Early Learning Services Department
Head Start Program
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Head Start Program
Parent Handbook
# HEAD START PROGRAM

**(408) 453-6900**  
1 (800) 820-8182  
**(408) 453-6757** - Fax

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<th>Supervisor, Head Start Preschool Sites (SPS) / Site Director (SD)</th>
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<th>Family Advocate / Family Engagement Specialist</th>
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The Head Start Program is an equal opportunity provider.
Santa Clara County Mental Health 1 (800) 704-0900
Provides evaluations and services for those with mental health problems (All ages).

Parents Helping Parents (408) 727-5775
Provides information and parent to parent support for families of children with special health care needs. Provides information regarding resources for medical home care.

Social Security Supplemental Security Income (SSI) 1 (800) 772-1213
Provides cash assistance and Medi-Cal to low-income disabled individuals (All ages).

California WIC – Women’s, Infants & Children’s Supplemental Food Program 1 (888) 942-9675
Provides nutrition education and coupons for free food to low-income women (pregnant or nursing), infants and children with special health care needs (Ages 0 to 5 years).
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Nutrition Services
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Meals Served at School
No Outside Food / Peanut / Nut Policy
Food Allergies

Resources

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

California Children Services (CCS) (408) 793-6200
Provides specialized medical care for children with an eligible condition (Ages 0 to 21 years).

KidScope Assessment for Developmental and Behavioral Health (408) 793-5959
Provides comprehensive medical, psycho-social & educational assessments for children with suspected learning and developmental delays (Ages 0 to 18 years).

Department of Social Services 1 (877) 962-3633
Santa Clara County Provides assistance with medical, food, and housing to low-income individuals (All ages).

Healthier Kids Foundation Santa Clara County 1 (877) 680-4555
Provides application assistance to apply for free or low cost health insurance options. (Ages 0 to 18 years).

Beneficiary Services Denti-Cal Program 1 (800) 322-6384
Dental Services are currently provided as one of the many benefits under the Medi-Cal Program.
Medical and Dental Emergencies
In the event that your child becomes ill or injured at the center, you will be notified and either you or someone listed on the emergency card must come to pick up the child immediately.

Head Start staff rely on the emergency card to determine whom to contact.

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

Emergency Disaster Preparedness
There is an Emergency Care and Disaster Action Plan posted in each classroom. Staff is trained in basic First Aid and CPR procedures. A First Aid kit is clearly marked and kept in each classroom. Each classroom is equipped with an emergency preparedness container filled with necessary supplies that will sustain a classroom for 48 hours.

Parents are advised to become familiar with the established emergency procedures and the location of the First Aid kit. Emergency procedures are reinforced by staff through classroom curricula, monthly fire/earthquake as well as lockdown drills.

Child Abuse Reporting
All Head Start/Early Head Start staff members are mandated reporters of suspected child abuse and responsible for reporting such incidents to Child Protective Services or the Police Department.
Welcome to the Head Start Program

Welcome to the Santa Clara County Office of Education Head Start Program. 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 the Head Start Program, 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 as part of two home visits and two parent conferences opportunities per year
- Given information about your child’s individual development and activities that you can provide at home to support your child’s learning
- Informed and connected with community services concerned with health, education, and improvement of family life
- Encouraged to volunteer in the classroom
- 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

Head Start staff work 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 a number of ways, including classroom activities, local parent committee 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 program.

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 includes time parents spend volunteering in the classroom, attending parent meetings and participating in activities, and any materials that are donated to the classroom. The federal guidelines require programs to keep records and report all In-Kind donations. Staff do not ask for donations or contributions for activities such as potlucks, gift exchanges, fund-raising, picnics, money, etc.

No Smoking Policy
The Head Start Program prohibits, at all times, the use of tobacco products in accordance to 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
Upon entry into the program, you are asked to complete an “Emergency Card.” We require a minimum of two (2) people to be listed that we may contact to pick-up your child in the case of an emergency. Be sure that emergency contacts are aware that they are listed and available to pick up your child. This information assists the program on how to best contact you in the event of an emergency or disaster as well as medical and dental providers.

