

EARLY LEARNING  
**SERVICES**  
HEAD START  STATE PRESCHOOL



**Early Learning Services Department  
Head Start | State Preschool Programs**

**Parent Handbook  
2020 – 2021**

**EARLY LEARNING SERVICES DEPARTMENT  
HEAD START AND STATE PRESCHOOL PROGRAMS**

**1 (408) 453-6900**

**1 (800) 820-8182**

**1 (408) 453-6757 - Fax**

<b>Classroom</b>	<b>Phone Number</b>
<b>Teacher</b>	
<b>Associate Teachers</b>	

<b>Site Director (SD)</b> Supervises Teaching Staff	<b>Phone Number</b>
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<b>Family Advocate (FA) / Family Engagement Specialist (FES)</b> Provide health and social services assistance	<b>Phone Number</b>
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## **WELCOME TO EARLY LEARNING SERVICES DEPARTMENT HEAD START AND STATE PRESCHOOL PROGRAMS**

Welcome to the Santa Clara County Office of Education Early Learning Services Department (ELSD). We provide educational services for children ages 2.9 to 5 through our Head Start and State Preschool Programs. We share your interest in the growth and development of your child and know that we will all benefit from working and learning together.

As the parent of a child participating in our programs, you will be:

- Treated with respect and courtesy
- Welcomed in the classroom
- Informed regularly about your child's progress
- Participating in setting your child's school readiness goals through home visits and parent conferences annually
- Given information about your child's individual development and activities so you can support your child's learning at home.
- Informed and connected with community services concerned with health, education, and improvement of family life
- Encouraged to participate in a variety of parent trainings and meetings
- Informed about and participate in decisions affecting the planning and operation of the program
- Encouraged to volunteer in the classroom

Our staff works in partnership with the family and community. We value you as the most important influence in your child's life and invite you to become involved in the program in many ways, including classroom activities, local parent meetings, policy council, and special activities and events.

In this handbook, we use the term parents to refer to foster parents, legal guardians, and other adults who serve as parents to children enrolled in our programs.

Please regard each staff member as a resource for any questions or concerns you may have about child or program services. If you have any questions about our programs, we are available to meet at a time convenient for you and program staff.

### **What Programs do we offer for children ages 2.9 to 5 years-old?**

The Early Learning Services Department provides services to children through two programs: Head Start and State Preschool.

Head Start is funded by the federal government to provide early childhood development services for children ages 2.9 to 5-years old to prepare them for kindergarten. State Preschool, funded by the State of California Department of Education, serves children 3 to 5-years old with quality education and child development services.

Our programs seek to provide the highest quality services to foster each child's social, emotional, cognitive, educational, and physical development. Each program supports families by building partnerships that help them attain their personal family goals.

All families must meet income eligibility criteria to receive services. It is the policy of our programs not to discriminate based on race, color, national origin, religion, sex, gender identity, sexual orientation, disability, age, marital status, or family/parental status. Religious instruction or worship is prohibited.

### SCCOE Early Learning Services Department Mission Statement

SCCOE Early Learning Services Department is committed to the delivery of comprehensive child development education, health, and social services that enrich the lives of children and families that we serve in our community.

### SCCOE Early Learning Services Department Vision Statement

To provide a foundation that embraces children and families to develop skills and a love for lifelong learning.

### SCCOE Early Learning Services Department Value Statement

We Value:

- A child’s natural curiosity
- Teacher’s ability to understand that each child is unique
- Families’ moral and cultural value system
- Parents and staff working together to set the foundation for lifelong learning
- Parent’s contributions to the program as their child’s first teacher
- Parent advocacy
- Cultural competency of the staff

## HEAD START AND STATE PRESCHOOL PROGRAMS’ SERVICES

### Program Hours of Instruction

The programs offer families different classroom options. Please be sure to check the hours of instruction of the classroom your child will be attending classes.

Program	Option	Days Served	Hours	Hours of Instruction
Head Start	Double Session <i>Morning session only due to COVID-19</i>	Tuesday to Friday	3.5 hours/day	Varies according to sites Morning Sessions 8:00 am –11:45 am 8:15 am – 12:00 pm  Afternoon Sessions 1:00 pm – 4:30 pm 1:15 pm – 4:45 pm
State Preschool	Part Day <i>Morning session only due to COVID-19</i>	Monday to Friday	3.5 hours/day	Varies according to sites Morning Sessions 8:15 am – 11:45 pm 8:30 am – 12:00 pm 8:45 am – 12: 15 pm  Afternoon Sessions 11:45 am – 3:15 pm 12:00 am – 3:30 pm 12:15 am – 3: 45 pm
Head Start / State Preschool	Full Day	Monday to Friday	9 hours/day <i>5.5 hours/day due to COVID-19</i>	Varies according to sites 5:45 am – 4:30 pm 7:30 am – 5:00 pm 7:45 am – 4:45 pm
Head Start / State Preschool	Single Session	Monday to Friday	6.5 hours/day <i>5.5 hours/day due to COVID-19</i>	Varies according to sites 8:00 am – 2:30 pm 8:15 am – 2:45 pm 8:30 am – 3:00 pm

Mealtimes are dependent on your child's attendance and program hours of instruction. So, don't miss out on the opportunity for your child to get a healthy snack/meal by attending school according to the posted schedule in each classroom!

### **Parents in Our Programs**

The gains made by your child in the programs must be understood and built upon by the family. To achieve this, we involve the parents and other members of the family in the experiences the child receives in the classroom. We encourage all parents to visit their child's classroom regularly, engage in in-home activities, parent conferences, and parent committees within the program. Please feel free to share with us any ideas, activities, thoughts, opinions, and recommendations you may have for the program—we want to hear from you.

### **Parent Engagement Opportunities**

Head Start believes that parents are an integral part of the program, and family engagement is the key to healthy child development and a lifetime of academic success. We make every effort to engage parents in all aspects of the program, and families are encouraged to be actively involved in their child's education, volunteer in the center, attend parent/teacher conferences, parent meetings, and participate in the decision making of the program's operations, Policy Council, and program/community activities, such as

- Local Parent Meetings
- Policy Council
- PC Committees

### **Volunteers in the Classroom**

Volunteers are essential to the program. Volunteering enriches the educational experience for children and provides parents opportunities to learn about the program while developing their skills and knowledge in an array of volunteer opportunities.

