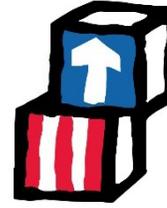


*New River Community Action, Inc.*



*Head Start Program  
1093 East Main Street  
Radford, VA 24141  
(540) 633-3839*



# Head Start Family Handbook 2020-2021

<i>Blacksburg Head Start Center</i>	<i>(540) 552-0490</i>
<i>Christiansburg Head Start Center</i>	<i>(540) 381-7559</i>
<i>Floyd Head Start Center</i>	<i>(540) 745-2120</i>
<i>Rich Creek Head Start Center</i>	<i>(540) 726-2700</i>
<i>Pearisburg Head Start Center</i>	<i>(540) 921-2355</i>
<i>Pulaski Head Start Center</i>	<i>(540) 994-5740</i>
<i>Radford Head Start Center</i>	<i>(540) 731-4107</i>
<i>Early Learning Center @ NRCC</i>	<i>(540) 674-3600</i>

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# HEAD START'S MISSION STATEMENT

Head Start is a comprehensive early education program for children from at-risk backgrounds from birth to age 5. From early math and reading skills to confidence and resilience, we help children build the abilities they need to be successful in school and life. Each Head Start program engages parents as equal partners with their child's teacher and works closely with the local community to adapt to what each area needs. Every child has the ability to succeed, and together, we're supporting more children, families, and communities on their path to success.



## WELCOME to a wonderful year of Head Start!

This handbook is offered to your family as a resource to provide you with important information pertaining to your child's experience in Head Start. Head Start recognizes that you are your child's most important teacher. **YOUR CHILD NEEDS YOU!** Studies show that children whose parents or guardians become involved in their pre-school program have a more successful school experience all through school. In fact, 60% of a child's academic achievement can be directly linked to their parent's involvement in their child's education.

Our Head Start program offers many opportunities for families to have a significant experience while their child is enrolled in the program. A variety of supports are offered throughout the school year. In addition to classroom teachers, each Head Start family has the special opportunity to work with a Family Health Advocate to achieve family and child goals. We commit to create and sustain a partnership of collaboration with all Head Start parents and guardians.

We are pleased to share this school year with your child and family.

## THE EARLY YEARS MATTER

90% of a **Child's Brain** Develops By **Age 5**. At birth, the average baby's **brain** is about a quarter of the size of the average adult **brain**. Incredibly, it doubles in size in the first year. It keeps growing to about 80% of adult size by **age 3** and 90% – nearly full grown – by **age 5**.

[Brain Development - First Things First](https://www.firstthingsfirst.org/early-childhood-matters/brain-development/)

<https://www.firstthingsfirst.org/early-childhood-matters/brain-development/>



Head Start enrollment **requirements** include the following:

- Proof of Birth
- Current Physical Exam
- Current Dental Exam

**Talk to your Family/Health Advocate if you need assistance in meeting the requirements.**

## Policy Council and Parent Committee

### Head Start Policy Council:

The Head Start Federal Performance Standards state that families are to be active participants in the process of making decisions about the nature and operation of the program. Families in Head Start are given the opportunity to represent their Head Start center on the Head Start Policy Council.

### The Policy Council is:

- A decision-making body of parents and community representatives.
  - New Policy Council representatives will be trained yearly to help them become familiar with all the duties they will be expected to perform.
  - Policy Council representatives from each center come together once a month for a meeting.
  - Meetings maybe held virtually to meet the requirements of social distancing and guidelines for large group meetings
  - Childcare and transportation are provided for all meetings.
- It approves or disapproves
  - The goals of the program and ways to meet them.
  - Requests for funds and the use of funds
  - Hiring of staff
- Policy Council also conducts a yearly self-evaluation/assessment of the entire program.



### Parent Center Committees:

Each parent with an enrolled child is a member of the center's Parent Committee. The Parent Committee helps plan, conduct, and participate in informal as well as formal programs and activities for parents and staff.

### Board of Directors:

The New River Community Action Board of Directors provides oversight of the Head Start Program. Meetings are held monthly and are open to the public.

***Although it is not required, we hope you will join and become an active member of Policy Council!!!!!!!!!!***



## Parent Rights and Responsibilities

My rights as a Head Start parent/guardian include:

- to be recognized as my child's primary educator
- to participate in Policy Council and Parent Committee meetings which affect the planning and operation of the program
- to be welcomed in the office, classroom, meetings and special events by all staff
- to be informed regularly about my child's progress
- to always be treated with respect and dignity
- to receive information and guidance from the program that will help my child's development
- to have opportunities to learn about the total operation of the program, including the budget and the level of education and experience required to fill various staff positions
- to be informed about community resources that will assist in improving my family's quality of life
- to offer constructive criticism of the program and to participate in annual program evaluations
- to access my child's file during regular business hours



## 1303.23 Parental rights

### A. Inspect record.

- A parent has the right to inspect child records.
- If the parent requests to inspect child records, the program must make the child records available within a reasonable time, but no more than 45 days after receipt of request.
- If a program maintains child records that contain information on more than one child, the program must ensure the parent only inspects information that pertains the parent's child.
- The program shall not destroy a child record with an outstanding request to inspect and review the record under this section.

### B. Amend record.

- A parent has the right to ask the program to amend information in the child record that the parent believes is inaccurate, misleading, or violates the child's privacy.
- The program must consider the parent's request and, if the request is denied, render a written decision to the parent within a reasonable time that informs the parent of the right to a hearing.

