

Head Start – Early Head Start Family Handbook



The purpose of this handbook is to provide families with information regarding the services, policies, procedures and regulations of Head Start program.

Please keep this guide in a convenient, safe place so you can refer to it throughout the program year. After reviewing this information, if you have any questions or concerns, please speak with your child's Teacher, Program Assistant, Case Manager or the Site Manager.

The information contained in this handbook may be modified by changes in federal, state or local regulations. This booklet will be available on the parent board at your center's location and on the Head Start website.

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WELCOME TO GEMINUS HEAD START- EARLY HEAD START!

Geminus Corporation's Head Start and Early Head Start program is the 2nd largest Head Start agency in Northwest Indiana, currently funded to serve 1,504 children ages zero to five (including expectant families). The program recruits and enrolls children from all surrounding cities of Lake and Porter counties. Geminus offers 2 program options: Home-Based and Center-Based. We support the needs identified in each of our communities.

This handbook will explain our basic mission, purpose, rules, and policies. Parents are responsible for reading and becoming familiar with all of the enclosed materials. Please read through this handbook, and if you have questions, concerns, or suggestions, feel free to contact us. We hope your family enjoys their time with us. Thank you for entrusting your child to our care.

Geminus Head Start is committed to serving eligible families in the Lake and Porter counties. Our programs key features include:

- Highly qualified staff—a Bachelor's level Lead Teacher, An Associate Teacher and a part-time Classroom Aide in every classroom
- Small group size—8 infant/toddlers and two year olds in EHS and 17 preschoolers per class session
- Intentional instruction—based on best practices for teaching and learning
- Continuity of care—children stay with the same teachers and peers for up to three years to help them develop secure relationships
- Parent-Family and Community Engagement Services—both expected and strongly supported, with well trained and experienced staff
- Reflective supervision and practice model is implemented
- Emphasis on Social-Emotional development and self-regulation skills
- Enhanced focus on Language, Literacy and STEM learning to promote school readiness
- Interdisciplinary Approach for better outcomes for children and families
- Family Life Skills training
- Collect data on service delivery to drive decisions for improved program and child outcomes

In addition to "Teaching and Learning" for school readiness, we take pride in "Serving Families". Non-teaching staff are specially trained to assist families with securing referrals and resources in all areas of need (e.g. housing, nutrition, mental health, etc.). For this reason, Head Start is nationally considered as the premier preschool of choice.

Our Head Start program is committed to understanding, respecting, reflecting and being responsive to the cultures of all people, but particularly to those of our enrolled children, families and staff. Geminus Head Start promises to succeed in creating a diverse learning environment that respects, accepts, and includes all children, families, visitors and staff members regardless of their backgrounds and beliefs in order to embrace the diversity of our Head Start/Early Head Start community.

PARENT RIGHTS AND RESPONSIBILITIES

My rights as a Head Start Parent

- To take part in the major decisions affecting the planning and operations of the program.
- To be welcomed in the classroom.
- To participate without fear of endangering my child's right to be in the program.
- To be informed regularly about my child's progress.
- To always be treated with respect and dignity.
- To expect guidance for my child from the Head Start Staff.
- To be able to learn about the operation of the program including the budget and the level of education and experiences required to fill various staff positions.
- To take part in planning and carrying out programs designed to increase both personal and professional skills in areas that will improve my well-being.
- To be informed about all community resources concerned with health, education and the improvement of any condition in my family life.

My responsibilities as a Head Start parent

- To learn as much as possible about the program and to take part in major policy decisions.
- To accept Head Start as an opportunity through which I can improve my life and the lives of my children.
- To be active in my child's classroom, as an observer or a volunteer and to contribute my services in whatever way I can, toward the enrichment of the program.
- To provide parent leadership by taking part in elections to explain the program to other parents and encourage their full participation.
- To welcome teachers and staff into my home to discuss ways in which parents can help with their child's development at home in relation to their school experiences.
- To work with teachers, staff, and other parents in a cooperative way.
- To guide my children with firmness, this is both loving and protective.
- To offer constructive criticism of the program and to defend it against unfair practices.
- To take advantage of programs designed to increase my knowledge about child development and my skills in areas of possible employment.
- To become involved in community programs which help to improve health, education and recreation for all.

GENERAL PROCEDURES

Equal Opportunity Policy

In accordance with federal law and the United States Department of Health and Human Services policy, this program is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs, or disability.

Classroom Entry

In order to enter the classroom children must have an up-to-date record of their immunizations signed by a physical (DO or MD), Physical Assistant (PA), Nurse Practitioner (ARNP), or Certified Medical Assistant (CMA). Provisional certificates of immunization and religious/medical exemptions for immunizations will be accepted according to Indiana's immunization law.

Each child admitted into the program requires a current (within the past 12 months) and comprehensive well-child physical examination. This examination must be signed and dated by a MD, DO, PA or ARNP. Please set up an appointment with your child's health care provider and be ready to provide the appointment date on the first day of class. This well-child examination must be updated every 12 months. Dental exams will also be required at minimum every 12 months for children over 1 year of age. Just like the physical exam, set up a dental appointment for your child if one has not already been completed.

Orientation

Upon enrollment, and prior to the child's first day in the classroom, families are required to participate in a Head Start orientation. This Family Handbook is presented to each family as a reference for program policies and procedures. A copy is always available on-site for parents and staff to refer to. In addition, a copy of the last page is made for each family to sign as confirmation of the attendance of the presentation and acknowledgement by the family that they will adhere to policies, procedures and their responsibilities. This form is filed on-site by staff.

Child Safety Release Plan

Our program is deeply committed to the safety of the children we serve. For this reason, we will only release a child to his/her parent or legal guardian, or to an adult (18 years of age or older) authorized in writing by the parents or legal guardian to receive the child.

Authorized persons who are unknown to staff will be asked to show a picture identification before being allowed to pick up a child. NO unauthorized person is permitted to pick up a child under any circumstances.

We ask that you immediately inform the Program Assistant or Site Manager when you need to make any changes to the list of adults authorized to pick up your child. Unauthorized adults <u>WILL NOT</u> be allowed to pick up a child under any circumstances.

Arrival Time

Children need to arrive on time to class in order to fully benefit from the program which includes a nutritious meal – breakfast/snack for AM classes, lunch/snack for PM classes. If a child will be late, parents are responsible for notifying site staff as soon as possible. If there are circumstances that make arriving on time difficult, please contact your child's Head Start site – together you may be able to find a solution.

Note: Children are not allowed in classroom more than five (5) minutes before class start time.

Departure Time

Children must be picked up no later than 5 minutes after class end time. If a parent is unable to pick up their child on time, it is their responsibility to notify site staff in advance as well as to arrange for someone on the child's "Authorized Persons List" to pick up the child. If there are circumstances that make picking up the child on time difficult, please contact your child's Head Start site – together you may be able to find a solution.

Note: If a child is not picked up within 30 minutes past class close time and no arrangements have been made with site staff to have the child picked up by another authorized person, site staff will contact the Department of Child Protective Services.

We thank you for your cooperation in this matter, and we know you understand that for the safety and well-being of your children, it is essential that children are picked up on time by the appropriate people and that a responsible adult is available to receive the children from the center. At no time will faculty hold the child responsible for the situation or discuss the issue with the child.

If you are having a problem picking up your child on time, please speak with your Case Manager.

Change in Information

Whenever there is change in address, phone, emergency contact, health provider, health conditions, work/school schedule, family situation, or other please notify us. You may be asked to update the Emergency contact information form at your site.

Confidentiality

All family information and children's files are kept strictly confidential. Only authorized Head Start representatives have access to these files. On occasion, state and federal licensing representatives may also have access. Parents and legal guardians have the right (at any time) to review and or obtain copies of their child's files upon written request.

Pets

Animals will be included in the classroom for observation purposes only. Children will have no physical contact with the animals. Certain pets are allowed if they are in good health, have no evidence of disease and post no safety threat to children. **Not allowed are: ferrets, reptiles, turtles, or birds of the parrot family.** Visits by pets or other animals must be included on the lesson plan and parents will be notified before the animal's visit.

Employment Opportunities

Head Start parents are strongly encouraged to apply for positions posted by Geminus Corporation for which they are qualified. Check the parent board for current listings or visit the site www.geminus.org.

Accessing Child Records

Parents and legal guardians who wish to review or obtain copies of their child's file for any reason should contact their Program Assistant to make the request and to complete necessary paperwork. All requests to access one or more of the following child folders (ERSEA, Education, Health, and Social Services) will be processed within 7 - 14 business days (depending on request). Please note: We adhere to all HIPPA regulations and no records will be released to an outside agency without the expressed written consent of a child's parent and/or guardian.

Mandatory Reporter Statement

All Head Start staff are Mandatory Reporters and must immediately notify the Department of Child Protective Services with any concern of child sexual abuse, physical abuse, mental injury, child prostitution, denial of critical care, bestiality in the presence of a child, illegal drug in the child's system, or manufacture of drugs in the child's presence.