We invite parents to get involved in the care and development of their child by participating in activities available in the classroom:

- Spend time reading with a child
- Participate during circle time activities
- Play an outdoor game with the children
- Assist with Raising-A-Reader Book Program
- Do small group activities with the children
- Make playdough with the children

***Due to COVID-19, volunteering in the classroom is on hold until further notice.***

### **Requirements for Visitors and Volunteers in the Classrooms**

We understand that it is the right of every parent to visit his/her child in the classroom, and our programs' settings are open to parents during program hours. However, for the well-being and safety of children, families, and staff, Head Start and State Preschool require visitors and volunteers to undergo a screening process before visiting/volunteering and adhere to the SB792 volunteer requirements. (Head Start Performance Standards §1302.50(b)(4); §1302.94 and Health and Safety Code §1596.7995; §1597.055; §1597.54; §1597.622; §121525.121555),

- Every visitor/volunteer, regardless of whether he/she is assisting his/her child, is required to sign a Guest Form, and consent to a Megan's Law background check before the visit. Visitors/volunteers are also required to provide immunization records clearing them of TB, and up-to-date vaccinations for influenza, pertussis, and measles in addition to the above requirements.
- If a volunteer spends more than 10 hours a month in the classroom, he/she is subject to fingerprinting.



We ask parents to use their health coverage to cover fees for TB screening and immunizations. Assistance is available for TB screening and immunizations fees if health coverage is an issue.

### **Local Parent Meetings**

Your child's enrollment in our program automatically qualifies you as a member of the Local Parent Group! Take the next step by participating in meetings where parents have opportunities to:

- Elect a site representative to the Policy Council
- Become involved in designing a quality program for your child
- Locate resources in the community to carry out program activities
- Share common interests
- Work with Policy Council to support the development and implementation of the program
- Plan program activities to discuss what parents would like to do
- Assist program staff in selecting employees by participating in the interview process

These meetings are held monthly at each center during the school year. Check with the Teaching or Family Services Staff for dates and times.

***Due to COVID-19, Local Parent meetings will be held virtually through Zoom platform until further notice.***

### **Policy Council (PC)**

The Head Start Policy Council is a body comprised of parents from every center who come together to make decisions about the overall direction of the programs in Santa Clara and San Benito Counties. The Council must approve or disapprove major program decisions, from hiring the director and staff to determining changes in program services and any special efforts that the programs should pursue.

***Due to COVID-19, Policy Council meetings will be held virtually through Zoom platform until further notice.***

### **Policy Council Members**

Policy Council membership is composed of parent representatives from Head Start, Early Head Start, State Preschool, and Partners sites, and representatives from community agencies.

Policy Council representatives, for each site, are elected at the Local Parent meetings. PC meetings are scheduled monthly, throughout the year, to be able to discuss items requiring approval in a timely manner.

### **Policy Council Representatives will:**

- Receive training about roles and responsibilities
- Take part in major policy decisions affecting the direction and operation of the program
- Help develop plans that will benefit the families in the program.
- Be able to learn about the operation of the Head Start Program, including the budget
- Gain or increase skills in such areas as budget development, interviewing techniques, parliamentary procedures, development of enhanced program policies and procedures.

## **PARENT SERVICES**

### **Family Partnership Agreements (FPA)**

The programs offer every family an opportunity to participate in a family assessment, discuss the family's goals, and develop a family partnership agreement. One of the most important aspects of working with families is our

ability to develop trusting relationships that allow them to decide what they want to accomplish, how we can assist, and to what extent other community agencies will be involved.

Parents are encouraged to focus on their strengths and priorities when developing Family Partnership Agreements. The Family Services Staff is available to assist and support parents' efforts in achieving their goals. This process is ongoing throughout the year.

### **Accessing Community Resources and Services**

The programs are committed to meet the needs of children and their families through a comprehensive referral system that offers a variety of local community services and resources. Our Family Services staff is ready to assist you with any emergency referrals to local community agencies and also getting the resources and assistance you need to succeed.

***Due to COVID-19, we will continue to support families remotely until further notice.***

### **Transportation Services**

Head Start does not provide transportation services to parents; however, we refer families in need of transportation to transit agencies in the community. In case of emergencies, families in Head Start are provided with bus tokens for two weeks to ensure children's attendance to the program and in other circumstances such as medical/dental appointments, etc. The program could provide an additional supply of tokens under special situations with approval.

### **Home Visits and Parent Conferences**

We understand that communication between parents and teachers is essential for school success; therefore, home visits and parent-teacher conferences provide opportunities for parents and teachers to share strengths and needs of the child as well as strategies to assist in the child's development.

Parents in the Head Start Program will participate in two home visits and two parent-teacher conferences per school year, and those in State Preschool Program will participate in two parent-teacher conferences.

***Due to COVID-19, home visits and parent conferences will be held via Televisits and Teleconferences to communicate with parents. Once COVID-19 mandates are lifted, home visits and conferences will resume in-person meetings. The teaching staff will contact you to set a time to accommodate your schedule and availability for the Televisit or Teleconference, which will take place over the phone. At that time, the teaching staff will complete the appropriate forms.***

Additional meetings will be scheduled to discuss your child's strengths, assessments, evaluation results, and you will be asked to provide input by sharing your observations of your child's development. Together with the teacher, you will develop goals and activities that you can do at home to help your child meet her/his educational needs towards school readiness.

As a partner for your child's learning, you are encouraged to share unique cultural and child-rearing practices that might assist the teachers in understanding and providing more responsive care to your child.

### **Parent Bulletin Board**

The Parent Bulletin Board has information about the classroom, the program, and the community. This information includes the weekly lesson plans, community resources, such as food, health, social services, and Local Parent and Policy Council meeting dates. Please take the time to review these materials.

### **Parent Education Sessions**

Parent education sessions will be scheduled throughout the school year and will cover topics such as nutrition, family literacy, child development, health, etc. These sessions may be part of the Local Parent Meetings; all parents are invited and encouraged to attend.

***Due to COVID-19, we will offer virtual parent education sessions.***

### **Identifying and Resolving Complaints**

All concerns or complaints will be treated with respect and confidentiality, according to the Santa Clara Office of Education Uniform Complaint Procedures.

The ELSD shall investigate and seek to resolve complaints beginning at the local level, which is the classroom.

Starting at the classroom level, the parent addresses his/her concern with the teacher by:

1. Describing specifically what has occurred, when it occurred, and why it is a problem with the teacher.
2. If, after 48 hours (two days), no response has been received or if the parent believes that the concern has not been addressed, the matter is taken to the Supervisor/Site Director if it is related to the teaching staff;
3. If after three working days no response has been received from the Supervisor/Site Director or if the parent believes that the concern has not been addressed, the parent should call the Program Operations Manager who will have five days to conduct a review of the matter, consult staff and parents involved in the matter, and make a determination about the matter. Within seven working days, the Program Operations Manager will contact the parent and discuss resolution of the issue based on the investigation.

## **EDUCATION**

### **Educational Child Outcomes**

Education provides children with the opportunities to develop the skills and confidence necessary to succeed in Head Start and be prepared for kindergarten. The programs provide individualized, developmentally appropriate educational activities for the age of each child. Children learn in a combination of self-initiated and teacher directed activities.