### C. Hearing.

- If the parent requests a hearing to challenge information in the child record, the program must schedule a hearing within a reasonable time, notify the parent, in advance, about the hearing, and ensure the person who conducts the hearing does not have a direct interest in its outcome.
- The program must ensure the hearing affords the parent a full and fair opportunity to present evidence relevant to the issues.
- If the program determines from evidence presented at the hearing that the information in the child records is inaccurate, misleading, or violates the child's privacy, the program must either amend or remove the information and notify the parent in writing.
- If the program determined from evidence presented at the hearing that information in the child records is accurate, does not mislead, or otherwise does not violate the child's privacy, the program must inform the parent of the right to place a statement in the child records that either comments on the contested information or that states why the parent disagrees with the program's decision, or both.

### D. Right to copy of record.

- The program must provide a parent, free of charge, an initial copy of the child records disclosed to third parties with parental consent and, upon parent request, an initial copy of child records disclosed to third parties, unless the disclosure was for a court that ordered neither the subpoena, its contents, nor the information furnished in response be disclosed.

### E. Right to inspect written agreements.

- A parent has the right to review any written agreements with third parties.

## Creative Curriculum

**Curriculum Philosophy:** Our program implements The Creative Curriculum. The curriculum's philosophy says that the best way to help children succeed is to teach them to be creative, confident thinkers. The Creative Curriculum® for Preschool is a research-based, curriculum that reflects 5 essential ideas critical for school success.

1. Positive interactions and Relationships with adults.
2. A child's social and emotional development skills predict success in kindergarten and success later in life.
3. Constructive, purposeful play supports essential learning.
4. The classroom environment supports quality of learning.
5. Children benefit from strong Teacher-Family Partnerships

**Use of Studies:** Throughout the year teachers will guide their classroom through several 4-6 week hands-on, project-based investigations. The topics of the studies are both exciting and engaging. They tap into children's natural curiosity, resulting in a learning environment that is both fun and intentional. The study approach helps children raise questions about the topic, and through exploration and discovery they find answers to their questions.

**Learning Content:** Creative Curriculum addresses all areas of development. It is divided into categories of learning that are aligned with state and professional standards and address development in 9 areas: Social and Emotional, Cognitive, Language, Literacy, Mathematics, Physical, Science and Technology, Social Studies and the Arts.

**Special Support:** The Creative Curriculum allows teachers to individualize for and support every type of learner including dual-language and children with disabilities.

**Hands on Activities:** Hands-on exploration and discovery build lifelong critical thinking skills. Teachers directly teach using 3-Dimensional materials and not through sequenced activities, drills, workbooks or worksheets.

## What is AI's Pals?

The *AI's Pals* program is a social skills building program for children ages 3 to 8. *AI's Pals* includes puppets, songs, and group games that teacher children to:

- Express feelings appropriately
- Use kind words
- Care about others
- Use self-control
- Think flexibly
- Accept differences
- Make friends
- Solve problems peacefully
- Cope in positive ways
- Make safe and healthy choices
- Understand that tobacco, alcohol, and illegal drugs are not for children

It has been shown that *AI's Pals* results in improvements in positive attitudes/behaviors and self-control; an increase in children's social and life skills; and a decrease in aggressive/antisocial behaviors.

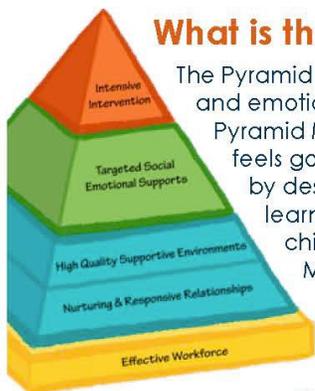
*AI's Pals* also includes a parent component. Letters from AI are sent home regularly to inform parents about the life skills their children are learning and suggest activities parents can use to help their children practice and retain these skills. The curriculum also includes "AI-a-grams" – school-to-home messages, delivered home by the children, that recognize positive behavior noted at school. Be on the lookout!





**Research<sup>1</sup> has shown that the skills your child needs to be successful in the future are social and emotional skills!**

The more socially skilled children are, the more likely they are to succeed in school. Because this is so important for your child, we are using the Pyramid Model in our program.



**What is the Pyramid Model?**

The Pyramid Model is a framework for supporting the social and emotional development of our children. The goal of the Pyramid Model is to create an environment where every child feels good about coming to school. This is accomplished by designing classrooms that promote engagement in learning and by building positive relationships among children, families, and staff. In our use of the Pyramid Model, our classroom staff will work together to ensure that all children understand behavior expectations, receive instruction in social skills, and those who are struggling receive individual support.

The Pyramid Model illustrates that the foundation for helping children develop social and emotional skills is nurturing and responsive relationships and high quality environments. The middle of the Pyramid, teaching of social and emotional skills, is provided to all children with some children receiving additional teaching and support. The top of the Pyramid shows that a few children will need the foundation, the middle AND individualized intervention to address challenging behavior.

To use the Pyramid Model, our program established a leadership team that will provide ongoing support to our staff and families. Our leadership team looks forward to sharing some of the important work we are doing, including teaching program-wide expectations, partnering with families, training staff in teaching strategies, providing classroom coaching to help teachers implement, and using data for decision-making. Stay tuned for ongoing updates about the Pyramid Model in our program!

<sup>1</sup> Jones, D. E., Greenberg, M., & Crowley, M. (2015). Early social-emotional functioning and public health: The relationship between kindergarten social competence and future wellness. *American Journal of Public Health, 105*, 2283-2290.

