 degrees or above or signs of fever, sore throat, new uncontrolled cough (for children with asthma, a change from their baseline breathing), diarrhea, vomiting, stomach ache, new onset of severe headache, especially with fever. Contact your child's primary care physician/medical provider and/or local health department for further guidance if the has been a close contact or feels unwell.</p>
	<p>Staff will sign children/families in and out while entering and exiting the building. Physical distancing will be encouraged. All adults are required to wear masks while in the building. Non-essential visitors, volunteers, and guests will be limited in classroom activities at this time. Essential visitors will be required to clear a health screening which includes a temperature and symptom check.</p>
	<p>All adults, regardless of vaccination status are required to wear a mask. We support and encourage all children who wish to wear a mask to do so when indoors. Children are not required to wear masks during nap time, mealtime, and when playing outside. Staff and children are required to wear a mask on the bus. Programs will have masks available. NMCAA will follow additional local school district policies.</p>
	<p>Each classroom and bus (if applicable) will have hand sanitizer available. Hand sanitizer does not replace hand washing, and the program will follow its hand washing procedure. Children will cover all surface of their hands with hand sanitizer, rubbing them together until they feel dry. Children should not bring hand sanitizer from home.</p>
	<p>We will be providing family-style meals where children serve themselves and engage in conversations with their peers. Children will be spaced as far apart as possible. Children will wash their hands prior to and immediately after eating.</p>
	<p>NMCAA promotes effective oral health hygiene by providing the opportunity for children to brush teeth once a day. Staff helping children with brushing will wear a mask and gloves for additional protection. The toothbrushing area will be cleaned and sanitized.</p>
	<p>All children will have a nap/rest time in our full day classrooms. To reduce potential for viral spread, only bedding will be used that can be washed. When possible, children will be placed head-to-toe and physically distanced. Children will use the same cot and bedding each day. Bedding will be washed weekly or as needed. Blankets from home are not permitted.</p>
	<p>Cleaning/disinfecting of high-touched surfaces will occur daily (sinks, toilets, light switches, doorknobs, counter and table tops, chairs). Outdoor spaces will be cleaned according to the normal routine. Staff will use CDC-recommended disinfectants such as EPA-registered household disinfectants, diluted bleach solutions and alcohol solutions with at least 60% alcohol. Staff will follow the Routine Cleaning Guidance posted in the classroom.</p>
	<p>A family health screening will be completed prior to the home visit. Masks should be worn by all adults. It is requested that the number of individuals taking part in home visits be limited.</p>
	<p>If a child, staff member, family member or visitor to our program shows COVID-19 symptoms or test positive for the virus, we will contact our local health department and licensing consultant. We will also communicate with the families as directed, regarding close contact quarantines and program closures, while respecting the privacy of the individual and not share health information of a specific person.</p>

**This information is subject to change as the situation evolves or as local, state, and federal orders related to COVID-19 are issued or amended. Staff will follow the NMCAA COVID-19 response and preparedness plan. 9/7/21**

## NMCAA Health Hygiene Information

NMCAA preschool programs have established procedures for handwashing, handling bodily fluids, cleaning, sanitizing, and disinfecting guidance, controlling infection, including universal precautions.

All staff, families, and volunteers at NMCAA centers must follow the posted health care information which include Handwashing, Routine Center Cleaning and Diaper Changing Procedure and Maintenance of Changing Tables/Surfaces

Additionally, as a required Orientation activity, each family enrolled in a NMCAA preschool program will receive a Community Resource Directory listing local health-related resources.

### Head Lice Policy

If live lice are found in your child's hair, we will contact you to pick your child up from school as soon as possible.

We ask that you keep your child at home until s/he is **free of live lice**.

If the Head Start/GSRP Center is in a public school we will abide by their policy which may require that children be **free of live lice and nits** before they can return to the center.

### Helpful steps in getting rid of Head Lice:

#### Step 1 Kill the Lice

- Buy a product that will kill the lice. We can also provide one.
- Apply the treatment according to directions.
- **WARNING!** Some products cannot be used on an infant, pregnant woman, nursing mother, individuals with cancer, individuals with asthma or other breathing difficulties and individuals who are allergic or sensitive to ragweed or chrysanthemums. Please read the label of the lice product to see restrictions and age requirements. Check with your doctor if you are unsure.