### **Curricula**

Our programs implement a research-based curriculum according to developmentally appropriate practices aligned to California State Learning Foundations for Preschool, California Curriculum Framework, Head Start Performance Standards, and the Head Start Early Learning Outcomes Framework.

We implement the Creative Curriculum for preschool children. This comprehensive curriculum includes teaching methods that are strength-based and appropriate for all children. It promotes development in language, literacy, mathematics, science, creative arts, social-emotional, approaches to learning, physical, and health skills appropriate for all children, including dual language learners, and children with special needs.

### **Classroom Learning Environment**

The classroom is set up into specific interest areas to support the curricula and allow children to find and use materials of particular interest to them. When you visit your child's classroom, please ask the teacher to explain the classroom learning areas that your child will be experiencing.

The interest areas consist of art, blocks, computer center, discovery, dramatic play, library, music and movement, sand and water, and toys and games.

**Due to COVID-19, classroom learning environments will be set-up following social distancing guidelines to ensure classrooms are safe and conducive for learning.**

### **Early Childhood Environment Rating Scale (ECERS)**

The classrooms are arranged based on the Early Childhood Environment Rating Scale (ECERS), which is a nationally recognized guideline for quality early childhood programs. The staff works together to create learning areas, routines, and interactions that provide young children with the best opportunities for growth and skill-building. Classroom ratings are completed once a year.

### **Distance Learning due to COVID-19**

***Parents will be offered options for home-school connections based on children's ages and families' needs related to school readiness to provide continuity of educational services during COVID-19.***

### **Preschool Classroom Daily Routine**

Teaching Staff uses the daily schedule to plan and implement the curricula and a variety of educational strategies. The daily routine provides opportunities for children to interact with their peers and adults and gives them a sense of security in the classroom.

The daily routine consists of choice/small group time, large group meeting, outdoor time, read aloud time, meal/snack time, and tooth brushing. Full day and single-session program options include a nap/rest time.

The teaching staff will be discussing the daily classroom routine with you, and you will also find a copy posted on the Parent Bulletin Board.

***Due to COVID-19, teaching staff will work with the same group of children each day.***

### **Nap / Rest Time**

In the full day and single session classrooms, all children are allowed to nap or rest without distractions or disturbances. In the double session classrooms, naptime is not a part of the daily routine.

Children are not forced to sleep but are encouraged to lie down and rest. Children sleep/rest on a cot/mat.

***Due to COVID-19, the following practices will be implemented:***

- ***The cots/mats will be arranged 6 feet apart from each other. The cots/mats will be placed in alternately opposite directions, to lessen the possible spread of illness between children from coughing and sneezing.***
- ***The program will provide sheets and blankets and washed daily.***
- ***The cots/mats and dividers will be disinfected soon after each use.***
- ***A face covering will not be worn by the children during nap/rest time.***

## **INDIVIDUALIZING THE EDUCATION PROGRAM FOR YOUR CHILD**

### **Screenings**

All children enrolled are screened in the areas of behavior, sensory (vision and hearing), and development within 45-days of entry into the program, and each school year.

Our programs use ASQ-SE, which is a behavioral tool, and ASQ-3, a screening tool for communication, gross and fine motor skills, problem-solving, and personal-social skills. Developmental and behavioral screenings are essential in the early detection of any delays children may be experiencing for any number of reasons and to provide the appropriate support.

The screening results help identify children's strengths and challenges and how the family and program can support them. The results of these screening will be shared with you and will discuss with you if there is any concern that might need further assessment.

### **Assessing your Child's Growth and Development**

The Head Start and State Preschool Programs recognize that each child is unique and special with his/her strengths and needs. Teaching staff uses multiple sources of information to assess each child; these include observations, work samples, parent information, and photographs of children at play.

### **Child Observations**

Teaching staff conducts ongoing observations of your child and implement teaching strategies geared to the needs of each child.

### **Work Samples**

Teaching staff collects samples of children's work (cutting, drawing, and writing) each month.

### **Desired Results Developmental Profile - DRDP 2015 (Preschool)**

The Desired Results Developmental Profile assessment instrument is designed to observe, document, and reflect on the learning, development, and progress of children. They may be assessed, depending on the program your child is enrolled in, two or three times a year.

The data collected provides an additional insight of the child's strengths and needs. This information is used for individual development plans as well.

***Due to COVID-19, teachers will share your child's growth during Televisits and Teleconferences.***

### **Children Whose Home Language is Other than English**

All staff promotes the development of your child's first language while facilitating the acquisition of English. One of our objectives is to help children acquire better English speaking skills while maintaining and enhancing skills in their first language.

## **TRANSITION FROM PRESCHOOL TO KINDERGARTEN**

### **Preschool to Kindergarten**

Transition is a process, not a one-time event. Head Start and State Preschool support parents in preparing children for public school kindergarten by providing information, making connections, and bringing kindergarten teachers to speak with parents. Part of the second parent-teacher conference includes a conversation about kindergarten transition plans for your child. There will be meetings for parents to share concerns, ask questions, and support each other during the months before your child enters public school.

Throughout the school year, your child will be learning school readiness abilities, including social skills to prepare him/her for kindergarten. Transition activities will be planned, such as learn about kindergarten behaviors, expectations, and express feelings about going to kindergarten, including a visit to a kindergarten classroom. Teachers will be discussing with you the skills learned by your child, such as getting along with others, listening, hand-eye coordination, learning the alphabet, counting, and using words to express feelings or ideas so that you can follow his progress.

***Due to COVID-19, teaching staff will be discussing with your child's progress during Televisits and Teleconferences.***

### **Transition to Kindergarten: Children with Individualized Education Program (IEP)**

Parents with children with IEP must discuss their child's transition to kindergarten with the Speech Therapist, Special Education teacher, and other specialists working with their child. The discussion must take place at the beginning of the school year (preferably before winter break), and by the time for a transition IEP meeting is held to determine services for your child for the upcoming year.

## PARENT-CHILD ACTIVITIES IN THE CLASSROOM

### Field Trips

Field trips are plan to enrich and reinforce the curricula taught in the classroom, i.e., visiting the local library, fire station, kindergarten classroom, and parks.

Field trip plans must be discussed at the Local Parent Meetings and obtain approval from the Supervisor/Site Director. A signed permission slip from the parent is required for a child to participate in a field trip.

***Due to COVID-19, field trips are on hold until further notice.***

### Classroom Celebrations

During the school year, parents and teachers may want to participate in classroom celebrations that should be discussed with parents at the Local Parent Meeting and approved by the Supervisor/Site Director. Classroom celebrations should not disrupt the daily routine. Parent volunteers are welcome to participate in these activities.