Weather Related Closing Procedures

Site staff will contact you directly if the program is going to be cancelled/closed due to weather. The following radio stations may also carry information about school closings in your area:

- WJOB 1230 AM
- WZVN 107.1 FM
- WGN 720 AM
- Indiana 105.5 FM

Announcements will be on the area radio stations before 6:00 am

Smoking

All Head Start locations are smoke-free environments. Smoking is not allowed in any Head Start or Early Head Start buildings or on any building grounds, including cars in the parking lot.

Evacuation

As required by the Federal Performance Standards and state Child Care Licensing, the centers will hold monthly fire drills, bi-annual tornado drills, and post evacuation plans in all classrooms. During the evacuation drills, staff will lead children to a safe area. Please do not be alarmed if an evacuation occurs while you are in the school building, simply follow the direction of the staff.

Child Safety: Jewelry

We ask that you do not send your child to school wearing jewelry—including rings, necklaces, or earrings—as these items can get caught in equipment when children play, increasing the risk of injury. Thank you for your understanding.

The center is not responsible for loss or damage of clothes and/or jewelry

If you need assistance with clothing resources, please contact your Case Manager.

Bathroom & Toileting

As a component of our comprehensive early childhood program for children, we work with children who are still in the process of becoming toilet-trained. Classroom Teachers will be available to assist your child in the Head Start program and will support your child in learning to use the toilet.

- Classroom staff will respond promptly when a child requests assistance using the toilet.
- Classroom staff will not show disapproval or punish children for any accidents. Children who have toileting accidents are NEVER degraded by harsh words or appearances of disgust. A conference between the Teacher(s) and the parent(s) will serve to establish common goals and methods for toilet-training.
- A child's clothing will be changed immediately following a toileting accident. Soiled clothing is placed in a sealed, labeled, moisture-proof bag and sent home with the child, so that a fresh change of clothes can be sent back to the center.

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

The following procedures are implemented in the center-based and home-based program to ensure sanitary conditions.

- 1. Gloves are used whenever staff needs to assist children in the bathroom following universal precautions procedures.
- 2. Faculty members always respect a child's privacy.
- 3. If an accident occurs, faculty and parents will not humiliate the child.
- 4. If a child lacks the necessary self-help skills in the bathroom, the faculty will inform parents.
- 5. Staff encourages the child to be independent and allow the child to become self-sufficient.
- 6. Bathrooms are cleaned and disinfected properly after any accident, and regularly on a daily basis.

Tooth Brushing

Healthy oral habits are established in the classroom with daily tooth brushing after one meal. The program will provide tooth brushes to all enrolled children and will replace them every 3 months.

ATTENDANCE

Head Start is a federally funded program requiring a minimum of 85% average daily attendance, which is equivalent to one absence a month per child. Attendance is analyzed on a monthly basis to ensure each child is regularly attending.

Parents need to ensure that their child attended and arrived to the center every day on time. Children who attend our program **daily and on time** experience better outcomes than those children who attend only occasionally. Staff will monitor attendance everyday via the sign in sheet. Please contact the center as early as possible if your child will be absent or late that day.

If a child is absent three consecutive times, the Case Manager will initiate family support to include home visits or other direct contact with the child's parent/guardian to collaborate on an attendance plan. In circumstances where the child cannot establish regular attendance (chronic or sporadic absences), and it does not seem feasible to include the child in either the same or different program option (home based), the child will be dropped from the program. In this instance, another child will be given the opportunity to enroll.

If a child is dropped from the program, and the parent wishes to re-enroll, the parent must reapply to the program. The child will then go on the Head Start waitlist and will be considered for enrollment if and when a vacancy occurs.

If there is a planned absence (scheduled vacation or family visit) or even an extended emergency absence (hospitalization, etc.) it is the responsibility of the parent to contact their site to discuss the situation in order to establish an expected return date and maintain the child's enrollment.

If the child does not attend on the expected return date, the child's slot may become a vacancy.

Late Pick-up

It is essential that parents/guardians pick their children up on time from the Head Start program. If an emergency occurs, parents/guardians should call the center and inform the staff of the emergency, and provide a time when a parent/guardian or person from the 'Authorized Persons List' will be able to pick up the child.

INCLUSION EDUCATION

Children with special needs are always welcome to the program and the Head Start & Early Head Start program is committed to providing classroom settings that include all children. All children who attend the program are treated with respect and dignity, regardless of disability. Head Start strives to meet the individual education needs of every child including those children who enter Head Start with an Individual Education Plan /Individual Family Support Plan through their school systems' Special Education Department or Part C organizations, such as First Steps. The Disabilities Coordinator will work closely with staff and families to make sure the program is well prepared to welcome and nurture all children, especially those with disabilities.

Inclusion Education Support

If you suspect your child may have a developmental, physical, or behavioral issue, please share your concerns with the Disabilities Coordinator who is available to help families:

- Understand their parental rights
- Learn about available special education services
- Make appropriate referrals
- By attending education evaluations
- By attending Individual Family Service Plan (IFSP) or Individual Education Program (IEP) meetings
- Know their child is reaching individual goals in the classroom
- By assisting in transition plans for children from one program to another, including from Early Head Start to Head Start and from Head Start to kindergarten.

SCHOOL READINESS (ZERO TO FIVE APPROACH)

Geminus Head Start & Early Head Start activities are designed to build social skills, language development, reinforcement of thinking processes, small and large muscle development and self-help skills. The program believes children learn best by doing. Curriculum planning provides for children to learn by hands-on experimenting, guessing, problem-solving, all of which is aligned with school readiness outcomes and is incorporated into their "play" activities.

How will my child learn?

Children in Head Start & Early Head Start will be learning the things that they need to know in order to have a positive and successful future elementary school experience. Early Head Start children can either be enrolled in Home-Based or Center-Based program. Regardless of the program option, all children will be supported in each of learning areas listed below:

- <u>Cognitive:</u> to help children develop learning skills, prepare to read and write, ask questions, use words to describe their ideas, feelings and what they see
- Social: to help children feel comfortable in school, make friends and solve problems
- **Emotional**: to help children develop self-control and independence, experience a sense of accomplishment and satisfaction and have a positive attitude toward life, others and themselves
- Physical: to help children increase their large muscle skills through running, jumping and climbing; to help children develop their small muscle skills through building, cutting, stringing and painting

Children will learn math, science, social studies and early reading and writing skills in each of the interest areas. This learning will be "hands-on" learning which research has proven to be the best way for children to learn since it "fits" with how they develop. Another term used to describe this type of learning is <u>developmentally appropriate</u>. Through their play activities, children will learn by exploring, experimenting, problem solving and asking questions.

Lending Library (Home-School Connection)

To promote literacy, create home environments rich with print materials, and to increase opportunities for families to read together, most center-based sites or solicitation locations will have a parent resource room with a lending library for parents to check out and return books.

Developmental Screenings

Your child will be screened for vision, and hearing. Additionally, development screenings of each Head Start or Early Head Start child are completed within the first 45 days of the child's enrollment in the program. Information regarding the screening will be shared with parents at the Parent/Teacher Conference. Each child's learning and development is assessed three times during the year for Head Start and four times per year for Early Head Start.

The program staff provides families with a full explanation of confidentiality by:

- Listing the categories of individuals who will have access to individual child screening and assessment results as well as the reasons for their access.
- Sharing regulations governing access to files and familial rights
- Describing the procedures used to keep individual child records confidential
- Explaining how and why children's individual screening results and assessment information will be represented, used, and interpreted.

Infant Program

All Early Head Start teachers receive specialized training in infant/toddler practices according to Indiana Child Care Licensing standards. Our infants and toddlers receive all of the Early Head Start comprehensive services, such as health, dental, nutrition, mental health, social services, parent training, and parent involvement. These services are coordinated through the various division components in a shared-responsibility framework. Parents can expect a daily update on the needs of infants based on hours of sleep, general mood, and number of diapers/bottles consumed throughout the day. The program provides wipes, diapers and formula at no cost to the parent. The program also supports and encourages breastfeeding.

Center-based vs. Home-based

Children enrolled in Center-Based programs will have teaching staff to scaffold them in learning objectives through discovery and purposeful curriculum plans in a classroom setting. Head Start teaching teams utilize the *Creative Curriculum Systems for Pre School* and I STAR-KR for. Early Head Start teaching teams utilize the *Creative Curriculum for Infants, Toddlers and Two's* curriculum as well as I STAR – KR for the on-going assessment process.

Children enrolled in Home-Based programs will have home visitors who are trained in the Parents as Teacher curriculum, which is research based and developmentally appropriate and aligns with I STAR KR for on-going assessment tools. The curriculum places a special emphasis on brain development and social emotional development in the early years, recognizing that a secure attachment between a caregiver and child is crucial. Enrolled home-based families also participate in monthly Socializations*, in an effort to bring home-based families together for networking, classroom discovery, and child-parent activities.