Allergies to medications, food, and other materials should be clearly indicated on the emergency card and discussed with the Family Advocate/Family Engagement Specialist and Teaching Staff. Should any information change, please notify the teaching staff and Family Advocate/Family Engagement Specialist right away.
If your child’s behavior poses a serious risk to others, your child’s participation in the program may be jeopardized if group care is not an appropriate setting for the child, or the child is a safety hazard to himself, other children, or staff, and when all program modifications, behavior intervention plans, and every attempt to work with the child has not improved the child’s behavior. In such cases, based on the mental health consultant recommendations, the program will assist the family in transitioning the child to another program that meets the child’s needs.

Dressing for School
Children are involved in different kinds of exciting and sometimes messy activities. Dress your child in comfortable clothes and shoes. Open toe shoes or sandals are not recommended since children will be involved in activities that may be physically active such as running and climbing.

Teaching staff will ask you to provide one extra set of clothing to be kept in your child’s cubby in case of mishaps. Teaching staff are not responsible for washing soiled clothing; instead, such items will be rinsed and 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 home to school including but not limited to food, candy, gum, toys, jewelry, etc.

Children Taking Classroom Toys Home
Some children will bring items from school to home (puzzles, legos, etc.). In that instance, please be sure to return all school items the next school day.

Please regard each Head Start staff member as a resource for any questions or concerns you may have about child or program services.

If you have any questions about the program, we are available to meet with you at a convenient time for you and the program staff.

**What is Head Start?**
Project Head Start /Early Head Start is funded by the federal government to provide early childhood development services for children ages 6-weeks to 5-years old and their families.

The program seeks to provide the highest quality services to foster each child’s social, emotional, cognitive, educational, and physical development.

The program supports families by building partnerships that help each family to attain their personal family goals.

All families must meet income eligibility criteria in order to receive services. It is the policy of the Head Start /Early Head Start Program not to discriminate on the basis of sex, age, religion, race or national origin, or disabled conditions. Religious instruction or worship is prohibited.

**SCCOE Early Learning Services Department Mission Statement**
We serve and act on behalf of the welfare of all young children birth through third grade. We will foster every child’s inherent physical, social-emotional, linguistic, cultural, creative, and academic potential.

**SCCOE Early Learning Services Department Vision Statement**
Every day we embrace each child’s wonder and curiosity, and with our partners, engage all children in rich, diverse opportunities to ensure they reach their greatest potential in life; thereby, creating socially equitable opportunities for all.
SCCOE Early Learning Services Department Guiding Principles
- High quality, child-entered opportunities
- Equitable access
- Family engagement
- Authentic collaborations for transformational systems change
- Commitment and sustainability

SCCOE Head Start Mission Statement
SCCOE Head Start Program 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 Head Start Vision Statement
To provide a foundation that embraces children and families to develop skills and a love for lifelong learning.

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

Head Start Program Services

Program Hours of Operation
Double Session classrooms operate 3 1/2 hours, each session, according to the program calendar. The hours are generally 8:15 a.m. to 11:45 a.m. for the AM Session; and 1:00 p.m. to 4:30 p.m. for the PM Session. Some classrooms may have slightly different hours of operation, please check with the teaching staff for hours of operation of your site.

Discipline Policy
The Head Start Program believes that all children should be treated fairly, respectfully, and provided a safe, caring, and nurturing environment. We want children to become independent and to develop self-control.

The teaching staff use strategies that help to enhance your child’s self-esteem and build self-control. Strategies include providing logical consequences, redirection, and emphasis on verbal expressions rather than physical punishment.

Head Start uses positive reinforcement when discipline matters arise. Staff do not use physical, verbal, or emotional abuse as a form of discipline.

Physical abuse is defined as any form of physical restraint as a form of punishment (pulling a child, isolating a child for long periods of time, 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). No child is ridiculed, intimated, humiliated, harassed, or physically disciplined. Parents are to contact the Supervisor, Head Start Preschool Sites (SPS)/Site Director (SD) for the site immediately in the event that any of these have been observed.

Parents are expected to meet with the Head Start Staff whenever there are concerns regarding their child.

If your child is exhibiting challenging behaviors, the program staff will support your child by making program modifications and create a behavior intervention plan to improve your child’s behavior. Your involvement in creating and implementing this plan is essential to your child’s success.
Picking Your Child up from School
Children must attend 3 1/2 hours for AM/PM Sessions and a minimum of 6 1/2 hours for Full Day. Children should not be signed out before 11:45 a.m. for AM Session and 4:30 p.m. for PM Session. Parents must observe the ending times for the class. Please check with the teaching staff for hours of operation of your site.