#### Step 2 Remove the Nits (Removing nits is the key to beating the problem.)

- Before applying treatment, it may be helpful to remove clothing that can become wet or stained during treatment.
- Apply lice medicine according to the instructions contained in the box or printed on the label. Pay special attention to instructions on the label or in the box regarding how long the medication should be left on the hair and how it should be washed out.
- **WARNING:** Do not use a combination shampoo/conditioner before using lice medicine. Do not re-wash the hair for 1-2 days after the lice medicine is removed.
- This is the most important step! If possible, have someone help keep your child occupied/relaxed by watching a video or "read" while you comb his or her hair. Comb the hair first with a regular comb to remove tangles, then with the fine toothed nit removal comb that comes with the treatment product.

- Do one section of hair at a time and pin back each section as it is completed.
- Wipe nit comb repeatedly with wet paper towel and discard the towels in a sealed plastic bag.
- Your lice killing product may recommend that you can apply lice egg remover or olive oil and lightly massage.
- If you use a lice egg remover or olive oil, wait at least three minutes before combing through again.
- Have the infested person put on clean clothing after treatment.
- It may require several hours each night for several nights to successfully remove all nits and lice.
- Combing with the nit comb may be repeated daily until no lice/nits are seen. Continue monitoring for two to three weeks.

### **Step 3 Cleaning the Environment**

- Machine wash all bed linens, clothes, towels, etc.
- Use HOT, SOAPY water and dry at least 20 minutes on HOT cycle in dryer.
- Store all other exposed items (bike helmets, stuffed toys, etc.) in plastic bags for two weeks.
- Vacuum your house AND car (especially where your child's head has been).
- Discard vacuum bag.
- Disinfect combs, brushes, barrettes, etc. by soaking them in hot, soapy water (130°F) for 15 minutes. It is NOT necessary or suggested that you spray your home with chemicals if you carefully follow the above step.

### **Step 4 Returning to School**

- When treatment is complete, please plan to self-transport your child rather than sending him/her on the bus.
- Staff and parent together can then carefully recheck your child's hair to make sure that your child no longer has live lice (or live lice and nits if our center is in a public school and needs to abide by their policy).
- If you have a problem with this self-transport request, please contact your classroom teacher for help.
- We look forward to welcoming your child back into the daily routine of the classroom!

Please let us know if there is any other way we can help.  
 We can provide items such as: lice shampoo, egg loosener,  
 lice combs, laundromat vouchers, plastic garbage bags,  
 cleaning products and possible cleaning assistance.

Lice Advice Helpline 1-800-783-1919

Questions or Information

Head Lice website (CDC): <http://www.cdc.gov/parasites/lice>  
 Head Lice Manual (MDHHS): [http://www.michigan.gov/documents/Final Michigan Head Lice Manual 1068](http://www.michigan.gov/documents/Final_Michigan_Head_Lice_Manual_1068)

**Medication Authorization Form**

**Policy:** Staff will follow the proper handling, storage, administration, and record keeping of administration of medication.

**Procedure:** Medication will be given to a child by staff only. When giving or applying medication to a child in care, the following must be completed by the parent/guardian for **each** medication. An interruption in medication will require a new authorization form. Send a copy of the completed log home each day when medication is dispensed.

**TO BE COMPLETED BY PARENT/GUARDIAN**

I give my permission for \_\_\_\_\_ to give or apply the medication, \_\_\_\_\_, to my child, \_\_\_\_\_, as follows:

**DIRECTIONS**

1. Date to Begin Giving Medication	2. Date to Stop Medication
3. Time Medication is to be Given	4. Amount (dosage) of Medication Each Time Given
5. Frequency (daily, weekly, monthly, etc.)	6. Route (oral, inhalant, injectable, topical)
7. Storage of Medication	8. Reason for Medication
9. Medication Expiration Date	10. Date of Training
11. Name of Health Care Provider	12. Phone Number
13. Additional Instructions (side effects, medication returned end of day, etc.)	
14. Signature of Parent/Guardian	

**\*\* The instructions from the child's parent/guardian shall not conflict with the label directions as prescribed by the child's health care provider.**

**TO BE COMPLETED BY CAREGIVER**

Date	Medication	Actual Time Administered	Amount Given	Staff <u>Signature</u>

Date/Time	Error/Reaction to Medication	Action Taken	Parent/Guardian Notified (date/time)	Staff <u>Signature</u>

**\*\*Parents Please Note:**

- Only prescription medication can be dispensed.
- Medication **MUST** be sent to school in its original container, stored according to instructions and clearly labeled for the named child.
- Medication must have the pharmacy label indicating the physician’s name, child’s first and last name, instructions, name, and strength of the medication, and must be given according to those instructions.
- Your child is **NOT** to carry medication to school.
- Communicate any changes regarding medication with education staff.
- Your child’s medication must be current. Update your child’s prescription before it expires.