Home visit and socialization guidelines (Home-Based programs)

- All home visitors will set up an appointment with you prior to showing up at your place of residence.
- All 90 minute home visits are conducted at the parent's convenience.
- All 90 minute home visits need to be conducted with the parent/guardian of the child. Other family members may be invited to participate. (i.e. child care providers, grandparents)

- > The home visitor will model age appropriate activities for parents and guidance that promote parent, child interactions.
- All home visits are required, by the Head Start Performance Standards, to last a minimum of 90 minutes.
- Socializations will be available throughout each month with preplanned age appropriate activities.
- > Socializations are conducted at times which are most convenient for the families enrolled in the homebased program.
- > The purpose of group socializations is to, "build on the experiences and goals that are addressed during home visits, as well as, attend to the needs of both children and families." Home Visitor's Handbook, Office of Head Start

*Socialization locations are set up exactly like Center-Based classrooms to showcase:

- Interest areas: block corner, house corner, table toys, library corner, computer area, art area, sand and water area
- A selection of learning materials in each interest area so children have the chance to learn in whatever area the children choose for play
- Materials for the children's use are stored on low shelves, in containers and on hooks so children can get them on their own
- Picture and word labels are on containers and shelves so children know where materials belong. Labeling with pictures and words also helps children in beginning reading skills.

Parent/teacher conferences

Throughout the school year parents will be given information about what children are learning. At each site meeting, the upcoming topic of study will be introduced by the child's teaching team and parents will have a chance to give ideas about possible classroom activities and field trips. Other information about how and what children are learning will be provided through newsletters and parent workshops. Parents will have times to meet with the teaching team to talk about the child's progress, ways of continued support, and questions or concerns.

Field Trips

Geminus Head Start believes that classroom learning can be enriched through the inclusion of carefully planned field trips. Firsthand experiences provide our children with useful information and a level of understanding that adds elements to their play, enriches vocabulary and enhances overall learning. Field trips are also an opportunity for all parents to become engaged and enhance their child's learning experiences.

All field trips must be related to the classroom theme, be based on children's interests and within the community. Teaching staff, Case Managers, and parents must be involved in the initial planning of all field trips for children and must be approved in the site meeting minutes the month before the trip is requested. Field Trip requests will be approved based in part on field trip location and cost.

Celebrations

Geminus Head Start recognizes that families value the ability to celebrate their child's achievements, birthday, and other cultural holidays as part of the classroom community. In an effort to keep the celebration of holidays, birthdays and other milestones developmentally and culturally appropriate, parent committees and staff must follow guidelines in planning for celebrations in the classroom.

Celebrations must be:

• Designed to incorporate parent-child activity interactions and planned primarily by parents with guidance from staff on what is developmentally appropriate and allowable under Head Start policies;

- Approved by respective Director.
- Optional and sensitive for children and families who choose not to participate.
- Reflective of and relevant to the ethnic composition, traditions, culture, and interests of participating children and families

Preschool graduation events with caps and gowns and related activities have strong significance in many communities. However, this kind of graduation event is **not allowable under the Head Start federal guidelines**. Children and families will experience these types of events when children are older and better able to understand and appreciate them. Developmentally appropriate End of Year Celebrations will be organized each year to celebrate children's growth and development. Each programming year, families will be invited to participate fully in end of year activities planned by staff and parents.

NOTE: In accordance with State Licensing regulations, siblings of enrolled students are not allowed in classroom settings during volunteering or special events, however the Head Start program is committed to ensure that all parents have an opportunity to participate fully in their child's planned end of the year activity. Childcare can be provided for end of the year activity days (if requested in advance). As a parent, you will be guaranteed the courtesy of receiving adequate time to confirm whether on-site childcare is required for end of the year activities planned at your site.

Birthdays

The Holiday and Celebration Policy also give teachers and parents' guidelines for celebrating a child's birthday. The guidelines for birthdays were designed to make sure that health, safety, nutrition, education and classroom culture needs are met, while also recognizing the child's move from one age to the next. The guidelines for celebrating children's birthdays are available in each Head Start classroom.

Preparing for your child's first day in a center-based classroom

Coming to Head Start may be your child's first experience being away from you or your child may already have experience being in a child care program. If your child has not been in the program before, Head Start will be a new experience. It is normal for many young children to cry when they have to separate from their parents and try a new experience. Head Start staff will be working to make this transition from home to Head Start a positive and successful experience for both you and your child. Be prepared that this may take some time. Sometimes your child may be fine until other children begin to cry or your child's crying may only last a few minutes. Staff will work with you in helping your child to feel safe and comfortable in his/her new classroom. Orientation and Phase-in activities will be helpful in preparing your child for the first day of classes.

Preparing for your child's first day in a home based visit

Your home visitor will call you the day before your visit to confirm the day and time. The home visitor will be wearing a photo id badge to identify themselves to you. The first few visits are planned for you to learn about your home visitor and for them to begin to know you and your family. There will be additional paperwork to complete with your visitor at the beginning of enrollment, but this will not be how the visits are planned once you have begun your partnership and the necessary enrollment requirements are completed. The first visit allows you time to ask questions and share valuable information on your child's interests and learning style. If you child is willing, the home visitor will have an educational activity for you, your child and the home visitor to explore together. Going forward you and your home visitor together will plan what happens during your visits.

Parent Surveys

Geminus Head Start recognizes the importance of feedback from enrolled families. During the program year parents and guardian will receive a survey to assess the quality of the Geminus Head Start program. The collaboration between families and Head Start staff is important and ensures that identified services are relevant to meeting their needs.

BEHAVIOR GUIDANCE

Staff is prohibited from using any type of physical discipline (spanking, etc.). The program uses positive discipline, which teaches children what they <u>can do</u> <u>rather than</u> what they <u>cannot do</u>. When positive discipline techniques are used in the classroom, children learn what they can do within the limits of the classroom. As children grow, the continued use of positive disciple techniques helps children learn to manage their own behavior. Consistency is the key to positive and successful discipline and the goal is for each child to obtain important problem solving skills that will lead to independent problem solving and self-control.

The consistent use of the following discipline techniques will help children learn what to expect and what they can do

- Clear and positive classroom rules explained to children
- Choices offered
- Logical consequence used. For example, "Sand is for digging and building. You were throwing sand in the
 faces of your friends, so you will need to get out of the sandbox and find another place on the playground
 to play."
- Contingencies (when, then statements) used. For example, "When you pick up the blocks, then you can go to the play dough table." When you zip up your coat, then you can go outside."

Behavior Support

Head Start will use consistent behavior guidance and will not exclude a child from program participation unless that child demonstrates an inability to benefit from the services offered by the program due to behavior concern. If such occurs, we will work with the child, family, and community mental health professionals if necessary, to provide alternative services. A child's enrollment in the program may also be terminated because of continual or extreme violation of the parent responsibilities listed in this Family Handbook.

If behavior concerns are identified during daily behavior guidance practices:

- 1. Child's disruptive behavior will be documented and maintained in confidence.
- 2. Parent/guardian will be notified verbally, and may also be given written copies of the incident reports for challenging behaviors that might lead to exclusion.
- 3. Parent/guardian will be given literature or other resources regarding methods of improving behavior
- 4. Staff and parents will use a variety of strategies to support child in improving behavior, with the goal of preventing exclusion:
 - ✓ Try to redirect child from negative behavior.
 - ✓ Staff will reassess classroom environment, supervision, and appropriateness of activities.
 - ✓ Always use positive methods and language while disciplining children.
 - ✓ Praise appropriate behaviors.
 - ✓ Consistently apply consequences for rules.
 - ✓ Give verbal reminders.

The Site Manager, teaching team, parent/guardian, and possibly other support within our

program will have a conference to discuss how to promote positive behaviors. Prior to any decision to exclude a child from the Head Start program, the child's teacher will hold a meeting with the child's parent(s) to discuss the issue(s) and obtain permission to have the mental health professional further assess the child/issue. The Case Manager will be made aware of process and involved as needed. Designated staff, such as teachers and the mental health professional will be responsible for executing an "Action Plan" (implementing positive discipline methods, evaluating outcomes, making modifications, and communicating with parents.)

Decision to Discharge for Behavior and Health Concerns

The procedure below meets our state Child Care Licensing office requirement for a "discharge" policy*.

*Child Care Center Rules: 47 IAC 3-4.7-17 Admission, discharge, arrival, and departure policies

Child actions that may require exclusion due to behavior concerns include the following:

- Failure of child to adjust <u>after a reasonable amount of time and multiple attempts using different strategies.</u>
- Uncontrollable tantrums/angry outbursts.
- Ongoing physical or verbal abuse to staff or other children.
- Excessive biting.