Children are released to only authorized adults, at least 18 years of age, who are listed on the emergency card and with proper photo ID. Parents are responsible for maintaining current names, addresses, and telephone numbers of individuals authorized to pick up their child or who may be contacted in case of an emergency.

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

Late Child Pick-Up
If you are going to be late picking 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 Police Department and/or Child Abuse Center to report the situation to the authorities.

If your child is picked up late, you will receive a late notice. The notice will be filed in your child’s binder. After the third notice, a plan of action will be implemented and it may lead to termination of services.

Transfers
In rare occasions, parents may request a transfer from their existing Head Start classroom to another Head Start location by contacting the Family Advocate/Family Engagement specialist.

Full Day classrooms operate 9 hours each session, according to the program calendar, and children should attend at least 6 1/2 hours every day.

The program is given funds based on your child’s attendance during mealtimes. Therefore, it is very important that children attend school according to the posted schedule in each classroom.

Parents in Our Program
The gains made by your child in the program must be understood and built upon by both the family and community. To achieve this, we involve the child’s 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, participate 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 Volunteering
In order for children to succeed, parents are included in every aspect of the program. Sharing decisions affecting the future of children is the primary aim of parent participation and involvement.

All parents/guardians are encouraged to volunteer in a variety of activities including:

- Local Parent Committee Meetings where issues relating to local matters about the children, families, and communities are addressed.
- Policy Council, which shares decision-making responsibility with the SCCOE Board about overall direction for the entire Head Start/Early Head Start Program.
- Volunteers or observers in the classroom. Your child will love to have you spend time in his/her classroom. Your child’s teacher will coordinate with you certain days for you to volunteer.

Requirements for Volunteers in the Classrooms

Health and Safety Code Sections 121525-121555 and California Education Code Section 49406 stated that regular volunteers participating in the classroom 10 hours or more, per month, must provide proof of current TB clearance. Parent/guardian should make every effort to cover clinic fees for the TB screening. If parent/guardian is uninsured and unable to pay, the program may be able to assist with cost of screening. Please contact the Family Advocate/Family Engagement Specialist for assistance.

Health and Safety Code Section 1596.7995. Beginning September 1, 2016, Law SB 792 requires all day care centers, as part of their licensure requirements, maintain vaccination records for volunteers for influenza, pertussis and measles. Volunteers must show proof of immunization.

- Annually, each person shall receive an influenza vaccination between August 1st and December 1st, unless they submit a signed statement indicating that they have declined to be vaccinated against the flu.
- Volunteers may be exempt from the pertussis and measles vaccination requirement by obtaining a statement from your physician indicating a medical reason why the vaccine cannot be provided or that you are already immune.

Required vaccines are covered at no cost by insurance plans under the Affordable Care Act. Insured volunteers can contact their primary care physician to receive the vaccine. If volunteer does not have insurance and cannot afford cost of vaccines, please contact the Family Advocate/Family Engagement Specialist for assistance.

Sporadic Attendance

Sporadic attendance is three or more non-consecutive absences. If your child has sporadic attendance of 3 or more, within a month, the Family Advocate/Family Engagement Specialist will work with you to develop a plan to improve attendance.

Unexcused absences (consecutive or not) in excess of 10 school days and/or evidence of sporadic attendance, may result in a program transfer or otherwise jeopardize participation in the program.

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

Vacation

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

Daily Arrival and Pick-Up Routine

Parents are required by Department of Social Services Community Care Licensing to sign their child both in and out of the Head Start Program. Each day, the person who signs the child in and out must use his/her full legal signature and record the time of the day. Signing with initials is not allowed [CCR, Title 22, Section 101229.1(a)(1)].

Signing Your Child In at School

Your child must always be accompanied by an adult upon entering the classroom. Parents must sign in the child (initials not allowed) with the time of arrival clearly indicated. The person signing in the child must remain with him/her until health check has been completed by teaching staff on the child, and has been accepted for the day.
In addition, it is important to remind the special education teacher to provide you with copies of your child’s most current IEP for the Head Start Teacher, including quarterly notes of your child’s progress in special education.