**Medication Authorization Guidance**

A few reminders:

- Only prescription medication can be dispensed.
- Ensure all medication is current and not expired. Children may be unable to attend school until we have a current prescription. This is to ensure their safety at school.
- Medication will be returned to the child’s parent or destroyed when the parent determines it is no longer needed or it has expired.
- All medications, with the exception of rescue medications, will be kept out of the reach of children and secured in a lock box. Lock boxes will be used in the classroom, in the refrigerator, and on the bus.
- Epi-pens and inhalers must be easily accessible but kept out of the reach of children at all times. They should not be in a locked box when children with these allergies and conditions are present.
- Apply or dispense medication according to the directions on the original container, unless otherwise authorized by a written order of the child’s physician.
- Medication cannot be added to a child’s beverage or food unless indicated on the prescription label.
- Staff must sign the medication log. Do not use initials.
- If medication is used “as needed,” there must be additional information added in that section. Describe when the medication will be needed (wheezing, soreness in the muscle, etc.).
- Describe error/reaction in detail on the Illness/Incident Report.
- If a child is seen by a doctor or goes to the emergency room, make a verbal report to Licensing within 24 hours. Complete the Incident Report State of Michigan form (BCAL 4605) within 72 hours.
- Written authorization for triple antibiotic ointment, sunscreen, insect repellent, diapering cream, and hand lotion is obtained annually on the Parent/Guardian Release. Ensure the parent/guardian signature is on the release before using these products on a child.

**BUS INFORMATION**

**Parent/Guardian Bus Responsibilities**

Dear Parent/Guardian:

\_\_\_\_\_ Head Start and/or GSRP offers transportation to your child through \_\_\_\_\_ so that s/he can attend the program on a regular basis. Please read the following information carefully so that you can help us maintain a transportation system that operates well.

1. Bus Driver Name and/or Bus Number: \_\_\_\_\_
2. Center Telephone #: \_\_\_\_\_
3. Pick Up Time: \_\_\_\_\_ Drop Off Time: \_\_\_\_\_

**These times may vary depending on many factors.** However, if your driver is consistently very late or very early, please let your teacher know.

4. Changes in pick up and drop off locations must be discussed and arranged with the child's teacher. **Bus Drivers are not authorized to make these changes.** If your child will not be attending, it is your responsibility to let the center know either the day before or at least **one hour** before the route begins. Let us know as soon as possible if you will be moving.
5. At pick up, walk your child to the bus. If the driver does not see anyone, s/he will continue on the route. Situations when an adult cannot walk a child to the bus (due to young children in care or other issues) needs to be discussed with your child's teacher. If you are consistently not at home at pick up and/or drop off or if you fail to notify the program that your child will not be attending, **TRANSPORTATION FOR YOUR CHILD MAY BE TERMINATED.**
6. At drop off, walk to the bus to pick up your child. If the driver does not see anyone s/he will bring your child back to the center. **It will be your responsibility to pick up your child. If you cannot be reached, your designated emergency contact will be called.** It is important to keep phone numbers of your contacts updated. If the center is unable to contact an approved person to pick up your child, the **Parent Pick Up Policy** will then be followed.
7. **In Case of an accident or emergency,** you will be contacted as soon as possible. You will be given directions as to what to do and how to reunite with your child.
8. It will be helpful for the safety of your child to discuss the importance of using quiet voices and remaining seated with the seat belt buckled on the bus at all times.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## County Transit System

Program regulations prohibit children riding alone on a County Transit System that is open to public riders. County Transit can be used when the parent rides to and from the center with the child. There are some classrooms that contract with transit. In these situations, an agency employee is on board.

### Parent Pick Up Policy

**It is essential that each child be picked up at or before the center's posted closing time.**

If an emergency occurs that is going to interfere with normal pick up time, the parent/guardian needs to call the center as soon as possible. The parent/guardian will indicate who will be picking up the child by the center's posted closing time. The people picking up must be noted in the Emergency Contact section on the Child Information Record. Please make sure the people who are listed as emergency contacts on the Child Information Record are reliable, have a working telephone number, and are available to pick up your child. Emergency contact will need to provide a photo ID at pick up time to be copied by staff for the safety of the child. If there is no contact by parent/guardian, the guidelines listed below will be followed.

1. The parent/guardian and persons listed on the Child Information Record form will be called three (3) times in 15 – minute intervals, beginning 5 minutes after the expected pick up time.
2. The staff will ensure the safety and well-being of the child at the center until the issues are resolved.
3. One hour after the school day, the program will contact the DHHS Child Protective Services.