Parental actions that may require exclusion of the child for behavior and health concerns include the following:

- Failure to complete required forms or health information including the child's immunization records.
- Failure to cooperate with areas of Action Plan
- Violations of the attendance policy.
- Physical or verbal abuse to staff.

MENTAL HEALTH SERVICES

Head Start collaborates with parents by:

- 1. Obtaining parental information, observations, and concerns about their child's mental health.
- 2. Sharing staff observations of their child and discussing child's behavior and development, including separation and attachment issues.
- 3. Discussing appropriate responses to their child's behavior.
- 4. Discussing how to strengthen and nurture a supportive environment in the home and in the program.
- 5. Help parents to better understand mental health issues.
- 6. Support parents' participation in any needed mental health interventions.

The Head Start program contracts services with licensed mental health consultants and they assist in:

- 1. Coordination of mental health services for children.
- 2. Providing teachers with suggestions to work on children's behavior and emotional needs.
- 3. Individual child observations arranged with written parental consent.
- 4. Helping parents locate mental health resources for concerns about a child.
- 5. Parent training on mental health or behavior support for young children.

For more information on mental health services, please ask your child's teacher or Case Manager.

HEALTH

Early Childhood Development and Health Services

School readiness begins with health! Our program's goal is that each child is in the best possible health, that preventative health measures are taken, and that follow-up treatment and services are obtained for any health condition detected.

In order to collect essential information and identify any needs or concerns, all parents are asked during the application process to provide nutrition and health history for enrolled child(ren). This helps us to determine well in advance before classroom instruction begins, if children are on any medications for diagnosed conditions such as asthma, have any specific allergies that require a food substitution to daily food menus, or have any other health/safety needs. All diagnosed conditions and allergies require official physician documentation before we can make accommodations.

Requirements for Preventive Care, Screenings and Immunizations

The State of Indiana and the Federal Early Periodic Screening, Diagnosis and Testing (EPSDT) guidelines have specific health requirements for children before and after their enrollment in the Head Start program. Our first priority is to support families to meet these requirements on or before 30 days from a child's first day of school.

All center based Head Start children must have a current oral exam (updated every 6 months) and a current school physical that includes blood lead, hemoglobin and hearing/vision screening test results.

Health/Nutrition Coordinators are available to conduct on-site screening tests if school physicals are missing the following results for:

- Lead
- Hemoglobin
- Hearing/Vision

In the case where immunizations are not recommended for a child for medical and or religious reasons, parent/guardian must submit to the Head Start program:

- Medical Immunization Exemption Form: signed by the child's medical provider
- Religious Immunization Exemption Form: signed by the parent/guardian based on religious beliefs

Center Based Health Requirement

Due to Indiana Child Care licensing restrictions, center based children can be excluded if physicals are not received within the first month of school. Therefore, it is best to provide the paperwork on or before the first day of school. In order to prevent exclusion, we will provide advance notice to your family and provide assistance and resources as necessary.

Lead Awareness

Lead exposure and poisoning remains a serious environmental health hazard for Head Start children nationwide. Our program will provide various opportunities throughout the year to educate families on the importance of lead testing and offer free lead screenings to children in need.

Growth Assessments

Each Head Start child's height and weight will be measured twice a year by staff. The first measurement will be completed when the child arrives for his/her first day of school and the second measurement will be in March. Individual results will be sent home and may include recommendations for follow-up with a health professional.

Daily Health Check

Upon arrival each day at center-based classrooms, your child will be observed by staff for signs of head lice, illness, or injury. If any signs are present, you will be notified immediately.

Medications

If prescribed medication is necessary during <u>school hours</u>, you will need to fill out a Medication Authorization Form which is required for each individual medication.

Prescribed medication will only be accepted on school grounds if there is medical provider documentation to support the following:

- 1. Child's first and last name
- 2. Name of medicine
- 3. Directions for use (Schedule of Administration)
- 4. Name of prescribing physician
- 5. Amount given per dose
- 6. Pharmacy's Name
- 7. Date medication was filled

Over the counter medications (i.e. cough syrup) will only be accepted on school grounds with doctor's written permission.

Health Coordinators will ensure that involved staff members administering medications are trained on the doctor's specific orders. Medication brought to school premises for the first time must be signed in by a Site Manager or a Program Assistant. Teachers or Bus Drivers are not allowed to accept medication when it brought to the school the first time. Additionally, all medication must be picked up on or before the child's last day of school.

If there is an emergency event during school hours, program staff will take standard emergency precaution by providing CPR/First Aid and contacting 911, as needed. Parents/guardians are urged to always keep staff informed on the status of children requiring medication and provide official documentation.

Topical Treatment

Parents are requested to sign the Topical Treatment Permission Form to authorize permission to apply topical creams (i.e. diaper ointment, sunscreen, etc.). Teaching teams will topical cream as needed. Teaching teams monitor children for adverse reactions to the topical cream when applied the first time and parents will be notified immediately.

SHORT TERM EXCLUSION POLICY OF ILL OR AFFECTED CHILDREN

We ask that when a child becomes sick at home that the parent/guardian contact the site immediately. Head Start and Early Head Start sites reserve the right to admit or exclude children with contagious conditions from the program, based on each individual case, for the sole purpose of providing a healthy environment for all other children. Also, for the Home Based program there may be times when a home visitor should not conduct a visit because the family/child is sick, therefore, rescheduling the visit may be the best option.

If a child gets sick, while at school, the child will be kept away from the other children in a quiet and safe area where that child can rest. An adult staff member will stay with the child or be within visual and hearing distance of the child. The child's teacher will call the parent(s) or other emergency contact person to inform them of the child's illness and to request them to come and get the child. If the parent(s) or emergency contact person cannot pick the child up, but is home to receive the child, the Site Manager is responsible for **making arrangements** to transport the child home as soon as possible.

The Head Start Short Term Exclusion of III or Affected Children Policy is included as a part of this handbook to provide further explanation of "common illnesses" and when to determine if medical documentation is required to return to the classroom setting or resume home visiting services based on the following conditions:

- 1. A diagnosed communicable disease or suspected signs of a communicable disease. (i.e. chicken pox, German measles, measles, mumps.)
- 2. Diarrhea: The child may return to class 24 hours after the last episode if no other symptoms are present.
- 3. Vomiting (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health care provider determines the illness to be non-communicable, and the child is not in danger of dehydration.
- 4. Symptoms and Signs of severe illness such as unusual lethargy, listlessness, uncontrolled coughing, continued headaches, irritability, persistent crying, chest discomfort, constant runny nose, difficult breathing, wheezing or other unusual signs until medical evaluation indicated.
- 5. Undiagnosed skin rash with or without a fever or behavior change until a health care provider determines that these symptoms do not indicate a communicable disease.
- 6. Earaches and Toothaches, home visitor may go into home. No attendance at Center until earache or toothache is taken care of.
- 7. Mouth Sores with or without drooling unless a health care provider or health official determines that condition is noninfectious.
- 8. Discharge from ears –inflamed tissues around ears or eyes. Home Visitor may go into home. No attendance at Center until physician gives release.
- 9. Pink Eye Symptoms (conjunctivitis) Whites of eyes turn pink or red and feel gritty, then a white or yellow discharge crust forms overnight. Need to be seen by physician. Can return to center 24 hours after treatment is instituted.



10. Ringworm Often appears to begin as a small scaly patch on the edge of the scalp near the hairline. Ringworm can also infect other parts of the body including feet and groin. Need to be seen by physician. Parent/Guardian must provide documentation that the child has been seen by a physician and received treatment before the child can return to the center. Ringworm must be covered with a bandage at all times while the child is at the Center, or have a home visitor.



- 11. Meningitis Symptoms: Severe headache, stiff neck, fever, vomiting, rash, irritability. Very sudden and very severe. Contact doctor immediately. Contact Public Health Authority to find out if other cases have been reported.
- 12. Hepatitis Symptoms: fever, nausea, vomiting, headache, jaundice (yellowing of the skin and eyes). Contact doctor immediately. No home visits or Center attendance for a minimum of 7 days to one month for Hepatitis A and Hepatitis C after onset of jaundice. Doctor will give release.



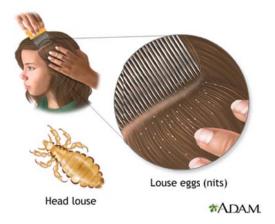
13. Impetigo – Symptoms: skin lesions, patch of tiny blisters – a strep infection. Need to be seen by family doctor. May have a home visitor or can return to center 24 hours after oral medications are started.



14. Chicken Pox – Symptoms: skin rash, small red fluid filled spots, after a few days they burst or dry out, then crust over. Itchy, may have a slight fever. May have home visitor or return to Center seven days after onset of rash or until all sores have dried and crusted.