**What is gained by using the Pyramid Model?**

**FAMILIES**

- Receive information on how to help promote children's social and emotional skills
- Team with teachers to help children grow and learn
- Receive support for preventing and addressing behavior problems

**TEACHERS**

- Are effective in helping children learn social and emotional skills
- Strengthen classroom management skills
- Have information and resources to support families

**CHILDREN**

- Increase their social and emotional skills
- Improve in their readiness for kindergarten

## **Class Schedule**

Each classroom has their own schedule. Please refer to the schedule posted in your child's classroom.

## **Screening and Assessments of On-Going Child Educational Developmental Gains**

Child Educational gains are measured using the TSG (Teaching Strategies Gold.) The TSG is scored 3 times each year and used to make each individual child, classroom, and program wide educational goals. The PALS (Phonological Awareness and Literacy Screen) is used to measure literacy development. The PALS is only completed on 4-year-old children who attend a Head Start/VPI blended classroom. We also complete a Brigance developmental screening, and a speech/language screening on each child upon enrollment. Parents will be given the scores for their child on each of these screenings and assessments 4 times per year. Parents do have the option to opt out of these screenings and assessments and work with their teacher to provide this information in a different way.

## **Growing Up is Hard to Do**

When you see your child play, you are watching your child work hard to learn what he/she needs to know to have a bright future. A child's brain is set up to learn through play. That is why Head Start gives your children plenty of play time. It is important to know that all play time has been actually well planned to help your child learn important skills. This is done providing materials and experiences that are fun yet have a learning experience attached.

- Children have a specific place to store their own personal belongings such as coats and rest time materials. Each day the children have the opportunity to work alone, within small groups, and as part of a large group.
- Full day classrooms receive rest time and afternoon activities.

## **Outside Play**

When weather permits the Head Start children will go outside for an hour each day. Children will not be permitted to go outside if the temperature or wind chill is below 20 degrees, or when the heat exceeds 95 degrees. Teachers will use best practices shortening the length of time depending on weather situations and how the children are dressed. [Flip flops or open toes shoes are not safe for outside play.](#)

## **At Home Learning Plan and Parent-Child Homework**

You are your child's first and most important teacher. Children have many opportunities throughout your daily home schedule to learn. If your child is helping you during everyday tasks like matching socks when you are folding laundry, helping clear dishes from the table, washing their hands, brushing teeth, making a snack, or going on a walk; these are all valuable learning experiences you already do. As you work and play with your child, you are teaching them. Because your child may not be attending school every day, we are creating an at home learning plan with you that is convenient for your family's schedule and provides the resources you may need for learning while your child is at home. The time spent learning with you during regular household routines and these learning experiences suggested by your child's teacher will help prepare your child for school success. So, please enjoy these times together. Another benefit of these parent-child activities is that for each activity completed, Head Start receives something called, "in-kind". In-kind helps our program to meet our annual budget. Please complete all activities and turn back into the school. By simply completing the activities sent home, you are helping your child's brain and helping to keep Head Start available for future families and children.

## Holidays and Celebrations

Holiday- related discussions in the classroom occur ONLY as a result of children's interests and initiative. Daily classroom routines can be interrupted by parties and celebrations and often create confusion for the children, especially those of different cultures who do not relate to the holiday or tradition. We do not have a "no Holiday" policy. What we do have is curriculum guidelines and performance standards that when followed appropriately keep holiday related activities and discussions to a minimum and appropriate for the age and stage of development of the children with which we work.

### **In keeping with our Nutrition Policy and Food Safety, we do not allow families to bring any food or treats into the center to celebrate birthdays or other special occasions.**

"End of the Year Celebration": Preschool graduation events with caps and gowns and related activities have strong significance in many communities. However, these kinds of events can be stressful for children, and can result in expensive costs for families and hours of practice and preparation for children and teachers. Children and families will experience these types of events when children are older and better able to understand and appreciate them. Developmentally appropriate End of Year Celebrations will be organized each year to celebrate children's growth and development.

## Fieldtrips

Children may go on 1-2 field trips per year. You will be notified 2 weeks prior to any fieldtrip. Field trips allow children to experience their community through hands on activities.

## Rest time & naps

Licensing requires that centers who operate 5 or more hours a day shall have a designated rest period for at least 1 hour. A rest mat will be provided for your child. You may send a blanket from home for your child to use during rest time. After the first 30 minutes children not sleeping can engage in quiet activities.

## Bathroom & Toileting:

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

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

Staff members are required to wash their hands with soap and water after each toileting, and to assist children with handwashing, using soap and water.

## Classroom Adults

You will see interns, volunteers, and public-school personnel working in the classrooms. Please feel free to ask them who they are and to talk with them. We welcome everyone being involved so come on in and join us!!!

## Services to Children with Disabilities

Head Start has always had a national policy of open enrollment to all eligible children, including children with disabilities. Since 1974, each program has been required to reserve at least 10% of its enrollment opportunities for children with disabilities. Our program can be an effective inclusive environment for children with special needs, who can often learn more readily when in a group of children their own age than when placed in a separate group for only children with disabilities.

Our staff members work closely with other agencies and organizations serving children with disabilities to meet the child's special needs and to provide the full range of services to the child and family. We provide transitional services into Head Start by making home visits to meet the child and family (with those agency professionals who are already providing services, as possible) and then gather information on the child from parents and professionals working with the child. Throughout the year Head Start services are individualized as needed to give the child the most complete and appropriate Head Start experience as will best benefit the child. Therapists and school personnel work side by side with Head Start staff in the classrooms to provide inclusive services – adults and children all blend into one working unit. Individual Educational Program (IEP) goals are incorporated into daily activities and are referred to for daily and weekly lesson planning.