We thank you for your cooperation in this matter. We know you understand that for the safety and well-being of your child, it is essential that children are picked up on time by the appropriate people.

If you are having a problem picking up your child on time, please speak with your child's teacher.

## CELEBRATION POLICY

1. Activities need to be open ended and process oriented so that **ALL** children can be involved successfully.
2. Concepts being presented must be developmentally appropriate.
3. Preparation should not dominate a month's worth of activities.
4. Celebrations do not revolve around holidays. (Halloween, Thanksgiving, Christmas, Valentine's Day, etc)
5. If food consumption is involved in a celebration:
  - A. We cannot ask parents specifically to provide these food items. (They may, however, volunteer to bring items or volunteer to give time: i.e.: set up, serve, and clean up.)
  - B. The children should be involved in the food preparation as much as possible, keeping food allergies in mind at all times.
  - C. Nutritious foods must be strongly encouraged and provided whenever possible.
6. When developing cultural experiences around a certain ethnic group's holiday:
  - A. Avoid teaching stereotypes from the past or giving the impression that other ethnic groups spend their daily life in celebration.
  - B. Cultural concepts are best taught by using the children's varied family heritages and community resources. Learn about family traditions and use when possible (i.e. song parents sing to children, games they play, etc.).
7. Celebrations held after hours should also follow these guidelines.
8. Celebrations held after hours cannot be used as substitutes for classroom or home visiting time. When celebrating the children and their work use pictures, videos and displays to show children's accomplishments.
9. We cannot imply or request of individual parents to provide gifts, money, or materials for celebrations. Plan alternatives involving children in hands-on activities using program materials.

If you need clarification on any point about this policy talk to your Education Coach or PSC.

## NMCAA Head Start Child Development Center Celebration Policy Guidance

Holiday traditions are family events celebrated differently from home to home.

Staff will not plan activities specifically related to the religious, cultural or commercial holidays.

### This is what we CAN DO:

- can have all kinds of books and read by request or choice
- can have music in a wide variety of styles
- can celebrate the seasons
- can use seasonal items ex: pumpkins, clovers, pine cones, gourds etc...
- can send valentines home when brought in by a child
- can talk about different types of homes, families, work, and foods
- can display multi cultural posters
- can have multi cultural dolls
- can have authentic musical instruments
- can have multi cultural cooking item
- can learn and share words in another language
- can set up the environment to represent diversity
- can include multi cultural clothing in dramatic play
- can have parents share about their culture and traditions...if they ask to
- can have parents contribute to housekeeping - sending in empty boxes, cans, etc. from foods they eat
- can have multi cultural puzzles - including disability puzzles
- can display multi cultural artwork or artwork covering a variety of periods and styles

## Animal and Pet Policy

### Policy:

Animals can provide a variety of productive learning experiences for students. Our program is committed to the health and safety of each child and family we serve. It is for this reason and to ensure compliance this policy has been developed to define procedures for children's interactions with animals while in our care. These guidelines apply to animal and pet interactions in the classroom, on field trips, during family engagement activities, at socializations, and visiting pets.

### Procedure:

Many types of animals carry salmonella, e-coli, rabies, parasites, fungi and/or a variety of other diseases that can be transferred to humans. As required or recommended by the above listed sources, the following animals are prohibited and will not be kept at or brought onto the grounds of our facility:

- |                      |                                     |                      |
|----------------------|-------------------------------------|----------------------|
| ○ Rabbits            | ○ Squirrels                         | ○ Turtles            |
| ○ Bats               | ○ Hermit Crabs                      | ○ Poisonous animals  |
| ○ Wolf-Dog Hybrids   | ○ Stray animals                     | ○ Chickens and ducks |
| ○ Aggressive animals | ○ Reptiles and amphibians           | ○ Birds              |
| ○ Ferrets            | ○ Animals less than one year of age | ○ Animals in estrus  |