15. Head Lice — We will no longer exclude children with Head Lice (see American Academy of Pediatrics guidance [AAP] below). If your child is found to have head lice or nits you will be immediately contacted and provided with a lice free take home kit at the end of the school day. A Health/Nutrition Coordinator will contact you for individualized discussion on treatment and future prevention. Symptoms: Persistent itching of the scalp, sometimes accompanied by infested scratch marks or what appears to be a rash. Nits are usually often found at the back of the head and neck and behind the ears. Treatment includes medicated lice shampoo. Persistent cases of Head Lice will require referral to physician's office for specialized treatment. Notice: If pregnant or child is under 1 year of age — contact physician regarding use of medicated shampoo.



16. Mumps – Symptoms: Malaise (generalized weakness), anorexia (loss of appetite), headache, and low-grade fever, followed by an earache that's aggravated by chewing or when drinking sour or acidic liquids. May return to the center, or have a home visitor, nine (9) days after onset of parotid gland swelling.

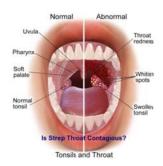


17. Fifths Disease – Symptoms: red rash on the face, primarily on the cheeks, gives the "slapped face" appearance and can last 1-4 days. The rash may appear on upper and lower extremities. Communicability is uncertain. Treatment: None needed, take comfort measures for rash. Limit direct contact.



18. Pin Worm (Enterobiasis) – Symptoms: intense itching around anus, may lead to loss of sleep, irritability, scratching, skin irritation and sometimes vaginitis. To be seen by doctor. Crowded living conditions often enhance its spread to several members of a family. Entire family may need to be treated at the same time. Doctor will determine when child is ready to return to center.

19. Strep Throat or other streptococcal infection – Symptoms: Fever and sore throat. This may also be present with rash and earache. Child may have home visitor or return to Center 24 hours after antibiotic treatment is started and cessation of fever.



- 20. Tuberculosis Symptoms include weight loss, fever, night sweats, cough and chills. May not return to Center, or have a home visitor, until a health care provider or health official states that the child can attend the program.
- 21. Scabies or other infestations Symptoms: Itchy, red, raised eruption of the skin caused by a mite. Can appear anywhere on the body. The most characteristic burrow appears as a gray or white, tortuous, threadlike line. May return to Center, or have home visitor after treatment is completed.



- 22. Pertussis (Whooping Cough) Symptoms: A highly contagious respiratory infection which produces an irritating spasmodic cough and often ends in a high pitched, inspiratory whoop. May return, or have a home visitor, after completing of successful antibiotic treatment and child does not need supportive or respiratory treatment.
- 23. Fever Most pediatricians consider any thermometer reading above 100.4 degrees a sign of fever. If your child has a fever, it is probably a sign that the body is fighting an infection. The child may return to class, or have a home visitor, if there has been no fever in the preceding 24 hours.
- 24. MRSA Most MRSA infections appear as boils that are red, swollen, and painful and have pus or other drainage. You may notice blisters, or a wound that looks like a spider bite. A fever and chills are common with MRSA. This skin infection commonly occurs where there has been an open area on the skin such as a cut or abrasion. Contact your health care provider for treatment. May return to the center, or have a home visit with consent of health care provider.
- 25. Rotovirus Symptoms: Diarrhea, low-grade fever, nausea and vomiting lasting 3 to 10 days. May not return to the center, or have a home visit without the consent of the health care provider.

26. Croup – A respiratory infection involving the throat and lungs. Symptoms are a harsh cough, with breathing difficulties. Child must be kept home, or will not be seen by the home visitor until cleared by a doctor.

If a child becomes ill at school, the child will be isolated from the other children on a cot in a quiet, suitable area. An adult will stay with the child or be within visual and hearing distance of the child.

The child's teacher will call the parent(s) or other contact person to inform them of the child's illness and to request them to come and get the child.

If the parent(s) or contact person cannot pick the child up, but is home to receive the child, the teacher is responsible for making arrangements to transport the child home as soon as possible.

If the child becomes ill at home, and is in the home based program, the parent must call the home visitor to reschedule the visit. Home visitors will not make visits when the child is ill.

The parent must present written documentation from the physician that the child is no longer contagious and is well enough to return to the center or have a home visitor.

Head Start reserves the right to admit or exclude children with communicable conditions from the program based on individual cases for the sole purpose of providing a healthy environment for all children.

AAP Updates Treatments for Head Lice

4/27/2015

It's probably making you squirm just thinking about it – your child comes home from school scratching his head. He has lice. It's every parent's nightmare, but it is important to remember that head lice is a nuisance, not a serious disease or a sign of poor hygiene.

An updated clinical report by the American Academy of Pediatrics (AAP) "Head Lice," in the May 2015 issue of Pediatrics (published online April 27), provides information to pediatricians and other health practitioners on safe and effective methods for treating head lice, including new products and medications.

Most cases of head lice are acquired outside of school. In the report, the AAP continues to recommend that a healthy child should not be restricted from attending school because of head lice or nits (eggs). Pediatricians are encouraged to educate schools and communities that no-nit policies are unjust and should be abandoned. Children can finish the school day, be treated, and return to school.

Unless resistance has been seen in the community, pediatricians and parents should consider using over-the-counter medications containing 1 percent permethrin or pyrethrins as a first choice of treatment for active lice infestations. The best way to interrupt a chronic lice problem is with regular checks by parents and early treatment with a safe, affordable, over-the-counter pediculicide. After applying the product according to the manufacturer's instructions, parents should follow with nit removal and wet combing. The treatment should be reapplied at day 9, and if needed, at day 18.

In areas with known resistance to an over-the-counter pediculicide, or when parents' efforts on their own do not work, parents should involve their pediatrician for treatment with a prescription medication such as spinosad or topical ivermectin. These are new medications that were introduced since the last time the AAP published recommendations on head lice in 2010.

Once a family member is identified with head lice, all household members should be checked. The AAP does not recommend excessive environmental cleaning, such as home pesticides. However, washing pillow cases and treating natural bristle hair care items that may have been in contact with the hair of anyone found to have head lice are reasonable measures.

While it is unlikely to prevent all cases of head lice, children should be taught not to share personal items such as combs, brushes, and hats. Regular observation by parents can also be an effective way to detect and quickly treat head lice infestations.

The American Academy of Pediatrics is an organization of 62,000 primary care pediatricians, pediatric medical subspecialists and pediatric surgical specialists dedicated to the health, safety and well-being of infants, children, adolescents and young adults.

- See more at: https://www.aap.org/en-us/about-the-aap/aap-press-room/pages/AAP-Updates-Treatments-for-Head-Lice.aspx#sthash.ZtkTcaaW.dpuf

SAFETY & TRANSPORTATION

To ensure the safety and well-being of each child present in our program, the following guidelines are followed:

- Children are always supervised children are never left alone.
- Anyone removing a child from our program must be authorized on the Emergency Information Form.
- Head Start staff will check this list and ask to see a picture ID.
- Staff have immediate access at all times to a working telephone.
- Both fire and tornado drills are held once a month.
- Classroom evacuation plans for fire, tornado, and other emergencies are posted on the parent board; a medical and dental emergency plan is also posted in each classroom.
- Equipment maintenance is ongoing. Items that need repair are removed immediately.
- There is always CPR and First Aid trained staff on site.
- All medications are kept in locked containers when on site.
- All unsafe chemicals are stored in locked cabinets.
- An incident report is completed and sent home the same day a child is injured.
- Staff will distribute a communicable disease notice to families within 24 hours of call documented exposures.

Transportation

If a child receives transportation services, before they can ride on a Head Start bus, the parent <u>must attend and complete</u> bus safety orientation. In addition all children receiving transportation services will have bus safety training three (3) times a year.

Occasionally a child transported by bus must be returned to his or her Head Start site because there was no authorized person available to receive the child at the designated drop off point. Or a child may not be picked up by the designated time at their Head Start site. In these instances each site has established procedures to have personnel remain with the child for a specified period of time. The parent/guardian will be contacted. If however, the parent/guardian does not arrive in the specified time, child protection authorities will be contacted

NUTRITION

Meal Time Information

Head Start children are served the following meals and snacks based on the program in which they are enrolled:

AM Session: Breakfast and Lunch; PM Session: Lunch and Snack

If a child arrives late to the center, they will still be offered a nutritious breakfast or lunch.

Family style meal service is used in the Head Start program and although it looks different in every classroom setting, it may include children encouraged to serve themselves, taste new foods and learn the concept of considerable table side behaviors. Our goal is to introduce children to a wide variety of foods and to never punish or force them during meal time. Teachers will sit with the children during meal times, model appropriate eating behavior, and initiate conversations, similar to a home setting. Teachers will also use this time for learning so that nutrition education is incorporated into the routine of meals. Parents and other family members are encouraged to volunteer in the classroom and participate in meal times!

Throughout the school year, hands on nutrition activities we call "food experiences" will be planned by teachers which will allow children an opportunity to develop literacy, math, science and social skills.