## Assessment and Referral

Within 45 days of a child's enrollment in Head Start, developmental and most health screenings are completed for that child. When children have a low score on the speech and language assessment or the developmental assessment, and/or when parents or teachers have a concern in any area, Head Start staff will meet with parents to discuss the possibility of making a referral to the local school system for further assessment. If parents are in agreement, a referral is written and signed by the parent. It is then passed on to the local school system. Through the additional school system assessments, it will be determined if a child qualifies for services through the public schools. If they do, an IEP will be written that spells out the type of services and frequency for which the child will receive them. A referral **WILL NOT** be made without the prior consent of the parents.

Throughout the referral process, parents are supported in their understanding and follow-through of the process, and in being an advocate for their child. Head Start staff, to include the Disabilities Services Specialist, will attend eligibility and IEP meetings along with parents for support of the parents, input regarding child skills and abilities, goal setting ideas, and advocacy for the parent and child.

Children should be referred if there is a delay or concern in:

- Physical (Motor) Skills – movement, balance or coordination
- Cognitive Skills – learning or problem-solving, play or pre-academic skills
- Communication Skills – language use or understanding; ability to be understood by others (articulation)
- Social/Emotional Skills – behavior, relationships with others, responsibility
- Adaptive (self-help) Skills – eating, dressing, toileting, attending to tasks

If a child is found to have a 25% delay in any of the above areas, they will be considered eligible for services. At this time the parents, school personnel and Head Start staff meet (this is called an IEP meeting) to discuss what services the child qualifies for and how they will be delivered to the child. In most cases a child enrolled in Head Start will receive services at the Head Start center.

## LICENSING INFORMATION FOR PARENTS

NRCA Head Start Programs are licensed by the Commonwealth of Virginia. The Commonwealth helps assure parents that child day programs that assume responsibility for the supervision, protection, and well-being of a child for any part of a 24-hour day are safe. Title 63.1, Chapter 10 of the Code of Virginia gives the Department of Social Services authority to license these programs. While there are some legislative exemptions to licensure, licensed programs include child day centers, family day homes, child day center systems, and family day systems. The state may also voluntarily register family day homes not required to be licensed.

Standards for licensed child day centers address certain health precautions, adequate play space, a ratio of children per staff member, equipment, program and record keeping. Criminal record checks and specific qualifications for staff and most volunteers working directly with children are also required. Standards require the facility to meet applicable fire, health, and building codes.

Compliance with standards is determined by announced and unannounced visits to the program by licensing staff within the Department of Social Services. In addition, parents or other individuals may register a complaint about a program which will be investigated if it violates a standard.

If you would like additional information about the licensing of child day programs or would like to register a complaint, please contact the Regional Office of Social Services at the address below, or call 1-800-KIDS-LIL (543-7545) Virginia Department of Social Services Western Licensing Office (276) 676-5490

### **Commonwealth of Virginia Department of Social Services licensing standards:**

#### **Child Supervision**

As a reminder and for clarification, ***no child is left unattended at any time during the Head Start day.*** This includes when the child arrives or leaves and during bathroom breaks.

#### **22 VAC 15-30-430. Supervision of children:**

1. Children under 10 years of age shall always be within **actual sight and sound** supervision of staff, except that staff need only be able to hear a child who is using the restroom provided that:
  - a. There is a "system" to assure that individuals who are not staff members or persons allowed to pick up a child in care do not enter the restroom area while in use by the children; and
  - b. Staff will check on a child who has not returned from the restroom after five minutes.

#### **Acceptable and Unacceptable Discipline Methods:**

**We are required by the Virginia Department of Social Services Minimum Standards for Licensed Child Day Centers to inform parents of acceptable/unacceptable discipline methods.**

**The following guidelines are taken from those standards.**

#### **AC 15-30-484. Behavioral Guidance:**

1. In order to promote the child's physical, intellectual, emotional, and social well-being and growth, staff and volunteers shall interact with the child and one another to provide needed help, comfort, support and:
2. Respect personal privacy;
3. Respect differences in cultural, ethnic, and family backgrounds;
4. Encourage decision-making abilities;
5. Promote ways of getting along;
6. Encourage independence and self-direction; and
7. Use consistency in applying expectations.

Behavioral guidance shall be constructive in nature, age and stage appropriate, and shall be intended to redirect children to appropriate behavior and resolve conflicts.

**22 VAC 15-30-487. Forbidden Actions:**

**The following actions or threats thereof are forbidden:**

1. Physical punishment, striking a child, roughly handling or shaking a child, restricting movement through binding or tying, forcing a child to assume an uncomfortable position, or exercise as punishment;
2. Enclosure in a small confined space or any space that the child cannot freely exit himself; however, this does not apply to the use of equipment such as cribs, play yards, high chairs, and safety gates when used with children preschool age or younger, for the intended purpose;
3. Punishment by another child;
4. Separation from the group so that the child is away from the hearing and vision of a staff member;
5. Withholding or forcing of food or rest;
6. Verbal remarks which are demeaning to the child;
7. Punishment for toileting accidents; and
8. Punishment by applying unpleasant or harmful substances.



## Building for the Future

This day care facility participates in the Child and Adult Care Food Program (CACFP), a Federal program that provides healthy meals and snacks to children receiving day care.

Each day more than 2.6 million children participate in CACFP at day care homes and centers across the country. Providers are reimbursed for serving nutritious meals which meet USDA requirements. The program plays a vital role in improving the quality of day care and making it more affordable for low-income families.