- The Parent/Guardian Release form must be signed prior to the child's interaction with any animals at school or on field trips. The Parent/Guardian Release form states: I give permission to have my child participate in activities that involve having/bringing animals into the classroom (Other than those animals on the prohibited list). Consult parents about possible pet allergies making sure that proper allergy paperwork is completed and there is no contact with that animal.
- Any pet or animal present at the facility, indoors or outdoors, must be in good health, free from disease, be fully immunized, and be maintained on a flea, tick, and worm control program. A current (time-specified) certificate from a veterinarian shall be on file in the facility, stating that the specific pet is up-to-date with their immunizations and free from conditions that may pose a threat to children's health
- All contact between animals and children will be supervised by a staff person who is close enough to remove the child immediately if the animal shows signs of distress or the child shows signs of treating the animal inappropriately. The staff person will instruct children on safe procedures to follow when in close proximity to these animals (for example, not to provoke or startle animals or touch them when they are near their food).
- When animals are kept in the child care facility, the following conditions shall be met:
  - The living quarters of animals shall be enclosed and kept clean of waste to reduce the risk of human contact with this waste
  - Animal litter boxes will not be located in areas accessible to children
  - All animal litter will be removed immediately from children's areas and discarded as required by local health authorities
  - Animal food supplies will be kept out of reach of children
  - Live animals and fowl will be prohibited from food preparation, food storage, and eating areas
  - Caregivers and children will wash their hands after handling animals, animal food or animal wastes. Follow the Handwashing guidelines posted in the classroom. 5/21

## NMCAA Early Childhood Nutrition Plan

The purpose of our nutrition plan is to teach children, families, and staff the importance of nutritious eating through education, experience and by example. Our nutrition plan is important to children, families, and staff as it provides a framework for supporting healthy food choices as well as nutritional resources for families and staff. Additionally, our plan encompasses regular communication regarding nutrition topics, which is so important in supporting the family-to-school connection.

The tools and resources we use in our program are:

We are currently participating with the Child and Adult Care Food Program(CACFP) and are in good standing. We follow CACFP guidelines, Head Start Program Performance Standards, Licensing and GSRP regulations, and use a nutrition analyst. We take advantage of grants and programs such as MSU extension. We collect and evaluate planned and served monthly menus; our nutrition analyst reviews these each month."

We provide nutritious food to children and staff to meet their needs. We serve:

- Foods that are low in fat, sugar, and salt.
- More than the required serving sizes of fruits and vegetable at lunch
- A meat/meat alternate item with breakfast

We teach recommended serving sizes as well as introduce different foods and model eating them as an example to children and families. We use food to learn about and respect different cultures.

Family engagement activities include meals and/or snacks that follow our nutrition guidelines.

We share our nutrition information with children, families, and staff through our parent handbook, new child cover letter, new staff orientations, and yearly staff nutrition trainings. Menus will also be posted in the classroom with substitutions noted.

## Program Growth Assessment

As a part of the Program's Health Requirements, height and weight measurements are completed on all enrolled children. Body Mass Index (BMI) is a number calculated from a child's height and weight. According to the Centers for Disease Control and Prevention, BMI is used to screen children for healthy weight, obesity, overweight or underweight. If a child's Body Mass Index (BMI) is found to be at or above the 95<sup>th</sup> percentile or at or below the 5<sup>th</sup> percentile, the program is required to follow-up with parents. Family Style meals/snacks allow teaching staff to be aware and make note of children's eating habits 2-3 times a day.

We want to be as supportive as possible because your child's health is a very important part of overall growth and development. Staff will be able to provide you with more information on related topics and connect you with services as requested.



**NO SMOKING**

The use of tobacco or vaping products is prohibited inside and outside of this building, including parking lots.

Thank you for your cooperation

**Michigan Department of Education  
Child and Adult Care Food Program**

*Where Healthy Eating Becomes a Habit*  
**Program Information Sheet**

This care center is a participant in the Child and Adult Care Food Program (CACFP), a United States Department of Agriculture (USDA) program. The CACFP provides cash reimbursement to child and adult day care centers for nutritious meals and helps children and adults develop and maintain healthy eating habits. The CACFP is administered by the Michigan Department of Education (MDE).

Through the Child and Adult Care Food Program you can be assured each participant is getting balanced, nutritious meals and developing/maintaining healthy lifelong eating habits. Proper nutrition during throughout life ensures fewer educational and physical problems later in life. As a participant in the CACFP, your care center receives reimbursement for serving nutritious meals and snacks. Meals and snacks must meet the USDA meal pattern requirements listed below (Child Meal Pattern).\*

<b>Breakfast</b>	<b>Lunch and Supper</b>	<b>Snack (serve 2 different food items from the 5 food components groups below)</b>
Milk	Milk	Milk
Fruit, Vegetable, or a combination of both**	Meat or Meat Alternate	Meat or Meat Alternate
	Vegetable	Vegetable
Grain	Fruit or second vegetable	Fruit
Meat or Meat Alternate***	Grain	Grain

**\*\* NMCAA Requires a fruit at breakfast; vegetable is optional**

**\*\*\*NMCAA Requires a protein component at breakfast** MDE is required to verify the enrollment, attendance and meals/snacks typically consumed by children while they are in care. MDE staff may contact you regarding your child's participation in our day care center.