Children with an Individualized Education Program (IEP) will transition to Kindergarten according to SB 1831 guidelines.

**Attendance**

We believe daily attendance is essential. A child should be in school every day for continuity of learning and to receive the most benefit from the program. Regular attendance is necessary to ensure your child’s continued enrollment in the program and for the program’s full funding.

If a child must be absent, parents must call the staff, each day, to inform the absence. If the staff does not hear from you, they will call you to verify the absence by phone.

Parents will jeopardize the program’s services if unexcused and sporadic absences do not improve.

**Absences that are Considered Excused:**

- Illness of child or parent
- Family emergency
- Death in immediate family
- Court ordered visitation (verification required)
- Medical/dental appointments for child
- Trips out of the area to visit family may not exceed 10 consecutive days period or two separate consecutive 5-day periods within the program year (must be requested in writing in advance and approved by the Supervisor)
- Extended absences due to medical emergencies (child or parent) must be requested and approved in writing with proper documentation (discuss with your Family Advocate/Family Engagement Specialist)

All other absences are considered unexcused. The Family Advocate/Family Engagement Specialist will conduct a home visit as a follow up absence verification if the teaching staff is unable to contact the family after 3 consecutive absences and family fails to call.

**Local Parent Committee Meetings**

All parents are automatically members of their Local Parent Committee. Parents are encouraged to participate in meetings as an opportunity to get together 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 Head Start staff in selecting employees by participating in the interview process

These meetings are held monthly at each Head Start classroom. Check with the Teaching Staff or Family Advocate/Family Engagement Specialist for dates and times.

**Policy Council**

The Head Start Policy Council (PC) makes decisions about the overall direction of the program 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 program should pursue.

**Policy Council Members**

Policy Council membership is made up of parent representatives from Head Start/Early Head Start centers and representatives from community agencies.

The parents at Local Parent Committee meetings elect parent representatives to the Policy Council. Policy Council meetings are scheduled throughout the year to assure that the Council can act on all of the items that are required to be approved.
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 programs that will benefit the families in the program.
- Be able to learn about the operation of the Head Start/Early Head Start Program, including the budget.
- Gain or increase skills in such areas as budget development, interviewing techniques, parliamentary procedures, policies and procedures development that enhance employment opportunities.

Parent Services

Family Partnership Agreements
The Head Start Program offers every family an opportunity to participate in a family assessment, discuss family’s goals, and develop a family partnership agreement. The most important aspect of working with families is our ability to develop trusting relationships that allow each family to determine what they want to accomplish, how our staff 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 (FPA). The Family Advocates/Family Engagement Specialist 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 Head Start Family Advocate/Family Engagement Specialist are committed to meeting the needs of children and their families through a comprehensive referral system that offers a variety of local community services and resources.

Family Advocates/Family Engagement Specialists are available to assist families with emergency crisis referrals to local community agencies.

10. OHI Other Health impaired: 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. TBI Traumatic Brain Injury: 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. SLD Specific Learning Disability: 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. SLI Speech and Language Impairment: 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.

The Head Start Program individualizes for all children including those with an Individualized Education Program (IEP). Children with IEP will not be excluded from the Head Start Program 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

Head Start teachers collaborate with your child’s special education teacher and specialists to include his/her IEP goals into their individual development plan.

Parents should inform the Family Advocate/Family Engagement Specialist and Teacher if their child has an Individualized Education Program (IEP). Please notify the Head Start Teacher when your child’s next IEP meeting is scheduled so that he/she may attend.
2. **DB**  **Deaf-Blindness:** 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. **DEAF**  **Deafness:** 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. **HI**  **Hard of Hearing:** 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. **ID**  **Intellectual Disability:** 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. **VI**  **Visual Impairment:** refers to partial sight and blindness that even with correction, adversely affects a child’s ability to participate in general classroom activities.

7. **ED**  **Emotional disturbance:** 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. **M**  **Multiple Disabilities:** refers to a combination of conditions such as mental retardation –orthopedic impairment. This does not include deaf-blindness.

9. **OI**  **Orthopedic Impairment:** impairments evident at birth such as club foot, or caused by disease such as poliomyelitis, bond tuberculosis or other causes such as cerebral palsy, amputations, fractures or burns.