### Last Day of School

The teacher is responsible for conducting the last day of school as a regular day and should follow the same schedule; if additional activities are planned, the teacher should submit a request for approval to the Site Director as part of the educational program requirements. Parents are welcome to offer suggestions and participate in the planning process with the teacher and should follow practices.

***\*\*\* Due to COVID-19, all classroom events are limited to children and staff only \*\*\****

**UNDER NO CIRCUMSTANCES IS A TEACHER AUTHORIZED TO HAVE A CAP AND GOWN-FORMAL TYPE GRADUATION CEREMONY.**

**Staff or parents may not collect money from other parents for caps and gowns, cakes, or any other celebration related item.**

## HEALTH SERVICES

The Head Start and State Preschool Programs commit to wellness and embrace a comprehensive vision of health for children, families, and staff. Our objective is to support healthy, physical development by encouraging practices that promote early identification of problems and prevent illness or injury by promoting positive, culturally relevant health behaviors that enhance life-long well-being.

### Your Child's Health

Our programs emphasize the importance of early identification of health or mental health needs, which, if undetected or untreated, might cause learning difficulties. The programs will make every effort to ensure that your child is connected to a doctor or clinic to receive a complete age appropriate health assessment as recommended by his/her physician. We call this "medical home." Appropriate dental care recommended by the child's regular dentist is called "dental home."

To comply with licensing and federal requirements, all children enrolled in the programs must have the following:

- A physical examination, current and up-to-date within the last 12 months, within 30-days of entering the classroom and updated annually. The physical must include anemia and tuberculosis risk assessment, blood lead level test, and other screenings as required by age of the individual child.

- Up-to-date, age appropriate immunizations throughout the school year.
- A dental examination done by dentist within 90-days of entering the classroom

It is the parents' responsibility to follow up on all health and dental treatment for their children as well as maintain regular scheduled visits.

Other screenings that all newly enrolled children must have within 45-days from first day of attendance include:

- **Developmental** – Completed by parent
- **Behavioral** – Completed by parent
- **Vision and Hearing** – Conducted by a community agency or Family Services Staff if it is not noted on the physical examination

The Family Services Staff will conduct screenings during the school year, as stated above. Parents will be notified in advance when screenings are scheduled and will receive copies of the results. Parents will be responsible for the health care of their child and following through with necessary treatment.

If you need health coverage for yourself or your child, refer to page 23 for a list of resources. The Family Services Staff can also assist you in finding medical, dental, or health insurance provider.

#### **Daily Health Inspection**

The teaching staff will perform a health check, daily, to ensure that each child is healthy as he/she arrives at the classroom. Parents are required to wait until the health check is completed to sign-in their child.

***Due to COVID-19, the following practices will be implemented:***

- ***Designated staff will take the child's temperature using a touchless thermometer on the forehead wearing gloves, disposable gown, and face covering.***
- ***If a child shows a temperature that is 100.0 degrees or higher, the child will not be allowed to stay at school.***
- ***Parents will be asked to complete health check questionnaire using the iPad***
- ***The child will remove his/her shoes before entering the classroom after being accepted to stay in school.***
- ***The parent will assist the child in placing the shoes outside the door in a plastic bag.***
- ***The teaching staff will provide the child with a name tag and face covering.***
- ***Upon entering the classroom, the child will wash hands with soap and water for 20 seconds.***

#### **Health Check Questionnaire Process during COVID-19**

- ***Parent completes the questionnaire in the iPad***
- ***Everyone will be asked about COVID-19 symptoms within the last 24-hours and whether anyone in their home has had COVID-19 symptoms or a positive test.***
- ***Anyone who has a positive response to any of the questions will not be allowed to enter the classroom***

#### **Mid-Day Health Check during COVID-19**

***Children will go through a health check before lunch, this will include:***

- ***Visual inspection of each child***
- ***Temperature screening, which will be recorded on the daily health check form***

### **Daily Routine during COVID-19**

*Teaching staff will work with the same group of children each day due to COVID-19.*

*Physical distancing, 6 feet apart, will be implemented as much as possible, including during nap, meals, and indoor and outdoor times.*

*The teaching staff will regularly demonstrate and role model the following preventive and hygienic practices:*

- *Coughing/sneezing into a tissue*
- *Throwing used tissue in the trash*
- *Handwashing for 20 seconds*
- *Remind children not to touch their face, nose, eyes, or face shield*
- *Encourage children to report signs of illness*
- *Encourage children to wear a cloth face covering as best tolerated by the child*

*The following individuals are exempt from wearing a face covering:*

- *Children aged two-years-old and under*
- *Persons with a medical condition, breathing problems, mental health, or developmental disability that prevents them from wearing a face-covering*
- *Persons who are hearing impaired, or a person communicating with a person who is hearing impaired, because face-coverings remove the ability for visual reinforcement of what a person is saying.*

### **When Your Child is Ill at School**

The teaching staff will contact the parent immediately if a child shows symptoms of illness or becomes ill while at school. The child will be isolated from other children until the parent or anyone listed on the emergency card is contacted to pick up the child.

Teaching staff will identify an area in each classroom to monitor children whom become ill while at school.

### **When a Child is Showing COVID-19 Symptoms while at School**

*The teaching staff will implement the following practices if a child shows any symptoms of persistent cough, fever, chills, sore throat, shortness of breath, diarrhea, muscle pain, loss of smell/taste, red swollen rash, or red swollen eyes:*

- *Staff will wear disposable gowns, gloves, face shields, and face masks while encountering isolated children*
- *The child will be quarantined in the “sick room” to be away from other children.*
- *An assigned staff will remain with the child until the parent arrives.*
- *Other staff will notify the parent and will request to pick up the child*
- *When the parent arrives to pick up the child, he/she will wait for the child by the entrance door.*
- *If symptoms appear to be life-threatening, staff will call 9-1-1*

### **Returning to School after Illness during COVID-19**

*Children will be allowed to return to school when they are symptoms and fever-free for at least 72 hours or 3 days before their return. A doctor’s note or medical release may be required depending on the severity of the symptoms.*

*If COVID-19 is confirmed, the children will not be allowed to return to school until they have met CDC criteria to discontinue home quarantine and provide a doctor’s note or medical release.*



### **When Your Child is Ill and Should Not Come to School**

If your child has or shows any of the following symptoms, you should keep him/her at home and contact the school to report the absence:

- Fever 100°F or higher. Your child may return to school when he/she is fever free for at least 24 hours without the use of Tylenol, Motrin, or any other temperature reducing medication unless otherwise indicated by note from health care provider.
- Earache
- Headache and stiff neck
- Abdominal cramps and/or diarrhea. Your child should return to school when free of vomiting/abdominal cramps or diarrhea for 24 hours unless otherwise indicated by note from health care provider.
- Severe cough, when symptoms are not due to an allergy or recent illness. Please keep your child home if he/she makes high pitched or whooping sound while coughing or cough prevents child from participating in the daily routine.
- An identified rash, infected sores, persistent itching.
- A sore throat or trouble swallowing, especially a strep infection. Usually, a child can return when the fever is gone 24 hours after antibiotic treatment has passed, and with a note from physician.
- Conjunctivitis (pink eye) may return 24 hours after treatment with a note from physician unless otherwise indicated.
- Any infectious disease diagnosed by your doctor.
- Head Lice. Head lice are common among children in school settings and parents are encouraged to check for head lice and nits as a part of routine hygiene. When it is determined that a child has head lice, the policy requires that the child return to class when he/she is completely free of lice.
- Flu symptoms (fever with a cough, or sore throat and body aches).
- Child looks or acts differently, tired, pale, lacking appetite, confused, irritable, or difficult to awaken.