If you have any questions about the Child and Adult Care Food Program, please contact:

Northwest Michigan Community Action Agency, Inc.  
3963 3 Mile Road, Traverse City, MI 49686  
231-947-3780  
800-632-7334  
OR  
Child and Adult Care Food Program  
Michigan Department of Education  
P.O. Box 30008  
Lansing, MI 48909  
(517)-241-5353

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) ([http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html)) online, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; Fax: (2) Fax: (202) 690-7442 or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). This institution is an equal opportunity provider.

## Staff and Volunteer Mandated Reporting Policy

### Mandated Reporter Policy and Procedures:

All NMCAA child care staff, Child Care Collaborative Center employees, and volunteers (including minors) of child care centers are mandated reporters. Under the Child Protection Law, center employees and volunteers must contact Children's Protective Services (CPS) immediately when they suspect child abuse and/or neglect. The immediate report must be made to Centralized Intake by calling or filing an online report. A verbal report must be followed by a written report. The written report must be submitted within 72 hours. Complete the Report of Suspected or Actual Child Abuse or Neglect (DHS-3200) form which includes all the information required by the law. The reporting person shall notify the person in charge or the next person in the line of supervision (Supervisor/Coordinator, Manager, etc.) of his or her finding and that the report has been made. The reporting person shall also make a copy of the written report or electronic report available to their supervisor and/or subsequent administrators. Reporting the situation to administration or other staff person does not relieve the center employee or volunteer of their mandated responsibility to report to CPS.

- When child abuse and/or neglect is suspected, the center employee or volunteer needs to only obtain enough information to make a report. If an employee/volunteer or child starts disclosing information regarding abuse and/or neglect, the center employee/volunteer must ask only open-ended questions, if necessary, to determine whether a report needs to be made to Licensing and Regulatory Affairs or CPS. **The center employee/volunteer or child must not be led during the conversation. The center employee/volunteer must not attempt to conduct their own investigation either before reporting it to Licensing and Regulatory Affairs or CPS, or during the investigation.** A discussion will be held between the Manager and Director regarding further action
  - Licensing will be notified when:
    - An incident involving an allegation of inappropriate contact occurs at the center.
    - The Child Care Licensing telephone number for our entire service region is toll free 1-866-856-0126.
  - Child Protective Services will be notified when:
    - A staff or volunteer suspects a parent or other individual has abused or neglected a child in our program.
    - To make a report to Child Protection Services contact the Department of Health and Human Services Centralized Intake office at 855-444-3911 or make an online report at [www.michigan.gov/mandatedreporter](http://www.michigan.gov/mandatedreporter).

(See Mandated Reporting Online Guidance on [www.nmcaahs.com](http://www.nmcaahs.com))

- A program must submit reports, as appropriate, to the responsible HHS official immediately or as soon as practicable, related to any significant incidents affecting health and safety of program participants, program involvement in legal proceedings, any matter for which notification or a report to state, or local authorities is required by applicable law, including at a minimum:
  - Any reports regarding agency staff or volunteer compliance with federal, state, tribal, or local laws addressing child abuse and neglect or laws governing sex offenders.
  - The ISD and a GSRP Consultant must be notified within 24 hours of a special investigation being initiated by Licensing and Regulatory Affairs for GSRP funded programs.
- Child Protection Law and Mandated Reporting Training takes place during the Annual Pre-service Orientation and Training:
  - Topics addressed include the Child Protection Law, mandated reporter informational guides, telephone/ online reporting guidance, resources on nmcaahs.com, and training videos on michigan.gov. Per Child Protective Services, do not contact the family when reporting suspected child abuse or neglect.
    - Staff and volunteers will learn what to expect from DHHS after a report has been made:
      - If the complaint is not assigned for investigation, notification will be mailed from Centralized Intake within 5 business days of the rejection of the complaint.
      - If assigned for investigation, notification of the disposition of the investigation will be mailed by the assigned CPS investigator within 10 business days of the completion of the investigation.
    - Staff and volunteers will learn how to answer questions from those who have been reported:
      - If necessary, remind individuals that child care providers are mandated reporters.
      - Seek further guidance from your supervisor.
    - Staff will learn how to continue supporting families:
      - Staff will have ongoing training and exposure to the strength-based and trauma sensitive family

partnership practices, curricula and resources used by the program.