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**Transportation**
The Head Start Program does not provide transportation services; however, families who need transportation are referred to available transit resources. In cases of emergencies, bus tokens are provided to ensure attendance, doctor/dentist appointment visits, etc. Tokens are not to exceed 2 weeks at a time except in cases where special circumstances exist and must be approved.

**Home Visits and Parent Conferences**
All parents are asked to participate in two home visits and two parent conferences each school year. Visits in the home are required by the Head Start Program Performance Standards. The teaching staff will schedule the home visits and conferences with you to discuss your child’s classroom experiences and developmental progress and set school readiness goals.

During Home Visits and Parent Conferences, the teacher will discuss your child’s screening results, assessments, and strengths. 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 special 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 Committee and Policy Council meeting dates. Please take the time to review these materials.

**Parent Education Sessions**
Throughout the year, parent education sessions will be scheduled on topics such as nutrition, family literacy, child development, health, etc. These sessions may be held as part of the Local Parent Committee Meetings that all parents are invited and encouraged to attend.
Identifying and Resolving Complaints
All concerns and/or complaints will be processed with respect and confidentiality according to the Santa Clara Office of Education Uniform Complaint Procedures AR1213.

The Head Start Program 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 if it is related to the teaching staff;
3. If after three working days no response has been received from The Supervisor or if the parent believes that the concern has not been addressed, the parents 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 her investigation.

Education

Educational Child Outcomes
Head Start classroom activities are individualized and are developmentally appropriate for the age of children. Children are given opportunities to learn through a combination of self-initiated and teacher directed activities.

Curriculum

Inclusion Policy for Children with Disabilities

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 needed about 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. AUT Autism: refers to developmental disability significantly affecting communication and social interaction usually evident before age 3.
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**
In the event that your child needs a food substitution, notify either your Family Advocate/Family Engagement Specialist or Teaching Staff. The program nutritionist will contact you as needed to develop a plan to address food substitutions.

**Nutrition Classroom Activities**
Children have an opportunity to participate in nutrition classroom activities. These activities can be found on the menu you receive monthly. As part of the curriculum, we use these activities to introduce different foods and increase children’s language, literacy, science, math, and motor skills.

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### Program Policies and Procedures

**Confidentiality**
Head Start collects and maintains information about enrolled children and their families. All information that is obtained orally, in writing, or through observations is considered confidential.

Head Start staff have access to confidential information solely for the purpose of providing comprehensive services to children and families on a “need to know” basis. Head Start Program follows 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 (1301, 1304, 1305, and 1308). If you need assistance obtaining Head Start Program records, please contact your Family Advocate/Family Engagement Specialist.

**Parent Admission Agreement**
Each parent is provided with a copy of the Parent Admission Agreement and asked to review and sign it. The agreement asks parents to make commitments, give permission for their child’s participation, and acknowledge other rights and responsibilities as parents.

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### Preschool Curriculum
The preschool program education provides children with opportunities to develop the skills and confidence necessary to succeed in Head Start and be prepared for kindergarten.

The Creative Curriculum is implemented in all preschool classrooms. It is scientifically based and links to the California State Department of Education Preschool Learning Foundations and the Head Start Early Learning Outcomes Framework. 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 preschool interest areas consist of blocks, dramatic play, toys and games, arts, library, discovery, sand and water, music and movement, and computers.

**Early Childhood Environmental Rating Scale**
Each classroom is arranged according to nationally recognized guidelines for quality early childhood programs. Staff work together to create learning areas, routines, and interactions which provide young children the best opportunities for growth and skill building. Classroom ratings are completed once per year, and action plans are written for improvement.

**Preschool Classroom Daily Routine**
Head Start Teaching Staff implement the curricula by utilizing the daily schedule and including a variety of educational strategies. Your teaching staff will be discussing the classroom daily routine with you and you will also find a copy posted on the Parent Bulletin Board.
The preschool daily routine consists of group time, choice/small group time, outdoor time, story time, meal/snack time, and tooth brushing. Full day programs include a nap time.

The daily routine provides opportunities for children to interact with their peers and adults. A consistent routine gives the children a sense of security in the classroom.

Nap Time
In the full day program, all children are given the opportunity to nap or rest without distraction or disturbances from other activities in the classroom. Children are not forced to sleep but are encouraged to lie down and rest. Children sleep/rest on a mat/cot.