If your child is absent for more than **3 consecutive days**, a doctor's note **may** be required upon return.

### **Providing Incidental Medical Services to Children Medications, Equipment, and Supplies at School**

The programs will do its best to make reasonable modifications to provide, appropriate, auxiliary aid to children to enable them to participate in activities without altering the nature of the program, whenever possible, as specified in the Early Learning Services Plan for Providing Incidental Medical Services.

All prescribed and non-prescribed medications and equipment/supplies will be accepted and given to children only with doctor's written instructions on the "Authorization for Medication" or "Information Exchange" forms, which can be obtained from the Teaching and Family Services Staff; the parent will provide training to teaching staff on how to administer medication and/ or use equipment/supplies. In some instances, additional training may be required and will be provided by Family Health Services Supervisor and/or a medical professional. The "Authorization for Medication" or "Information Exchange" forms must be signed and dated by the parent and the doctor and returned to the staff on site. The Family Services Staff will need this form to develop a health plan before the administration of the medication or use of equipment can begin. A child's participation may be delayed or the child may be temporarily excluded from care until all required documentation, training, parental authorization, and health plan is in place.

For staff to administer any medication or use equipment or supplies, the following must be in place:

- Medication must be labeled with the doctor's name, child's name
- Medication must have dosage, duration, and times that exactly matches the information on the "Authorization for Medication"
- No changes should be made to information on the label and/or the authorization form

- Any changes will require a new “Authorization for Medication” form signed and dated by parent and doctor
- All the information on the medication label and other forms must match to be administered at the center
- All medications, including over-the-counter medications, must be in its original container (or package) and labeled by the pharmacy with the child’s name, the medication name, and directions on how to administer the medication, dosage, and expiration date.

***Due to COVID-19, parents, in collaboration with their child’s medical provider, will determine the appropriate and safest accommodations to administer medications at school during this time, such as avoidance of nebulizers and the use of inhalers.***

***Due to COVID-19, parents of children with underlying health conditions are encouraged to discuss with their children’s medical provider if it is safe for their child to attend a school or advised to stay safer at home and provide opportunities for learning as needed.***

### **Child Accident Reports**

The teaching staff will administer basic first aid to children if they get hurt at school. An accident report will be completed, and you will receive a copy when you pick up the child.

If a child needs further medical assistance or has a head injury, our staff will call to inform you about the incident and/or recommend that you consult with your child’s physician. If the child received medical care due to the injury, then he/she will have to return to school with a doctor’s release note.

In case of an emergency that requires critical medical assistance, the child will be transported to a medical facility by ambulance accompanied by our staff. You will be notified immediately if such an incident occurs. It is essential to have current contact information from parents; if there are any changes, such as phone numbers, please update your contacts on the Emergency Cards immediately.

### **Consultation Services**

Consultation services offer a strength-based, culturally sensitive and collaborative approach aimed at fostering the healthy development of all children in a variety of areas: learning, attention, social skills, emotions, relationship bonding, and behavior. The main goal of the consultation is to join parents and teachers to prevent and identify early developmental, behavioral, emotional, relational, sensory, and social vulnerabilities, then to assist parents in putting into action the appropriate support and services that can boost the child’s individual potential for healing, growth, and development.

Consultation services include:

- Ongoing support for teaching staff based on discussions and observations of the environmental, emotional, behavioral, and relational factors that affect a classroom’s learning environment
- Ongoing support to parents and families to draw upon the significant influence they have on a child’s potential to learn, thrive, and succeed
- Review developmental and social-emotional screenings completed by parents and teachers and contributing to the creation and implementation of appropriate support plans
- Connecting families to community resources that address concerns related to development, behavior, parenting, loss, separation, stress, and other areas of difficulty.

Consultation support is available to all classrooms. Child-centered consultation assistance is delivered only with written parental consent and participation. All matters of consultation are approached with strict protection of privacy and confidentiality as well as with the utmost respect for caregivers given the belief that parents and teachers are capable, competent contributors to the well-being of all children.

### **Tooth Brushing**

Dental care is part of health education within the children's daily curriculum. Children are instructed in the proper tooth brushing procedure and brush daily with a small amount of fluoridated toothpaste.

***Due to COVID-19, children will not take part in tooth brushing; it will be reinstated when it is safe to do so as it is an integral part of our program.***

***Parents will receive oral health information and will be encouraged to brush the child's teeth at home twice a day, before and after school.***

### **Toilet Learning and Training**

For children being toilet trained, a written toilet-learning plan will be developed with the teacher and parents to include the following:

- Methods of toilet trainings
- Introduction and use of appropriate training equipment
- Introduction and use of appropriate clothing

### **Bathroom Use during COVID-19**

***Bathroom time will be used as an opportunity to reinforce hygiene practices and monitor proper handwashing. The following practices will be implemented:***

- ***Only one child at a time will be going to the bathroom to use the toilet.***
- ***The staff will call the child to go to the bathroom***
- ***The child will use the toilet***
- ***The staff taking the child to the bathroom will teach/remind the child to use a tissue to grab the handle to flush the toilet***
- ***The child will be directed to the sink to wash his/her hands***
- ***Bathroom will be cleaned and disinfected before and after each use***
- ***Teaching staff will stand by the doorway to monitor social distancing in the classroom***

## **NUTRITION SERVICES**

### **Nutrition Assessment**

The nutrition assessment takes into account nutritional and/or cultural needs identified through discussion between staff and parents and also obtained from the health assessment. Information such as your child's height and weight, family eating patterns, and special diets that are required to meet nutrition and health-related needs are all part of our nutrition services. The assessment must be completed within 90-days from the first day of entry into the program; the Family Services Staff will complete a Nutrition Questionnaire-Assessment with you.

### **Meals Served at School**

The program provides a foundation for children to experience positive attitudes for food as well as a good understanding of nutrition and eating habits. Family-style meals are an integral part of our food program.