**Meals:** CACFP homes and centers follow meal requirements established by USDA.

### Breakfast

Milk  
Fruit or Vegetable  
Grains or Bread  
(*meat/meat alternate may replace grains up to 3 times a week*)

### Lunch or Supper

Milk  
Meat or meat alternate  
Grains or bread  
Fruit  
Vegetable

### Snacks (Two of the five groups)

Milk  
Meat or meat alternate  
Grains or bread  
Fruit  
Vegetable



**Participating Facilities:** Many different homes and centers operate CACFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:

- **Child Care Centers:** Licensed or approved public or private nonprofit childcare centers, Head Start programs, and some for-profit centers.
- **Family Day Care Homes:** Licensed or approved private homes.
- **Afterschool Care Programs:** Centers in low-income areas provide free snacks to school-age children and youth.
- **Homeless Shelters:** Emergency shelters provide food services to homeless children.

**Eligibility:** State agencies reimburse facilities that offer non-residential day care to the following children:

- Children age 12 and under,
- Migrant children age 15 and younger, and
- Youths through age 18 in afterschool care programs in needy areas.

**Contact Information:** If you have question about the CACFP, please contact your

#### **Center/Sponsoring Organization:**

New River Community Action, Inc.  
Head Start Program  
1093 East Main St.  
Radford, VA 24141  
1-540-633-5133

#### **State Administering Agency:**

Special Nutrition Programs: CACFP  
Virginia Department of Health  
Division of Community Nutrition  
109 Governor Street 9th Floor  
Richmond, VA 23219 1-877-618-7282

## USDA Nondiscrimination Statement

- In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.
- Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.
- To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](http://www.ascr.usda.gov/complaint_filing_cust.html), (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights  
1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov). **This institution is an equal opportunity provider.**

# WIC At-A-Glance

WIC clinics statewide are now issuing eWIC cards to WIC families. WIC participants use their eWIC card like a debit card to purchase WIC approved foods at authorized WIC grocery stores.

## Is Virginia WIC For Me?

### Must Be:

- A Virginia resident
- A pregnant woman, breastfeeding woman, or the parent of a child aged birth to five years old
- Household income eligible (*Ex. family of four can earn \$45,510 or less yearly or \$3,793 or less monthly*)
- Assessed as having a nutritional risk

### EBT Benefits:

- Electronic payment system
- Each WIC family gets one eWIC card
- Family's food benefits are added together
- Food benefits are kept in a special family account

## Next Steps

Contact Virginia WIC @  
**1-877-TELL-WIC (835-5942)**  
to connect to a local clinic, check eligibility,  
and set up an appointment



# WIC

## At - A - Glance

WIC gives access to healthy food, nutrition education and breastfeeding support. If you're pregnant, a caregiver, or a mom with a child under 5, you can get the right personalized support for you and your family.



### Nutrition Education

- Shopping guidance
- Prenatal nutrition tips
- Kid-friendly recipes
- Personalized nutrition counseling

### Breastfeeding Support



- Support and education
- Peer counseling
- Lactation support
- Classes and information

- Fresh fruits & vegetables
- Milk, cheese & more
- Cereal & other grains
- Peanut butter, beans & More



### Healthy Food Options

### Referrals & Resources



- Social services
- Substance abuse
- Health screenings
- Immunization services



This institution is an equal opportunity provider

# **Head Start Policies** **& Procedures**



## **CHILD ATTENDANCE**

Children need to attend their program each day. When children miss a day, they do not take part in activities designed to meet their needs. It is expected that all students will attend class daily except in the case of illness or family emergency. Tardiness and early releases are interruptions to the instructional program and are discouraged.

We request parents notify the school if they are going to be absent. We also request parents notify staff by 9:00 am when children will be arriving late, so the appropriate lunch count can be called into the school. When a student shows history of poor attendance and excessive tardiness, families are required to meet with the Family/Health Advocate and/or Site Administrator.

Absence Procedure: Families will be contacted within one hour of start time if a child is absent. If a staff member is unable to make contact with family, a home visit will be completed. If a child is absent for 3 consecutive days or has been absent 10% of the time during any month, the Family/Health Advocate will do a home visit with the family to identify the reasons for the absence and review attendance report with family. An Attendance Improvement Action Plan will be implemented with the family. In situations where absenteeism is chronic; consistently undocumented; unrelated to illness, or similar reasons; or persists even after multiple attempts at family support, the program can choose to drop the child from the program. This step is a last resort, used only after the HS staff have made every effort to keep the family engaged in and benefiting from the program.

**Your cooperation toward good attendance for your child is necessary and appreciated. The more children attend school, the greater growth in their development.**

## **Guidance for Inclement Weather**



We often follow the public-school systems schedule but **NOT** always. For closings due to inclement weather and/or we cannot meet licensing requirements for heat and water; NRCA Head Start will attempt to broadcast closings on: **Facebook as well as our one-call system of closings and delays.** For your child's safety, it is very important to keep your information as well as your emergency contact information updated at all times.

When school is one hour delayed classes will begin 1 hour later than the usual start time. When there is a two-hour delay, classes will begin two hours later than usual. Drop off and pick up will reflect the delay.

Staff who have scheduled home-visits will call if the weather too bad to travel. If the road to your house is clear enough to travel safely, staff may decide to make your home visit at the scheduled time. If the roads seem unsafe, the home visit will be cancelled and rescheduled.

When a two-hour delay falls on an Early Release day, the Early Release will be cancelled.