In order to maintain a healthful sleeping place, the program will supply sheets to cover the mats/cots. Blankets for children are to be supplied by the parent. In order for each child to successfully learn how to prepare and fold blankets, we ask that parents provide a blanket small enough for children to handle.

To ensure your child is using clean bedding, we ask that you take the blanket and sheet home every Friday to wash. Pillows are not encouraged because of health reasons.

In the double session preschool program, naptime is not a part of the classroom routine.

Individualizing the Education Program for Your Child

Screenings – The Head Start Program requires that all newly enrolled children be screened in the areas of behavior; sensory (vision and hearing); and developmental within 45 days of entry into the program.

All children are screened each year on ASQ-SE and ASQ-3 except children with IEP and attending inclusion classrooms who are screened only on ASQ-SE. ASQ-SE is a behavioral screening tool. ASQ-3 screens for communication, gross and fine motor skills, problem solving, and personal social skills. The results of these screenings will be shared with you at which time the staff will discuss if there is any concern that might need further assessment.

Meals Served at School
The Head Start Program provides a foundation for your children to experience positive attitudes towards foods and an understanding about good nutrition and eating habits.

Family style meal service is an integral part of our food program; children are encouraged to serve themselves and try all foods, but are never forced to eat.

Food is never used as a reward or punishment in the program.

All meals served to children follow U.S. Department of Agriculture and Head Start Nutrition guidelines. The program receives funds through the Child and Adult Care Food Program for meal service.

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

In order for the program to be fully reimbursed for meals, children must be at school 3.5 hours for the AM and PM Sessions, and 6.5 hours for the Full Day Session according to the times posted in the classroom.

No Outside Food / Peanut / Nut Policy
Due to the increasing number of children who have life threatening allergies to peanuts/nut products, the following policy must be enforced in Head Start 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. There is no guarantee that peanut/nut oil/tree nut product is not an ingredient.

Food Allergies
The Head Start Program tries to accommodate children who may have a food allergy, 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 Advocate/Family Engagement Specialist or Teaching Staff.
• 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 Head Start classrooms. Child-centered consultation assistance is delivered only with written parental consent and parental 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 the health education within the children’s daily curriculum. Children are instructed in the proper tooth brushing procedure and brush daily with fluoridated toothpaste after meals.

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

Nutrition Services

Nutrition Assessment
The Family Advocate completes a Nutrition Questionnaire-Assessment with you. The nutrition assessment takes into account any nutritional and/or cultural needs identified through discussion between staff and parents and also obtained from the general health assessment. This must be completed no later than 90 days after your child’s entry into the program. 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.

Assessing your Child’s Growth and Development
The Head Start Program recognizes that each child is unique and special, with his/her own strengths and needs. Assessment tool used is the DRDP. Teaching staff use multiple sources of information to assess each child. These sources include observation, work samples, parent information, and photographs of children at play.

Child Observation – Teaching staff conduct ongoing observations of your child and implement teaching strategies geared to the needs of each child. This process is documented by recording notes related to the Head Start education outcomes for preschool children.

Work Samples – Teaching staff collect samples of children’s work (cutting, drawing, and writing) each month.

DRDP 2015 (Preschool) – Three times a year, your child’s progress is assessed using the Desired Results Developmental Profile Assessment. Reports are generated from data collected; these reports show strengths and needs, and will be discussed with you during home visits/parent conferences.

Children Whose Home Language is not English
Head Start staff promotes the development of your child’s first language while facilitating 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
Preschool to Kindergarten
Transition is a process, not a one-time event. Head Start supports 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 conference involves you in writing a transition plan 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 skills including social skills, which prepare him/her for kindergarten. Teachers will be discussing your child’s growth during home visits and parent conferences, so that you can follow your child’s progress in skills such as getting along with others, listening, hand-eye coordination, learning the alphabet, counting, and using words to express feelings or ideas. Classroom transition activities will be provided so that children can visit a kindergarten classroom, learn about kindergarten behaviors, expectations, and express feelings about going to kindergarten.