Children are encouraged to try all foods and never force to eat. Food is never used as a reward or punishment.

***Due to COVID-19 and until its threat has lessened, family-style meals have been temporarily replaced with individual meals, and children can safely share serving utensils. Children will be discouraged from sharing food, eating utensils, cups, and paper towels.***

Meals provided by the programs follow the U.S. Department of Agriculture and Head Start Nutrition guidelines. The program receives funds through the Child and Adult Care Food Program (CACFP) for meal service.

The program gets fully reimbursed for meals served to children as they attend the full duration of their classroom hours of instruction. The times of attendance remain posted in the classroom as a friendly reminder.

The menu is posted on the Parent Bulletin Board and a copy will be given to parents every month.

### **No Outside Food / Peanuts / Nuts Policy**

Due to the increasing number of children who have life threatening allergies to food products, the following policy must be enforced in the classrooms:

Parents, guardians, or family members may not bring any food items into the classrooms at any time, including celebrations. Meal service is provided by the program and children will only be served the food items listed on the menu.

Also, we highly encourage a nut-free environment; hence all efforts are made to ensure that no food item on the menu will contain any type of nut product. Note that due to our no nut policy, we cannot provide nut milk (almond, cashew, etc.) as a dairy milk substitution.

**Although no food item contains nuts, distributors have expressed there is no guarantee that products have not been processed in a facility that uses peanut/nut oil/tree nut.**

### **Food Allergies**

Our programs try to accommodate children who may have food allergies, which may prevent them from eating the foods that are planned on the menu. If this applies to your child, you can contact the Family Services or Teaching Staff.

A doctor's verification of the food allergy is required (medical statement), and the nutritionist will contact you as needed to develop a plan to address your child's allergies.

### **Non-Medical Food Substitutions**

If your child requires a food substitution, notify either your Family Services or Teaching Staff. The program Nutritionist will contact you as needed to develop a plan to address food substitutions.

## **PROGRAMS' POLICIES AND PROCEDURES**

### **Confidentiality**

Head Start and State Preschool Programs collect and maintain information about enrolled children and their families. All information that is obtained orally, in writing, or through observations is considered confidential.

The staff has access to confidential information solely to provide comprehensive services to children and families on a "need to know" basis. Our programs follow all release of information procedural safeguards outlined in the provisions of Federal and State Administrative Codes: Health Insurance Portability and Private Act, (HIPAA), 2003; Family Educational Rights and Privacy Act, (FERPA), 1974; Individuals with Disabilities Education Improvement Act, (IDEA), 2004; and Head Start Performance Standards 1302.33(a)(1); 1302.41(b)(1); 1302.45(a)(3); 1303.21(a)(b); 1303.22; 1303.24.

If you need assistance obtaining student records, please contact the Family Services Staff.

## **Parent Admission Agreement**

The agreement asks parents to make commitments, give permission for their child's participation, and acknowledge other rights and responsibilities as parents. All parents must review and sign the agreement, and will receive a copy for their records.

## **Participation of Children with Disabilities**

Every child is unique, and in our programs, we encourage an inclusive environment for all children, including those with disabilities. Aligned with current federal and state mandates governing assessment and services for children with disabilities—these include Section 504 of the Rehabilitation Act of 1973; Americans with Disabilities Act, Individuals with Disabilities Education Improvement Act, (IDEA), 2004; Health Insurance Portability and Private Act, (HIPAA), 2003; and Family Educational Rights and Privacy Act, (FERPA), 1974.

To be eligible for Special Education, a child must be identified as having a disability, which adversely affects his/her education. This identification begins with a process of referral and assessment.

A referral can be made by a child's teacher, doctor, or yourself. A referral means that additional information is required concerning the child's development in one or more of the following areas: cognitive, language, adaptive, physical, and social-emotional.

A child is not eligible for Special Education when his/her educational needs are primarily due to learning English, temporary physical conditions, social immaturity, and/or other environmental, cultural, or economic factors.

Any formal assessment to determine if your child has a disability requires your written permission. This assessment must be completed by qualified personnel who are knowledgeable of child development, ethnic and cultural background of the child and family, and competent in the child's primary language or method of communication.

The term "child with a disability" refers to a child who has one (or more) of 13 conditions defined by IDEA 2004. They are:

- 1. Autism (AUT):** refers to developmental disability significantly affecting communication and social interaction usually evident before age 3.
- 2. Deaf-Blindness (DB):** refers to a combination of hearing and visual impairments, which causes severe communication, plus developmental and educational problems, which cannot be accommodated in special programs solely for either deaf or blind students.
- 3. Deafness (DEAF):** refers to hearing impairments so severe that it affects the child's ability to understand language and use verbal speech even with a hearing aid.
- 4. Hard of Hearing (HI):** refers to hearing impairment, (less severe than deafness) whether permanent or fluctuating, which reduces understanding of oral language and decreases verbal communication, even with amplification.
- 5. Intellectual Disability (ID):** refers to general intelligence 1½ years or more below peers, who are typically developing, may also have difficulty with daily tasks such as feeding, grooming, toileting, plus general communication and motor problems.
- 6. Visual Impairment (VI):** refers to partial sight and blindness that even with correction, adversely affects a child's ability to participate in general classroom activities.
- 7. Emotional disturbance (ED):** refers to one or more of the following behaviors - learning or behavior problems which cannot be explained by intellectual, sensory or health factors, moodiness and unhappiness, trouble getting along with peers and family, may have physical symptoms and fears associated with personal or school problems. (This term includes children who are schizophrenic, but does not include children who are socially maladjusted, unless it is determined that they are seriously emotionally disturbed).

8. **Multiple Disabilities (M):** refers to a combination of conditions such as mental retardation – orthopedic impairment. This does not include deaf-blindness.
9. **Orthopedic Impairment (OI):** impairments evident at birth such as club foot, or caused by disease such as poliomyelitis, bone tuberculosis or other causes such as cerebral palsy, amputations, fractures or burns.
10. **Other Health impaired (OHI):** Limited strength or vitality due to either chronic or acute health problems such as a heart condition, tuberculosis, rheumatic fever, nephritis asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, or diabetes.
11. **Traumatic Brain Injury (TBI):** Sudden injury to brain caused by an external physical force, resulting in total or partial functional intellectual and/or psychosocial impairment. The term does not apply to brain injuries that are congenital or degenerative, or brain injuries induced by birth trauma.
12. **Specific Learning Disability (SLD):** A disorder which is apparent in one or more of the following skills: inability to listen, think, speak, read, write, spell, or do math calculations, also perceptual problems, dyslexia, minimal brain dysfunction, and developmental aphasia.
13. **Speech and Language Impairment (SLI):** Difficulty understanding verbal communication and/or errors in child's verbal speech that are not attributed to the normal developmental errors, which are part of learning to talk.