- Home visiting staff and supervising staff have reflective practice available.
  - Mental Health Consultants and the Mental Health & PFCE Manager are available to reflect upon current practices and relationships with families to individualize planning for all involved.
- Individuals are encouraged to attend state and local mandatory reporter training opportunities as they are offered
- NMCAA Child and Family Development programs will cooperate fully with Licensing and Regulatory Affairs and Child Protective Service agencies in their community. NMCAA Child and Family Development programs will make every effort to retain children allegedly abused or neglected; recognizing that participation in our programs may be essential in assisting families with abuse or neglect problems.

**My signature below certifies that:**

- I am aware that abuse and neglect of children is against the law.
- I have been informed of the program's policies on the Child Protection Law, Mandated Reporting, and child/abuse neglect.
- I am aware that all staff and volunteers are required by law to immediately report suspected abuse and neglect to children's protective services.

**Additional acknowledgement for a volunteer:**

- I am aware that volunteers, including parents, shall receive a Public Sex Offender Registry (PSOR) Clearance before having any contact with a child in care.
- Any individual who is registered on the Public Sex Offender Registry (PSOR) is prohibited from having contact with any child in care.
- A copy of this clearance must be kept on file at the center.

## **NMCAA Integrated Pest Management Plan**

Policy: Northwest Michigan Community Action Agency utilizes an Integrated Pest Management (IPM) approach to control pests.

IPM is a pest management system that utilizes all suitable techniques in a total pest management system with the intent of preventing pests from reaching unacceptable levels or to reduce an existing population to an acceptable level. Pest management techniques emphasize sanitation, pest exclusion, and biological controls. One of the objectives of using an IPM approach is to reduce or eliminate the need for chemical applications of pesticides. However, certain situations may require the need for pesticides to be utilized. The State of Michigan requires child care centers that may apply pesticides on the property to provide an annual notification to parents of students attending the facility.

Procedures:

- Staff will contact the Facilities Coordinator before applying any type of pesticide.
- Staff will notify parents of any pesticide application prior to treatment using one of the described methods on the Annual Notification Regarding Possible Pesticide Use in NMCAA Child Development Centers or Facilities.
- When a pesticide treatment is applied, staff will ensure the Advance Notice of Pesticide Treatment sign is posted on the main NMCAA child care entrance door of the building or classroom used by children, parents, or clients.

### **Annual Notification Regarding Possible Pesticide Use in NMCAA Child Development Centers or Facilities.**

Date: \_\_\_\_\_

Dear parents and guardians (hereafter referred to as “parents”), we welcome you back to another exciting school year! Our school is dedicated to providing your children with a safe environment that is conducive to learning.

One item that contributes toward this objective is maintaining an environment that is free of potentially damaging and unwanted pests. This is accomplished with effective and economical treatments, while also minimizing your child’s exposure to pesticides. Our school uses an Integrated Pest Management (IPM) program that seeks to use a variety of methods to control/minimize pest problems. Parents are able to review the IPM program and any records on pesticide applications.

As required by State of Michigan law, the school or daycare will provide advance notice regarding the non-emergency application of a pesticide such

as an insecticide, fungicide or herbicide, other than a bait or gel formulation, that is made to the school or daycare buildings or grounds. Advance notice will be provided, even during periods when not in session. Advance notice is not given for the use of sanitizers, germicides, disinfectants or anti-microbial cleaners. In certain emergencies, such as an infestation of stinging insects, pesticides may be applied without advance notice to prevent injury to students, but the school or daycare will provide notice following any such application.

If treatment, of a pesticide, is deemed necessary by the IPM program coordinator all parents will be notified of the treatment by two methods:

- 1) It will be posted at the main Head Start entrance(s) of the school, not less than 48 hours prior to the treatment.
- 2) By the following method (that is checked), not less than 48 hours prior to treatment:
  - Posted on our website [www.nmcaa.net/publicinfo.asp](http://www.nmcaa.net/publicinfo.asp)
  - Via email
  - A written notice that is sent home with each child
- 3) Parents may also be notified by first-class mail postmarked three days prior to application.

\*In the **case of an emergency** notification may not be able to be given prior to the treatment, in which case it will be posted/sent promptly after the treatment in the above described manner. Thank you for your understanding and interest in this matter.

Sincerely,

NMCAA IPM coordinator

Printed Name: Kelly Stockfisch Telephone: 231.346.2162

Email: [kstockfisch@nmcaa.net](mailto:kstockfisch@nmcaa.net)

\* To request notice of pesticide application by mail please send a letter to our office stating your request, making sure to include your correct name and return address. This must be done every year that you require notification by mail (this request will not carry over from one school year to the next).