Menus

The menus for the program are approved by a Registered Dietitian who ensures that the meals are nutritious, attractive and tasty at the same time providing 1/3 of the Recommended Daily Allowance for nutrients for preschoolers. Menus will be posted on the health board at each site and copies are available to parents upon request. The menus follow the guidelines for CACFP (Child and Adult Food Program) and are generally as follows:

	<u>3 – 5 year olds</u>	
Breakfast (3 menu items)	Lunch (5 menu items)	Snack (2 menu items)
1. 6 oz. 1% Milk	1. 6 oz. 1% Milk	1. ½ cup fruit or fruit juice
2 .½ cup fruit or fruit juice	2. 1.5 oz meat, cheese or eggs	2. Pretzels, Crackers, Yogurt, or Granola
3. 1/3 cup cereal, 1 pancake,	3. ¼ cup rice or pasta, or ½ slice bread	Bar, etc.
small bagel, or Muffin	4. ¼ cup vegetables	
	5. ¼ cup fruit	

Special Dietary Needs

CACFP guidelines prohibit outside food from being brought onto school grounds. The Head Start program must make all accommodations according to written documentation from medical provider. It is the parent's responsibility to immediately inform Geminus Head Start staff of any current or new Food Allergies or Intolerances. The Geminus Head Start program will not honor individual food preferences unless for medical or religious reasons.

If the child has a diagnosed food allergy, parents must provide documentation from a **Medical Provider**. If a child requires an Epi-pen, Medical Provider documentation must also be provided.

Religious Beliefs

Dietary changes due to religious beliefs will be followed when a parent/guardian submits a written request to Head Start staff.

Bringing Home-baked Items to School

The United States Department of Agriculture (USDA) regulations state that home-baked items **cannot be brought** to school. Please contact your site for the list of approved snacks that may be brought into the classrooms.

PARENT, FAMILY AND COMMUNITY ENGAGEMENT

Parents and community will be integrated into every aspect of the Geminus Head Start program. Through active engagement, parents especially gain a better understanding of child development and early education as it relates to their children. Head Start's vision is to create and maintain a family partnership with all families with goals to:

- Support parents as primary educators, nurturers, and advocates for their child.
- Provide every family with opportunities for a significant experience in Head Start.
- Ensure that parents are involved in making policy and program decisions for their Head Start program.

Our Head Start program reflects this vision through efforts to carry out the following standards:

- Culture All aspects of the program support the cultures of the families and the community in which the program operates.
- *Governance Parents have opportunities for participation and shared decision making in every area of
 the program. Parents, staff and Policy Council members work together and provide leadership to
 communicate with their community about the interests and needs of Head Start; and assist in
 strengthening existing services or bringing in new services that are needed.
- Individualized Family Partnerships The staff and program meet the expressed interests and needs of
 each parent through the on-going process of personal and family goal setting and partnering of activities
 to meet these goals. Discussions to identify interests, needs, and goals are within the first 30 days of
 enrollment.
- Disabilities All aspects of the program respond to and support children with disabilities and their families.
- Community Resources Families build the confidence, skill, and knowledge they need to access community resources on their own behalf.
- Family Engagement Night- Our program provides monthly opportunities for families to engage with staff, peers and children in means to support school readiness and prevent the achievement gap.
- Male Involvement Our program will make efforts to reach out to and include fathers, supportive male family members, and male caregivers in parent involvement activities, especially those activities involving the development of their children.

*Governance

The shared decision making between parents and staff is mandatory for Head Start programs. Every month, each site will have a **parent committee meeting** which may include planning for lesson plans, field trips, upcoming parent education activities, parent child activities and more.

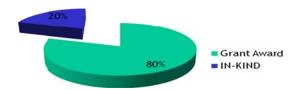
Every month, the Head Start program holds a **Policy Council meeting** with parent representatives elected from each site to work in partnership with staff and board members to make suggestions and express ideas for program improvements, budgets, staff hires and activities for family and community involvement. Staff develop policies and procedures so that Policy Council members can review, and approve or disapprove. The Council is comprised of at least 51% current Head Start parents and 49% past parents and community representatives.

In-kind

Volunteer participation is a vital part of our day-to-day success of the program. There are many ways you can share your time and talents with us and the benefits are priceless. Children benefit from the presence of parents and other volunteers who participate in the classroom and with other activities. We count on our parents, family members, and community members to record the various ways in which they have "volunteered", provided IN-KIND (donated time, space, or materials) for the program. IN-KIND FORMS will always be available to document volunteer hours. Ask your assigned staff for more information.

Geminus Head Start & Early Head Start funds come directly from the federal government. However, the government only provides 80% of the funds necessary to operate our program. A remaining 20% must be generated from in-kind. In-Kind is the donation of time, space or materials used in the program that would otherwise be purchased. A dollar amount is assigned to all volunteer hours whether in the classroom, at the site or at home.

Head Start Performance Standard 1301.20 "Federal assistance under the Act for a Head Start program shall not exceed 80 percent of the total costs of a program and the non-Federal share will not be required to exceed 20 percent of the total costs of the program."



In-kind is provided through the category of activities listed below

		1
1. Classroom Activities	2. Non-classroom Activities	3. Home Activities

Parent Access Volunteers

For classroom activity volunteers, all parents, guardians, and custodians of enrolled children are considered Parent Access Volunteers, and are expressly given permission to have access to the child by the parent, guardian, or custodian of the child. Parent Access Volunteers shall have access limited to the classroom of the child, and office or meeting room areas not frequented by other children. The Parent Access Volunteer shall not be permitted to move about in any other classrooms or areas of any facility unaccompanied by staff. Furthermore, Parent Access Volunteers must remain visibly and audibly observed while in their child's classroom at all times and may never be alone with any child other than their own child. Parent Access Volunteers will be asked to sign a statement that they have received a copy of this Family Handbook.

Certified Volunteers

Certified Volunteers are parents, or community volunteers, who in the course of their volunteering duties have regular access to areas beyond the classroom of their child; and/or Parent Access Volunteers who wish to be routinely present in the classroom setting an average of (8) eight or more hours per month. In accordance with Indiana licensing standards, Certified Volunteers will be asked to complete at minimum a TB screening and background check (at no cost to the enrolled parent or guardian).

Sometimes children experience some difficulty sharing their parents with the other children in the classroom when the parent is in the classroom to volunteer. Parents faced with this type of situation should ask staff for suggestions on how to best manage the situation and allow staff to manage any discipline issues. Parents should also be supportive of the classroom guidelines when they volunteer.

NOTE: The Head Start program does not allow siblings of Head Start students in any Head Start classroom while parents volunteer in the classroom for the following reasons:

- Insurance and liability purpose
- Head Start Performance Standards & Indiana Licensing Regulations with regard to Child/Teacher ratio
- Board of Health concerns about the health and safety of the sibling and Head Start children and staff

In-Kind Activity Examples

Classroom Activities	Non-classroom Activities	Home Activities
Reading or telling stories to children	Assisting in fixing/ updating parent and classroom boards	Completing activities for each of the 50 goals and objectives. Refer to SCHOOL READINESS IN-KIND PARENT GUIDE
Assisting children in all activity areas in the classroom, including art activities, cooking experiences, carpentry activities.	Providing suggestions for classroom activities or field trips	Cutting out items for collages, arts and craft items
Sharing ethnic recipes, traditions, songs, etc. in the classroom	Gathering materials for classroom projects	Typing site meeting minutes
Teaching common words in a foreign language	Making materials for use in the classroom (play dough, doll clothes, etc.)	Preparing packets for various site activities
Assisting the teachers in a walk outdoors, on field trip or other outdoor activities	Making phone contacts regarding special activities	Home – School Connection
Playing the piano or another musical instrument	Office assistance to staff	
Assisting teacher in preparing a class activity (larger or small group)	Copying hand-outs	
Greeting children/helping with arrival routines	Stapling, folding, sorting copies	
Participation in Circle Time	Tape recording a story for use in the classroom	
Assisting children in your designated work area in classroom	Participating in the program's annual review	
Assisting those children that need extra support during the programming time	Assisting with recruitment	
Assist children with tooth brushing	Attendance at POLICY COUNCIL or POLICY COMMITTEE meetings.	
Assist with the various activities that occur during breakfast/lunch/ snack	Providing services for Socialization activities. (e.g. copying handouts, setting up etc.)	
Assisting children with dismissal/departure	Interview Committee	
	Having Parents who are Serv Safe certified to assist in the Kitchen (obtain a copy of certificate). Have Parents be presenters for a training eg tax benefits, banking,	
	recycling , couponing etc.	
	Answering Doors and Phones	
	Having Parents who are CNA certified to conduct Heights and Weights (obtain a copy of certificate).	29