Our programs are individualized for all children, including those with an Individualized Education Program (IEP) or an Individualized Family Service Plan (IFSP). Children with IEP/IFSP will not be excluded from any of our programs due to:

1. Severity or type of disability
2. Attitudes of staff or other parent
3. Unfamiliarity with disability
4. Limited Accessibility of Location
5. Special services or equipment

Our teaching staff collaborates with your child's Special Education teacher and Specialists to include his/her IFSP/IEP goals into their individual development plan.

Parents should inform the Family Services and Teaching Staff if their child has an IEP or IFSP. Please notify your teacher when your child's next IEP meeting is scheduled so that he/she may attend and support you.

Also, it is important to remind the Special Education teacher to provide you with copies of your child's most current IEP/IFSP for your teacher, including quarterly notes of your child's progress in Special Education.

### **First Day of School**

Children are expected to attend the first day of school at the designated classroom and times. Children who do not show up for two consecutive days from the day school starts will be dropped from the program. The only exception will be if the child is absent due to illness. The parent must notify the school on the day student is absent.

### **Attendance**

Daily attendance is an essential element to your child's development and success towards Kindergarten readiness! A child should be in school every day for continuity of learning and to receive the most benefit from the program.

To maximize your child's development, children must stay for the whole duration of the classroom hours of instruction:

- Double sessions: 3.5 hours
- Full day session: a minimum of 6.5 hours
- Single session: 6.5 hours

Regular attendance is necessary to ensure your child's continued enrollment in the program and for the program's full funding.

Parents must call teaching staff **within one hour (1 hour) of the class's scheduled start time** to report the absence for each day that the child cannot attend school and explain the reason for the absence. If the staff does not hear from you, they will call you to verify the absence by phone.

A child's participation in the program may be jeopardized if regular attendance does not meet program requirements.

#### **Absences that are Considered Excused:**

- Illness of child or quarantine
- Illness of parent or quarantine
- Family emergency
- Death in immediate family
- Court ordered visitation (verification required)
- Best interest

Trips out of the area to visit family per school year: one time period that may not exceed ten consecutive school days; two separate periods that may not exceed five consecutive school days each. All absence requests must be made in advance, in writing, and approved by the Supervisor. Extended absences due to medical emergencies (child or parent) must be requested in writing and provide proper documentation (discuss with Family Services Staff).

All other absences are considered unexcused. Family Services Staff will conduct a home visit as a follow-up if the teaching staff is unable to contact the family after three (3) consecutive absences and family fails to respond.

#### **Sporadic Absences**

Sporadic absences are three or more non-consecutive absences. If your child has sporadic absences of 3 or more, within a month, the Family Services Staff will work with you to develop a plan to improve attendance.

Unexcused absences (consecutive or not), absences of more than 10 school days, or evidence of sporadic absences may result in a program transfer or jeopardize participation in the program.

Late drop-offs or early pick-ups, of more than 10, may result in a program transfer or jeopardize participation in the program.

#### **Vacation**

The program calendar identifies winter, spring, and summer breaks. Please schedule any vacations during these program breaks to meet the educational needs of your child. Five consecutive absences may result in your child being dropped from the program.

### **Daily Arrival and Pick-Up Signage Requirement**

Parents shall sign their child in and out of the classroom **using their full legal signature and shall record the time of the day** per Department of Social Services Community Care Licensing regulations. Signing with initials is not allowed [CCR, Title 22, Section 101229.1(a)(1)(b)(c)].

### **Signing Your Child In at School**

Children must always be accompanied by an adult when coming to the classroom.

The person who brings the child to the classroom must wait until the health check is completed, and the child is accepted to sign him/her in for the day.

The person must sign-in the child using his/her full legal signature (initials are not allowed) and record the time of arrival.

### ***Due to COVID-19, the following practices will be implemented:***

- ***Parent waits at designated area with the child***
- ***Teacher greets the parent and child at the door in designated area***
- ***Teacher requests parent and child to use hand sanitizer***
- ***Teacher asks parent to complete the health check questionnaire or helps parent to do it in the iPad if needed***
- ***Teacher will complete health check***
- ***Teacher will provide the iPad to the parent to sign-in the child***

### **Picking up Your Child from School**

Please make sure to pick up your child and sign your child out by the end of the classroom hours so as not to disrupt your child's learning! If you need to pick up your child before the classroom hours end, please notify the teaching staff in advance.

Children are released only to authorized adults, at least 18 years of age, who are listed on the emergency card and with valid photo identification. The parents are responsible for providing names, addresses, and telephone numbers of those individuals authorized to pick up their child or who may be contacted in case of an emergency and inform staff of any changes.

Children will not be released to parents or authorized adults who appear to be intoxicated or under the influence of a controlled substance.

### ***Due to COVID-19, parents must be on time to pick up their children.***

### **Signing out Your Child from School during COVID-19**

#### ***Due to COVID-19, the following practices will be implemented:***

- ***Parent waits at designated area outside the entrance door***
- ***Teacher greets parent at door in designated area***
- ***Teacher asks for ID to verify that person can pick up the child***
- ***Teacher requests parent to use hand sanitizer***
- ***Teacher will provide the iPad to the parent to sign-out the child***
- ***Teacher provides a daily report***
- ***Teacher will bring the child to the parent***

***If possible, we request that the same parent drops off and picks up the child every day, avoid designating those at high risk (CDPH COVID-19 updated guidelines).***



### **Late Child Pick-Up**

If you are going to be late to pick up your child, please contact the teaching staff immediately. If your child has not been picked up from school after the session has ended, staff will contact people listed on the emergency card to pick up your child.

If no one can be contacted and the child is still at the site one hour after the center closes, the Supervisor will develop a plan of action. If becomes necessary, the Supervisor may call the local enforcement department to report the situation to the authorities.

If parents pick up their child late, they will receive a late notice. A plan of action will be developed in collaboration with the Site Director after the third notice is given to parents to address the issue.

Under no circumstance would your child be sent home alone.

***Due to COVID-19, parents must be on time to pick up their children.***

### **Transfers**

Parents may request a transfer from their existing classroom to another location by contacting the Family Services Staff.

***Due to COVID-19, transfer requests will not be granted to reduce transmission; children must stay in a steady group.***

### **Discipline Policy**

All staff must treat children fairly, respectfully, and provided a safe, caring, and nurturing environment as we want children to become independent and practice skills in self-regulation.

The teaching staff uses strategies that help enhance your child's self-esteem and build self-control. Strategies include logical consequences, redirection, and emphasis on verbal directions rather than physical punishment.

In our programs, the staff uses positive reinforcement when discipline matters arise; we have a zero- tolerance for physical, verbal, or emotional abuse as a form of discipline.