## Challenging Behavior Protocol

Our program is committed to ensuring the health and safety of each child and family we serve. For this reason, and in compliance with Head Start Performance Standards and State Licensing regulations, we have an Inclusion Policy that defines and outlines our procedures and timelines for supporting children with behavioral challenges.

If a child presents a health and safety concern, our program will work with the child, family, and community Mental Health/Disability Professionals to provide alternate services/program options. With parent participation, a comprehensive Individual Support Plan will be written to address issues and support the child and classroom. It will include positive strategies to ensure safety and address the mental health needs of the child. Team members will include many, if not all, of the following: Child's Parent, Teachers, Family Health Advocate, Site Administrator, Specialists, Mental Health Consultant, TDT staff.

When working with a child that exhibits health and safety behavioral challenges the Mental Health Consultant, Mental Health/Disabilities Specialist, child's Teacher, Specialists will work towards creating a plan that:

- a. Promotes and teaches desirable social-emotional behaviors
- b. Strive to prevent the development and occurrence of disruptive, violent and other inappropriate responses
- c. Provide ongoing parent and teacher supports/education
- d. Assist and recommend referral to community agencies and school system for support and services.

In the event that significant health and safety concerns continue to arise, a child may be placed on temporary exclusion (full or half-day) so that meetings to develop and implement appropriate supports and modifications can occur. This measure must be taken to ensure the safety of all children and staff in the program.

**Child actions** that may require exclusion, after reasonable amount of time and multiple attempts using different strategies, include the following:

- a. uncontrollable tantrums/angry outbursts that could cause harm to self or others
- b. Ongoing physical or verbal abuse to staff or other children
- c. Excessive biting
- d. Disruption in classroom that continues to require one-on-one adult attention for a major part of the day.
- e. If prescribed medication is not available to meet the medical condition

**Parental Actions** that may require exclusion of the child include the following:

- a. Failure to support the Child's Individual Support Plan where parent support is indicated (parents sign off on the plan prior to implementation)
- b. Failure to meet with Mental Health Consultant for family supports
- c. Physical or verbal abuse to staff

The Head Start policy is to respect the individuality of each child and family, to include maintaining their confidentiality in all areas. Therefore, **we will not discuss and/or name a child** who is in need of extra support services as mentioned above with another parent.

**We Will** let a concerned parent know that we are addressing issues as a team and refer them back to this Family Handbook to review our program steps.

The Head Start Director will be the primary decision-maker on all issues related to long-term exclusion of children with behavior concerns.

## Release of Child

Our program is deeply committed to the safety of the children we serve. The following will be strictly enforced.

- Children will only be released to parents/guardians and persons designated as “Authorized Contacts” on the Emergency Contact Information” form.
- The program recommends that these “Authorized Contacts” be adults of 18 years of age or older, however, if due to the family’s needs a person of a younger age is needed to pick the child up from the center this request will be considered on a case by case basis. Virginia Child Care Licensing guidelines will be followed.
- All persons picking up the child from the center must have proper identification at all times, this includes parents/guardians. Staff will refer to the child’s “Emergency Contact Information” form and requests persons to show photo identification as needed.
- If a non-custodial parent has been denied access or granted limited access to the child by a court order, copy of court order must be submitted and will be maintained on file. Center will comply with the terms of the documentation.
- If a parent or another designee fails to pick up a child at the end of the designated full-day or part-day Head Start school time, center staff will follow the Child Release Contingency Procedures outlined below.
- If the parent picking up the child, or the person authorized by the parents to do so, is physically and/or emotionally impaired to the extent that, in the judgment of the staff on site, the child would be placed at risk of harm if released to such an individual, we will not release the child. In this event, staff will attempt to contact the child’s other parent/guardian, or an alternative person, authorized by the parents/guardian. Law enforcement may also be called to assist.

## Arrival & Departure

To ensure your child’s safety,

- Parent/guardian or adult must accompany their child to and from his or her classroom when dropping off and picking up
- Parent may not drop off or pick up their child during bus loading and unloading times
- Child must be signed in when dropping off and signed out when being picked up
- Children must be picked up promptly at the program’s closing time, according to full-day or part-day schedule

If a child is being picked up from the program on a consistently late basis the parents/guardian will be required to meet with their Family/Health Advocate and/or Site Administrator to determine a successful plan of action and follow-up.

## Late Pick-Up Policy

It is essential that parents/guardians pick their children up on time from our program. If an emergency occurs, parents/guardians should call the center and inform the staff of the emergency and provide a time when a parent/guardian or person from on the “Emergency Contact Information” form will be able to pick up the child.

If outside situations or challenges are affecting you picking up your child on time, please speak with your Family/Health Advocate.

## Child Release Contingency Procedures

In the event that a child is not picked up by an authorized person or at the appropriate time, the Head Start program will adhere to the following procedures:

1. The parent/guardian and persons listed on the "Emergency Contact Information" form will be called in 15-minute intervals.
2. The center staff will ensure the safety and well-being of the child at the center until the issues are resolved.
3. One hour after designated school session ends, the Head Start program will contact the state 24-hour Child Abuse Hotline to seek assistance in caring for the child.

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

## Weapons Policy

NRCA and the Head Start Centers are "Weapon Free" zones. Children, Staff, Parents, and Volunteers are not permitted to bring a weapon of any kind onto school vehicle, property or to any school sponsored activity without the permission of the agency or school personnel. If a child is found in possession of a weapon, it will be confiscated, and the parent/emergency contact will be called to pick up the child. The child will not be able to come back to school until they have received permission from the Site Administrator or Main office staff. Staff may insist that a home visit occur before a child return to school.

If a parent is found in possession of a weapon while on school property, they will be asked to leave immediately and may return without the weapon on their person.