29 Last revised 07-15-16 rcc

GEMINUS EARLY HEAD START/HEAD START IN-KIND FORM

RU: EHS/HS Location:	IT/	eacher/Home Vis	itor	Child Name:		
KU: Ens/ns Location.		eacher/nome vis	sitor.	Cinia Name.		
Please circle the appropriate respon	nse: 1) I'm a Commur	nity Volunteer	2) I'm a FORMER HS/E	HS parent/	guardian
3) I'm a CURRENT HS/EHS parent/gu	ıardian: R	elation to curre	ntly enrolled chi	ld:		
FIL	L IN ALL V	VOLUNTEER O	PPORTUNITIES	THAT APPLY		
A) Advisory Committee			C) Health			
Day(s):	Hr	Min	Day(s)	:	Hr	Min
A) Grantee/Delegate Board				Total C) Hours:		
Day(s):	Hr	Min	Multi	plied by C) Hourly Rate:	(x) \$2	21.70/Hr
A) Interview Committee				Total C) In-Kind:		
Day(s):	Hr	Min				
A) Policy Council/Committee			D) Mainte	nance/Construction		
Day(s):	Hr	Min	Day(s)		Hr	Min
A) Recruitment			, , , ,	Total D) Hours:		
Day(s):	Hr	Min	Multi	plied by D) Hourly Rate:	(x) \$2	20.23/Hr
A) Self-Assessment				Total D) In-Kind:		· · · · · · · · · · · · · · · · · · ·
Day(s):	Hr	Min				
Total A) Hours:						
Multiplied by A) Hourly Rate:	(x) \$	52.31/Hr	E) Meeting	g Preperation		
Total A) In-Kind:		· ·	Day(s)		Hr	Min
-			E) Office V	Vork		
B) Classroom Volunteer			Day(s)		Hr	Min
Day(s):	Hr	Min	, , , ,	Total E) Hours:		
B) Classroom/Socialization (prep/clean)			Multi	plied by E) Hourly Rate:	(x) \$1	5.47/Hr
Day(s):	Hr	Min		Total E) In-Kind:	· · · ·	· · · · · · · · · · · · · · · · · · ·
B) Parent Site Meeting						
Day(s):	Hr	Min				
B) Parent Univ. Classroom Experience			Other (pro	ovide description)		
Day(s):	Hr	Min		, ,	Hr	Min
B) Support to Other Families			Other (pro	ovide description)		
Day(s):	Hr	Min		, ,	Hr	Min
Total B) Hours:				Total Other Hours:		
Multiplied by B) Hourly Rate:	(x) \$	13.91/Hr	Mι	ultiplied by Hourly Rate:	(x)	
Total B) In-Kind:				Total Other In-Kind:		
						
NOTICE: THE INFORMATION OF THIS FORM						
BE SUBMITTED TO OR HELD FOR INSPECTION	M RV VN VC	LNIC V LIE THE LINIT	ELL STATES THE ELL	ANTERING THE EXISE INTEMPLIATION	N NAV RE DII	NISHABLE

VOLUNTEER SIGNATURE

STAFF SIGNATURE

DATE

DATE

VOLUNTEER NAME (PRINT)

STAFF NAME (PRINT)

GEMINUS EARLY HEAD START/HEAD START IN-KIND FORM

RU: HS/EHS Localización:	M	aestra/Educado	or Familiar:	Nombre del Niño:		
Marque con un circulo una respuest 3) Soy HS/EHS actual padre/guardiar		•		2) Soy un ex HS/EHS padre	e/guardian	
MAROUE	TODOS L	.AS OPPORTU	NIDADES OUE A	APPLIQUE A USTED		
A) Comité Asesor			C) Servicios			
Dia(s):	Hr	Min	Dia(s):		Hr	Min
A) Concesionario/Junta de Deleg				Total C) Horas:	<u>l</u>	
Dia(s):	Hr	Min	Multiplicado	por la tarifa por hora:	(x) \$2	1.70/Hr
A) Comité de Entrevista			Total C	Contribuciones en especie:		
Dia (s):	Hr	Min		_		
A)Consejo de Poliza/Comité			D) Manten	imiento/Construcción		
Dia (s):	Hr	Min	Day(s):		Hr	Min
A) Reclutamiento			-	Total D) Horas:	•	
Dia (s):	Hr	Min	Multiplicado	por la tarifa por hora:	(x) \$2	0.23/Hr
A) Autoevaluación			Total D) Contribuciones en especie:		
Dia(s):	Hr	Min				
Total A) Hora:						
Multiplicado por la tarifa por hora:	(x) \$5	52.31/Hr	E) Prepera	ción de junta		
Total A) Contribuciones en especie:			Dia(s):		Hr	Min
_			E) Trabajo	de Oficina		
B) Voluntariado en el aula			Dia(s):		Hr	Min
Dia (s):	Hr	Min		Total E) Hours:		
B) Aula/Socialización (prep/limpieza)			Multiplicado	por la tarifa por hora:	(x) \$1	5.47/Hr
Dia(s):	Hr	Min	Total E) Contribuciones en especie:		
B)Junta de los Padres						
Dia (s):	Hr	Min				
B) Univ. de Padres/Experiencia en el			Otros (pro	veer descripción)		
Dia (s):	Hr	Min			Hr	Min
B) Apoyo a Otras Familias			Other (pro	veer descripción)		
Dia(s):	Hr	Min			Hr	Min
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<u>Aviso</u> : LA INFORMACIÓN DE ESTA FORMA PRESENTARSE CON O LUGAR PARA INSPE castigados con un	CCIÓN POR U	JNA AGENCIA DE	LOS ESTADOS UNIDOS			

NOMBRE DE VOLUNTARIO (IMPRIMA)

FIRMA DE VOLUNTARIO

FECHA

NOMBRE DEL PERSONAL (IMPRIMA)

FIRMA DE VOLUNTARIO

FECHA

HOME-SCHOOL CONNECTION: WEEKLY FAMILY ROUTINES

RU: EHS/HS Location Teacher/Home Visitor Child's Name: Please circle the appropriate response: 1) I'm a Community Volunteer 2) I'm a FORMER HS/EHS parent/guardian 3) I'm a CURRENT HS/EHS parent/guardian Relationship to the currently enrolled child: DAY 1 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 2 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 3 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 4 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 4 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 4 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins DAY 5 At Home Activity 2 Hrs Max Time Spent: HrsMins Parent Name Parent Signature Date MEEKLY TOTAL AMOUNT 5 SMI Initial	WEEK OF:			
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Conexión entre la casa y la escuela: Semanal rutinas familiares

Semana de:						
RU:	EHS/HS Lugar	Profesor Visitante/Home	Nombre del niño:			
Por favor, rodear con la adecuada:	un circulo la respuesta 1) soy un voluntario comunitario 2) Soy un E	EX HS/EHS padre/madre/tutor 3) so	y una corriente HS/EHS padre/madre/tutor			
auccuaua.						
Relación con el niño a	ctualmente matriculados:					
						
		Día 1				
Actividad en casa		Aula				
2 Hrs. Max		La actividad de la conexión				
Tiempo empleado:						
Hrs Minut	tos					
		Día 2				
Actividad en casa		Aula				
2 Hrs. Max		La actividad de la conexión				
Tiempo empleado:						
HrsMinut		 Día 3				
Actividad en casa		Aula				
2 Hrs. Max		La actividad de la conexión				
Tiempo empleado:						
HrsMinutos						
		Día 4				
Actividad en casa		Aula				
2 Hrs. Max		La actividad de la conexión				
Tiempo empleado:						
HrsMir	nutos					
	Día 5					
Actividad en casa		Aula				
2 Hrs. Max		La actividad de la conexión				
Tiempo empleado:						
	nutos					
Nombre de padre Firma de los padres Fecha						
Para USO DEL PERSONAL						
TOTAL DE HORAS	(1) 440 04					
SEMANALES						

PARENT AND COMMMUNITY COMMENT PROCEDURE

The Parent and Community Comment Procedure is a way for individuals to express their comments or concerns. Any parent receiving services through the Head Start & Early Head Start program may initiate a concern. Such concerns may include but are not limited to the following program management and service areas: communication, disabilities, education, eligibility/enrollment/attendance, facilities, fiscal operations, health, nutrition, parent involvement, personnel, social services and transportation.

While the procedure below refers to "parents" throughout, note that the majority of these steps (one through five) are equally applicable to parents and other community members; the sixth step is required only for parents.

Attention to the confidentiality of all parties involved will be paid to throughout the steps of the following procedure, and resolutions for grievances will be reached within a reasonable timeframe.

STEP 1 - Comment box

The first step in the process for parents is to place a comment in the comment box.

STEP 2 – Meet with appropriate site leader or Delegate Director

If meeting with the appropriate staff person does not yield a mutually agreeable outcome — or if it is uncomfortable to speak directly to the relevant staff person — the parent is encouraged to meet with the appropriate site leader (e.g. Education-Disabilities Supervisor or Case Manager). We encourage parents to be straightforward in discussing the issue or suggestion with the site leader and to set a date for a follow up check-in. The site leader or Delegate Director should share this information with the Cluster Director, and if appropriate, the Cluster Director should intervene at this point.