Transition to Kindergarten: Children with Individualized Education Program (IEP)
If your child has an IEP, it is important that you discuss his/her transition to kindergarten with the speech therapist, special education teacher, and other specialists working with your child. Check in with them as soon as services have begun in the program year (preferably before the winter break) as well as close to the time when a transition IEP will be held to determine services for your child in the upcoming year.

Parent-Child Activities in the Classroom

Field Trips
Field trips are planned to enrich and reinforce the curricula; i.e., visiting the local library, fire station, grocery store, kindergarten classroom, and parks. Before a field trip can be conducted, it must be discussed at a Local Parent Committee Meeting and obtain approval from the Supervisor, Head Start Preschool Sites (SPS) / Site Director (SD).

For a child to participate in a field trip, a signed permission slip from the parent is required.

Classroom Celebrations
During the school year, parents and teachers may want to participate in celebrations. These will be discussed with parents at the Local Parent Committee Meeting and approved by the Supervisor. Parent volunteers are incorporated into these activities for children and families. Classroom celebrations should not disrupt the daily routine.

Child Accident Reports
If a child is hurt at school, the teaching staff administer basic first aid. An accident report is completed and you 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 emergency which 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 important for parents to keep all contact information current. If there are any changes such as phone numbers, please take the time to update your contacts on the Emergency Cards.

Consultation
Head Start 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 goal of consultation is to join with parents and teachers in the prevention and early identification of developmental, behavioral, emotional, relational, sensory and social vulnerabilities, and then to assist caregivers in putting into action the appropriate supports 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
Medications, Equipment, and Supplies at School

The Head Start program will do its best to make reasonable modifications by providing appropriate auxiliary aids which would enable a child to participate without fundamentally altering the nature of the program whenever possible.

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 Staff and Family Advocate/Family Engagement Specialist; training will be provided for teaching staff by parent/guardian on how to administer medication and or use equipment/supplies. In some instances, additional training maybe required and will be provided by Family Health Services Supervisor and/or 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 Head start Staff. The Family Advocate/Family Engagement Specialist will need this form to develop a health plan, as needed, before the administration of the medication or use of equipment can begin. Child’s participation maybe delayed or 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 packaging) and clearly labeled by the pharmacy with child’s name, name of medication, directions for giving medication, dosage and expiration date.

End of the Year Celebrations

The teacher is responsible for conducting the last day of school as part of the education program. Parents can offer suggestions and participate as volunteers. The Policy Council recommends that activities such as formal graduation ceremonies with caps and gowns and adult oriented activities not be implemented.

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.

Health Services

Head Start’s commitment to wellness embraces 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, and by promoting positive culturally relevant health behaviors that enhance life-long wellbeing.

Your Child’s Health

Head Start Program emphasizes the importance of early identification of health or mental health needs, which, if undetected or untreated, might cause learning difficulties. The program 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.”

In order to comply with licensing and Head Start requirements, all children enrolled in the program must have on file 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. Physical examinations may be obtained from a child’s regular physician or through the County Public Health Department. The physical must include tests for anemia, blood lead level, tuberculosis risk assessment, 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.

If you are in need of health coverage for your child, refer to page 32 for a list of resources; the Family Advocates/Family Engagement specialists can also assist you to find a medical or dental provider.

Head Start staff will screen children during the school year. Parents will be notified 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.

Screenings completed for all newly enrolled children, within 45 days from first day of attendance, include:

**Developmental** – Done by parent
**Behavior** – Done by parent
**Vision and Hearing** – Conducted by Family Advocate/Family Engagement Specialist if it is not noted on the physical examination

**Daily Health Inspection**
To ensure that each child comes to school healthy, and to avoid spread of communicable diseases, the teaching staff perform daily health inspections during arrival. Parents are required to wait until the health check is completed, before signing-in for the child.

If your child appears not well enough to participate in the normal, everyday activities at the time of entry into the classroom and/or during the day, the parent will be asked to take the child home.

**When Your Child is Ill at School**
If a child becomes ill while at school, the teaching staff will contact the parent immediately. If a parent cannot be reached, the adults listed on the emergency card will be contacted.

In the event the teaching staff is unable to contact anyone listed on the emergency card, the child is cared for away from other children until the parents are contacted and child is picked up.

**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. Child should return to school when 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. 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. Child 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 fever is gone and 24 hours after antibiotic treatment 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 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 days in a row, a doctor’s note may be required upon return.