A weapon includes:

- Any pistol, revolver, or gun of any kind
- Any knife or razor with a metal blade
- Any flailing instrument such as nun chucks or fighting chain
- Any disk with pointed blades designed to be thrown or propelled
- Any other toy that may resemble the above items at the judgment of center staff



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## Tobacco Free Policy



NRCA and the Head Start Program have a "Tobacco free environment" policy. Smoking or vaping is not permitted during Head Start activities, during home visits with staff or at or on any Head Start center grounds. **Smoking is also not allowed at bus stops.**

If you choose to use tobacco, you must be off Head Start center grounds and always out of site of the children. During outside functions, such as picnics, field trips, etc., you must be out of sight of the children and at least 100 feet away from the activity area. You must pick up and dispose properly of all cigarette butts and trash when you leave the area. We ask that you please not smoke while assisting your child to get on the bus in the morning and when you are getting your child off the bus in the afternoon. Failure to abide by these rules may result in you being asked to leave the premises completely.

## Parent/Guardian Code of Conduct

It is the role of every person at Head Start to treat staff, families and children with respect and dignity. It is an expectation that all adults in Head Start settings conduct themselves in the following manner:

- with courtesy
- with respect
- with patience
- by dressing appropriately
- by modeling appropriate behavior to our children
- by acknowledging and accepting the cultures and practices of other people and families

Under no circumstances will the following behaviors be allowed:

- physical or verbal punishment of children (including siblings or any other non-Head Start children)
- threats to staff or parents/guardians
- swearing and cursing in the presence of children, other Head Start parents or staff
- smoking in the presence of Head Start children or during Home visits from staff
- quarreling, verbal fighting, raised voices towards staff or parents/guardians
- violation of center safety practices and policies
- bringing drugs, alcohol, or weapons to Head Start centers, offices, or to events
- Violation of the Confidentiality Policy
- Violation of any program policy

If any of the above behaviors occur, parents/guardians or friends will be asked by a staff person to stop the inappropriate behavior. If parent/guardians continue inappropriate behavior, staff will call the police. If threats or abuse toward staff or the Head Start program continues in any way, the family may be dropped from the Head Start program.

## Confidentiality Policy

**Confidentiality is of utmost importance at all times!**

When I volunteer my time with New River Community Action, Inc. Head Start Program, I understand I am responsible for maintaining the privacy of any information to which I have heard, have observed, or is shared with me. This information: whether it involves staff, other volunteers, and/or families, will not be the topic of conversation either inside or outside of the program or shared on social media.

## Child Abuse and Neglect

All Head Start staff members are mandated by Virginia State Law to report suspected cases of child abuse and/or neglect.

Head Start maintains a role not only in reporting cases, but also in working to prevent and identify child abuse and neglect situations.

The laws of Virginia states that any teacher or other person employed in a public or private school, kindergarten, or nursery school who has reason to suspect that a child is abused or neglected shall report the matter immediately (within 24 hours).

The child abuse and neglect plan calls for a strategy to inform parents of what state and local laws require regarding child abuse and neglect. It is for this reason that the above information is included in this handbook designed for parents. You, as a parent can help protect children by contacting your local Social Services or calling the Child Abuse Hotline at 1-800-552-7096, if you suspect child abuse or neglect.

**Commonwealth of Virginia law considers leaving a child unattended in a vehicle for any time at all to be grounds for child abuse/neglect. Please do not leave your children alone in your car. Head Start staff are mandated to report any person leaving a child in the car.**

# Head Start Pedestrian Safety Training



PLEASE USE YOUR JUDGEMENT WHEN LEAVING CHILDREN IN THE CAR!!!!

*Ask yourself, am I putting my child at risk? The State of Virginia is proposing a law of making it illegal to leave a child unattended in a vehicle.*

*According to noheatstroke.org, there were 42 pediatric vehicular heatstroke deaths in 2017.*

PARKING LOTS ARE ONE OF THE MOST DANGEROUS PLACES YOUNG CHILDREN ENCOUNTER!!

*According to the National Highway Safety Administration (NHTSA) report published in 2014, an average of 221 children (14 and younger) were killed, and roughly 5,000 were injured in nonoccupant crashes per year. 84% of those involved were under the ages of 4 years old.*

SEAT BELTS SAVE LIVES!!!! BUCKLE UP!!!

*Proper seat belt position is critical. Follow these safety tips when buckling up your child.*

1. Harness straps at top slots above the shoulders.
2. Chest clip should be at arm pit level.
3. Straps must be snug. Try to use the "pinch test". Try to pinch the strap material at the child's collarbone. If you can grab any material it is too loose.
4. TAKE OFF WINTER JACKETS BEFORE

## ✓ Important Safety Reminders at Drop-off/Pick-up:

- ✓ PLEASE SUPERVISE YOUR CHILD AT ALL TIMES
- ✓ Children must be signed in/out each day
- ✓ Make **eye contact** with a staff member when dropping off/picking up. This will ensure that staff are aware that your child is now in their care.
- ✓ Your child must be signed out by persons 16 years of age or older.
- ✓ Children will **only** be released to parents/ guardian or "**Authorized Contacts**" listed on the Emergency Information form.
- ✓ Keep your contact information updated regularly!!
- ✓ The school must have a **signed, written notice** of change in child pick up.  
\*This could also include an email or text from parent's account



## ✓ Parking Lot Safety:

- ✓ ALWAYS HOLD YOUR CHILD'S HAND WHEN WALKING INTO SCHOOL
- ✓ The parking lot is a very busy place during drop off/pick up. In fact, all children are at risk in any parking lot.
- ✓ Please help your child to become a parking lot safety STAR.
  - **STOP:** As soon as you get out of the car, stop and stand still.
  - **TOUCH:** Touch the car (a fun magnet helps). Keep your hand there!
  - **ATTENTION:** Pay attention and look at the cars around you. Listen to your grown-up.
  - **READY:** Wait for your grown-up to tell you it's time to go. Then take his or her hand and go.
  - Always celebrate their success when following your safety rules!!