## Northwest Michigan Community Action Agency, Inc.

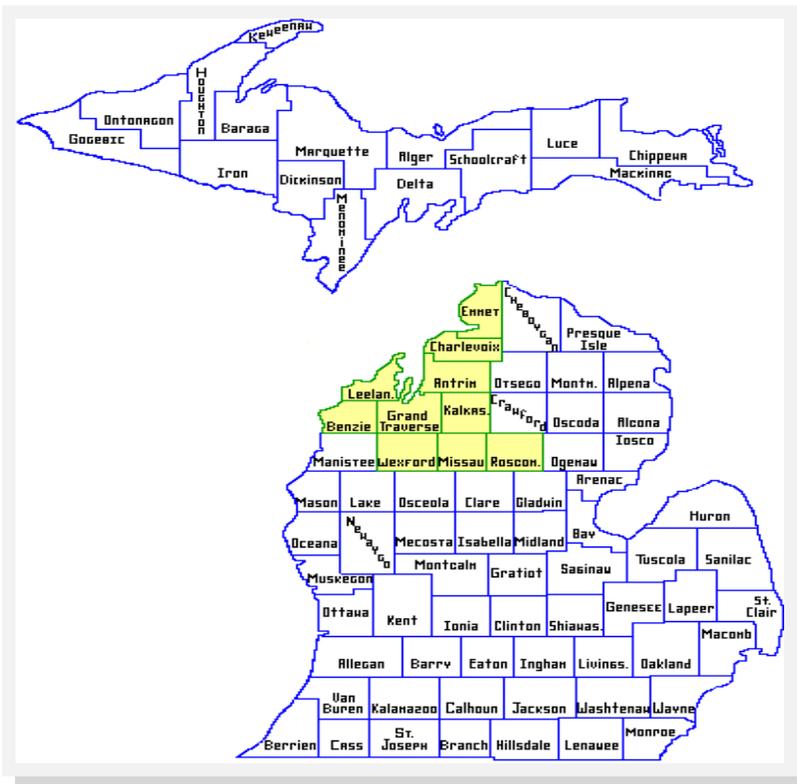
For more than 40 years case managers have connected people to services from Agency administered programs, like Early Head Start, Head Start, Veteran Supportive Service, Homeless Prevention, Meals on Wheels and Financial Management Services (which includes budget and housing counseling services). NMCAA is dedicated to strengthening communities by helping low income individuals and families achieve their personal goals of greater economic security, independence, and self-sufficiency.

Please call for information about services that may be of help to you.

3963 3 Mile Road  
Traverse City, MI 49686  
231-947-3780  
800-632-7334

1640 Marty Paul  
Cadillac, MI 49601  
231-775-9781  
800-443-2297

2240 Mitchell Park Dr.  
Unit A  
Petoskey, MI 49770  
231-347-9070  
800-443-5518



The following crisis hotline is anonymous and has counselors available to help with stressful situations.

National Suicide Prevention MDHSS  
24 hours per day  
1-800-273-8255

For Benzie County Residents  
Call Centra Wellness Network  
24 hours per day  
1-877-398-2013  
Crisis Services  
Michigan 2-1-1  
[www.mi211.org/get-help/crisis-services](http://www.mi211.org/get-help/crisis-services)

If you would like more information about  
Head Start  
or  
Great Start Readiness Programs  
please contact your local area office:

Traverse City: 1-231-947-3780 or 1-800-632-7334

Petoskey: 1-231-347-9070 or 1-800-443-5518

Cadillac: 1-231-775-9781 or 1-800-443-2297

These materials were developed under a grant awarded by the Michigan Department of Education



# CORNERSTONES OF CULTURE

**Nurturing**

**Mindful**

**Compassionate**

**Accountable**

**Appreciative**

- Promote a culture of **support, empowerment, and collaboration.**
- **Respect, appreciate, and celebrate** each other's differences.
- Promote ongoing **agency goals** and commit to **team success.**
- **Share ideas**, be open to suggestions, and maintain a **positive attitude.**
- Be **professional, honest, and sincere** to help create a trusting work environment.



HELPING PEOPLE. CHANGING LIVES.



northwest michigan community action agency  
a community action partnership

Mission: Helping people by linking services, resources and opportunities

Vision: NMCAA leads in strengthening our communities by empowering people to overcome barriers, build connections and improve their quality of life.

National Head Start Mission Statement: Head Start is a national program that promotes school readiness by enhancing the social and cognitive development of children through the provision of educational, health, nutritional, social and other services to enrolled children and families.