STEP 3 - Capture comment in writing, share with Program Director

After meeting with the site leader or Delegate Director, if a satisfactory outcome is not reached, the concern or suggestion should be captured in writing (**Comment Form**) and a copy will be provided to parent and delivered to Cluster Director. At this point in the process, the Cluster Director will follow up directly with the parent or community member, to drive toward resolution. All such complaints in writing will be shared with the Policy Council/Policy Committee in report form and documentation maintained by the Cluster Director.

STEP 4 - Share concern with Policy Council/Policy Committee, Board

If working with the Program Director to address the concern <u>is not effective</u>, the issue will be formally presented as an agenda item at the next meetings of the Policy Council/Policy Committee and the Geminus Board of Directors. Special meetings of both governing bodies can also be called expressly for this purpose. Both bodies will discuss the issue and work to come to resolution.

STEP 5 - Collaboration between Management, Policy Council/Policy Committee, Board

The Chair of the Geminus Board and the Chair of the Policy Council/Policy Committee will both sign off on the resolution to the complaint, and this resolution will be documented by management in writing.

STEP 6 – Communication back with the Parent (originator)

The Cluster Director will communicate the resolution, follow-up, and/or outcome with the person who originated the comment. This will be done in writing and in person.

STEP 7 – Communication back with Staff

The Cluster Director will communicate the resolution, follow-up, and/or outcome with the appropriate staff. This will be done in writing and in person.

*A sample Comment Form is located on following page.
Official forms will be available at each site, socialization location, and upon special request.

Geminus Head Start/Early Head Start/CCP Comment Form

Name:	Phone #:	Date:	
Comment(s): Site Loca	ition (School):		
*Geminus Head Start S	Staff will contact you within 14 E	Business Days from the date stated above.	
Staff Use Only:	Code Type:	Follow-up Date:	

FREQUENTLY ASKED QUESTIONS

How was my child selected for the program?

When you applied for the program, you gave staff information about your family size, your income, your child's age and other things. Each piece of information is assigned a number point value according to an Enrollment Selection Criteria Point System. Individual points were assigned to each source of information provided by the family and then calculated for a grand total. The enrollment applications with the highest number of calculated points are then selected for enrollment in the program first. Once the classrooms are filled, the remaining children are then placed on a waiting list. When an opening for a new child occurs in the classroom, staff refers to the waiting list and the child with the highest points on the waiting list is enrolled in the classroom.

How often will my child play outdoors?

Expect that your child will play outdoors on a regular basis, unless the National Weather Service indicates a potential safety or health hazard (i.e. wind advisory, heat advisory). If your child's classroom is in a public school building, the Head Start classroom will follow the school's outdoor policy. The following guidelines will be followed regarding outdoor play:

Staff will be responsible to monitor appropriate dress for outdoor weather activities. Programs make effort to have a supply of weather related clothing available to children who may not have appropriate clothes for the weather. In cases of extreme winter weather, children will be allowed outdoors for brief intervals.

In cases of heat and high humidity, children will be allowed outdoors for intervals of no longer than 15 minutes. Drinking water should be readily available for the children.

Supervisory staff reserves the right to stop children from participating in outdoor activities based on individual circumstances for the purpose of providing a safe environment for all children.

Children with special needs will be included in outdoor activities based on information obtained in the child's health records and their Individualized Education Plan.

Will my child be going on field trips?

Yes, field trips are an important part of the Head Start program. Field trips are tied to the classroom curriculum. For example, if the topic of study is community SPECIALISTs, a trip to the fire station to learn about firefighters may be suggested. Parents will work with teaching staff to provide suggestions for classroom field trips keeping in mind Head Start guidelines regarding the cost of the field trip, the distance of the field trip location from the Head Start classroom and the time the children will spend at the location. Parents will provide approval for field trips. A Permission Slip signed by the child's parent(s) is required for a child to go on a field trip. In addition unless an emergency situation exists, such as the need for medical treatment or the inability of a designated adult to receive the child at the end of the day, children will return to their Head Start site after a field trip. From the site, they will return home.

How will the program help my child and I manage being apart from one another?

The following are additional suggestions to help you and your child with the transition into the program:

- Plan to attend Orientation and Phase-in to help both you and your child feel more comfortable with the classroom and staff.
- Make sure your child knows who will pick him/her up (at school or off of the bus).
- Tape record yourself reading one of your child's favorite stories and give the tape to your child's teacher. Your child can then listen to your voice reading a familiar story, which can help your child feel more comfortable.
- Talk about some of the things your child will be doing at school.

It is normal for parents to have a tough time separating, too! Teaching staff and Family Support staff will also be available to help parents feel safe and comfortable as their children enter Head Start.

How should my child dress for the classroom?

Children should be dressed comfortably to play both inside and outside. Clothing should be washable and easy for your child to put on and take off (for going to the bathroom). Shoes should be comfortable for running, climbing and jumping. Shoes should also be safe, so we suggest that children not wear flip flop type sandals as children can trip and fall more easily in this type of footwear. The children will play outdoors throughout the year, so dress your child in keeping with the weather. Outdoor clothing (boots, jackets with zippers, hats and mittens) should be easy to put on and take off. All clothing that is left at school and all outdoor clothing should be marked with your child's name. A lost and found box is located at your child's classroom site, just in case your child should lose an unmarked item of clothing.

Can my child bring things from home?

Unless there is a show and tell project approved by the teacher, children are discouraged from bringing toys and other items from home. Head Start classrooms are rich in materials appropriate for children's development, and sites cannot assume responsibility for lost or damaged items. The only items needed are a pillow and blanket for sessions that have rest periods (typically those that run 5 days per week) and extra clothing in case of accidents.

What is the purpose of the home visit?

To work in collaboration with a home visitor to establish goals for you and your child, and to reach the goals you have established as your child's first and primary teacher. The main focus of your home visit is your child's development. During each visit, an activity or experience will be presented for you and your child to enjoy together.

What components are addressed during the home visit?

You and your home visitor will address the following components on each visit:

- Child development in terms of milestones
- Social/Emotional Development
- Health and Nutrition
- Safety

How often do home visits occur for the Home Based programs?

Home visits occur on a weekly basis for 90 minutes.

How does the home visitor prepare for transitions from home visiting to a center-based setting?

At 18 months of age, if the parent is interested in center-based programming, the Program Assistant/Home Visitor and parent will begin the transition process. This will include trips to the center, transition activities for all parties, meetings, etc. to ensure the child/family are transitioned successfully out of home-based services.

What is the purpose of the socializations?

To, "build on the experiences and goals that are addressed during home visits, as well as, attend to the needs of both children and families."

Socializations give you a chance to:

- Be out of the house and meet other parents
- Assist in organizing activities, gathering materials, and preparing snacks
- Share what you know and learn with other parent and EHS or HS staff members
- > Attend presentations about safety, nutrition, discipline, or other topics of interest
- Share activity ideas and things you learn with family members; and the most important of all

> Strengthen your relationship with your child.

Is attendance to the socialization mandatory?

Yes, this is a time for you, your child, and other parents and their children to come together. These are opportunities to build on the goals you set during your home visits.

How often do socializations occur? How long do they last?

Socializations occur daily however parents are required to attend two sessions per month, for a total of 24 socializations per year for Early Head Start families and 16 sessions total for Head Start families. Socializations will last anywhere from 90 minutes to 3 hours depending on the families attending the group

Will there be food served during socializations?

Yes, food will be provided during socializations. The United States Department of Agriculture sets forth requirements based upon the average daily allowance of nutritious foods. All snacks served at socializations will be approved by the USDA.

When programs/locations for socializations are closed, how will I find out?

Home Visitors or your Program Assistant will contact you directly if socializations are going to be cancelled. If your socialization is to occur in a Head Start site location, the Head Start Management staff determines weather conditions to be unsafe.

The following radio stations may carry information about school closings in your area:

Announcements will be on the area radio stations before 6:00 am

- WJOB 1230 AM
- WZVN 107.1 FM
- WGN 720 AM
- Indiana 105.5 FM



Geminus Head Start – Early Head Start

Site Name:	
Acknowledgement of Receipt for	r Training on the Geminus Family Handbook
l,	have participated in the Family Handbook
presentation during Parent Orientation and receive	d training on the policies and procedures included in the
Family Handbook on the following date:	
	rly Head Start of any changes to phone numbers, primary
physician, or name(s) of those who should be conta	cted in the event of an emergency. In the instance of a
medical/dental emergency, I give Head Start persor	nnel permission to take whatever action is deemed necessary,
including the activation of emergency medical servi	ces to transport and/or treat my child.
My Child's Name is :(PRINT)	
(Parent Signature)	(Phone Number)
(Email Address)	
•	

Program Assistant (Signature)

(Program Assistant **PRINT**)