Physical abuse is defined as any form of physical restraint or use of force particularly as a form of punishment (pulling a child, isolating a child for long periods, slapping, spanking, or pushing a child). Verbal abuse refers to the use of abusive language, which is demeaning to a child (ridiculing a child, use of profane language, yelling, or screaming at a child).

Emotional abuse is considered a form of punishment resulting in mental anguish (singling out a child for misbehavior, isolating a child or leaving a child behind for misbehavior, discussing a child's behavior or weakness with other personnel, parents, or other adults in his/her presence). In our programs, no child is ridiculed, intimidated, humiliated, harassed, or physically disciplined.

Parents are required to contact, immediately, the **Supervisor, Preschool Sites/Site Director** for the site if they observe any type of abuse. Parents are expected to meet with the Site Director or Supervisor whenever they have concerns about their child.

If your child is exhibiting challenging behaviors, the staff will support your child by making program modifications and create a behavior intervention plan to improve his/her behavior. Your participation in creating and implementing this plan is essential to your child's success.

### **Dressing for School**

Children are involved in different, exciting, and sometimes, messy activities. Children should dress in comfortable clothes and shoes. We do not recommend open toes or sandals since children will be involved in physical activities such as running and climbing.

***Due to COVID-19, we highly recommend that children wear cloth face coverings while arriving and departing from the site, and in any area outside the classroom, except when eating, drinking, napping, or engaging in physical activities.***

***Due to COVID-19, children will not be allowed to wear shoes in the classroom for this school year. They will put their shoes in a plastic bag to minimize outside exposure.***

The teaching staff will ask you to bring a set of clothes to be kept in your child's cubby in case of mishaps. The Teaching staff is not responsible for washing soiled clothing; instead, such items will be placed in plastic bags for you to take home when you pick up your child.

### **Bringing Items from Home to School**

Children should not bring items from the home to school including but not limited to food, candy, gum, toys, jewelry, blankets, etc.

***Due to COVID-19, children will not be allowed to bring any items from home to school.***

### **Children Taking Classroom Toys Home**

Some children will take items from school to home (puzzles, legos, etc.). In that instance, please be sure to return all school items the next day.

***Due to COVID-19, children will not be allowed to take any classroom items home.***

### **Donations – Non-Federal Share (In-Kind)**

The Head Start Program is federally funded, which enables the program to provide services needed in the community. In-Kind donations include time parents volunteer in the classroom, attending parent meetings, participating in activities, and any materials donated to the classroom. The federal guidelines require programs to keep records and report all In-Kind donations. Please be sure to sign-in if you are volunteering so that we get credit for your time.

***Due to COVID-19, many of our In-kind donations will be online this school year. Please be sure to sign-up if you would like to volunteer in these online opportunities.***

**Staff does not ask for donations or contributions for activities such as potlucks, gift exchanges, fund-raising, picnics, money, etc.**

### **No Smoking Policy**

Our programs prohibit, at all times, the use of tobacco products including, any smoking devices per State Law. This prohibition applies to all employees, children, visitors, and other persons at any center or program sponsored activity or meeting.

## **EMERGENCY PROCEDURES**

### **Emergency Card**

We ask you to fill out two “emergency cards” upon entry to the program. The information provided will assist us in contacting you in the event of an emergency or disaster as well as medical and dental providers. We require to list, at least, two (2) people that we may contact to pick-up your child in case of an emergency. Be sure that emergency contacts are aware that they are listed and available to pick up your child.

To ensure the safety of your child, we ask emergency cards to be updated as changes occur.

Allergies to medications, food, and any materials should be indicated on the emergency card and discussed with the Family Services and Teaching Staff. Should any information change, please notify the Teaching and Family Services Staff immediately.

### **Medical and Dental Emergencies**

In the event that your child becomes ill or injured at school or has a medical or dental emergency, you will be notified, and either you or someone listed on the emergency card must come to pick up the child immediately. Our staff relies on the emergency card to determine whom to contact.

### **Extreme Health Emergencies**

In the case of extremely severe emergencies (unconsciousness, severe bleeding, severe burns, broken bones, head injuries, faulty breathing, etc.), staff will call 9-1-1, and contact you immediately, or emergency contact, to inform you of the emergency. If needed, an ambulance may be requested to transport your child to a hospital.

### **Emergency Disaster Preparedness**

Classrooms have an Emergency Care and Disaster Action Plan in place. They have a First Aid kit and are equipped with an emergency preparedness container with supplies to sustain classrooms for 48-hours. Our teaching staff has received training in basic First Aid and CPR procedures.

Parents are encouraged to become familiar with emergency procedures and the location of the First Aid kit in their child’s classroom. Emergency procedures are reinforced by teaching staff through classroom curricula, monthly fire, earthquake, and lockdown drills.

### **Child Abuse Reporting**

All staff members are mandated reporters of suspected child abuse and are responsible for reporting such incidents to Child Protective Services or the Police Department.

## RESOURCES

The following information will assist you in finding assistance for your family among the groups and agencies that provide services in our community:

<b>California Children Services (CCS)</b> Provides specialized medical care for Children with an eligible condition. (Ages 0 to 21 years).	<b>1 (408) 793-6200</b>
<b>KidScope Assessment for Developmental and Behavioral Health</b> Provides comprehensive medical, psycho-social & educational assessments for children with suspected learning and developmental delays. (Ages 0 to 18 years)	<b>1 (408) 793-5959</b>
<b>Department of Social Services Santa Clara County</b> Provides assistance with medical, food, and housing to low-income individuals. (All ages)	<b>1 (877) 962-3633</b>
<b>Healthier Kids Foundation Santa Clara County</b> Provides application assistance to apply for free or low cost health insurance options. (Ages 0 to 18 years-old)	<b>1 (408) 564-5114</b>
<b>Beneficiary Services Denti-Cal Program</b> Dental Services are currently provided as one of the many benefits under the Medi-Cal Program.	<b>1 (800) 322-6384</b>
<b>Santa Clara County Mental Health</b> Provides evaluations and services for those with mental health problems. (All ages)	<b>1 (800) 704-0900</b>
<b>Parents Helping Parents</b> Provides information and parent to parent Support for families of children with special health care needs. Provides information regarding resources for medical home care.	<b>1 (408) 727-5775</b>
<b>Social Security Supplemental Security Income (SSI)</b> Provides cash assistance and Medi-Cal to low-income disabled individuals. (All ages)	<b>1 (800) 772-1213</b>



**Santa Clara County Office of Education  
Early Learning Services Department  
1290 Ridder Park Drive, MC 225  
San Jose, CA 95131-2304  
(408) 453-6900**



Santa Clara County  
Office of Education

[www.myheadstart.org](http://www.myheadstart.org)