## ✓ Bus Safety:

- ✓ AN ADULT MUST WALK YOUR CHILD TO THE BUS EACH MORNING & FROM THE BUS EACH AFTERNOON. Hold hands, especially if crossing the street.
- ✓ Children will **only** be released to parents/ guardian or "**Authorized Contacts**" listed on the Emergency Information form.
- ✓ **SAFE RIDING PRACTICES:**
  - Remain seated, facing forward, feet forward
  - Safety belt fastened & shoulder harness in place
  - No hitting or kicking
- ✓ **BOARDING & UNBOARDING:** Hold adult's hand, one step at a time, walking feet.
- ✓ **RECOGNIZE THE DANGER ZONES:** The front, sides, and back of the bus
  - **Safe Practice:** take 5 GIANT steps away from the bus steps before moving in front or behind bus
- ✓ **CROSSING THE STREET:**
  - Wait until bus comes to a complete STOP and the driver signals for you to cross
  - HOLD HANDS
  - Walk, do not run
- ✓ **EMERGENCY EVACUATION PROCEDURES:**
  - Keep quiet, listen and obey instructions of bus driver and/or monitor
  - Walk to emergency exit



## **Registered sex offenders**

Each center will follow Virginia code 18.2-370.5

Sex offenses prohibiting entry onto school or other property; penalty

Every adult who is convicted of a sexually violent offense, as defined in 9.1-902, shall be prohibited from entering or being present (i) during school hours, and during school-related or school sponsored activities upon any property he knows or has reason to know is a public or private elementary or secondary school or child day center property; (II) on any school bus as defined in 46.2-100; or (iii) upon any property, public or private, during hours when such property is solely being used by a public or private elementary or secondary school for a school related or school-sponsored activity, <https://vacode.org/2016/18.2/8/4/18.2-370.5/>

If you are a registered sex offender, every effort will be made to accommodate you and your child's needs when dropping off and picking up of your child. If you have no one else to drop or bring your child to school, staff may arrange pick-up and drop off at a location other than Head Start or school property when there is staff availability to do so.

## **TB test for volunteers:**

**Anyone** who volunteers in our program on a regular basis (at least once a week) and/or assist with meal service are required to have a current TB (tuberculosis) test or TB risk assessment within 21 days of beginning your volunteer duties – unless you have had this test within the past year. Head Start requires a TB test/risk assessment every two years. Anyone assisting with meal service must have a current TB test/assessment before beginning those duties.

## **Injured Child Procedures**

In the event that your child is injured during school hours, Head Start staff will notify you with a written accident form and/or telephone call. In the event of a more serious accident or injury, staff will notify you immediately with a telephone call. In the event that you cannot be reached, individuals listed on emergency contact list will be contacted. **For your child's safety, it is very important to keep your information as well as your emergency contact information updated at all times.**

# Center and Classroom Safety During Covid-19 Pandemic

## Daily Screenings of Staff and Children (Includes Volunteers and Interns)

- All children, staff, and approved visitors will be screened for signs of illness before being admitted to the facility.
- No staff, child, or approved visitor will be admitted into the facility if they have any of the following symptoms:
  1. **Fever, 100.4° F (38° C) or greater, or gives a history of fever within the past 72 hours**
  2. **Cough or Shortness of breath**
  3. **Muscle aches**
  4. **Sore throat**
  5. **New Loss of smell or taste**
- All staff, approved visitors, and children will have their temperatures taken **using a contact-free thermometer** prior to entry into the center.
- If a child or approved visitor has a temperature but is not diagnosed with COVID-19 (Examples; Ear infection, teething, or other common illness) they may return to the center after 72 hours. To return sooner than 24 hours being fever free, the individual must be cleared by a primary care physician or by the local department of health.
- Adults and children presenting any symptoms must not enter the facility and should contact their health care provider to determine if they are related to COVID – 19 or any other illness. For anyone presenting any symptoms, call the COVID-19 Hotline at 844-442-5224. Screening for testing can be found at the following link - <https://www.vdh.virginia.gov/new-river>
- If there is a confirmed case of COVID-19 at the facility, the facility will be closed, and the local Health Department will be contacted to determine the next steps to be determined regarding when to re-open. Children will be provided activities boxes and be counted as Present Off-Site.

## Daily Health and Social/Physical Distancing Practice During Covid-19

- All enrolled children will be met at the entrance and parents or other individuals dropping off or picking up the children will not enter the facility without permission.
- All staff, approved visitors, and children will wash hands with soap and running water upon arrival at the facility.
- All staff and approved visitors will wear a mask while in the center (unless there is a health reason that a mask cannot be worn) washing hands before putting a mask on, and when removing their mask.
- Encouraging the use of face coverings in students, as developmentally appropriate, in settings where physical distancing cannot be maintained.
- Children will have a mid-day safety temperature check before rest time, as applicable.
- Any child who becomes sick during the day should immediately be separated from other children and wait in the **designated area** while waiting to be picked up by a parent or guardian.

Staff will follow disinfection procedures and socially/physically distancing requirements with children on buses.

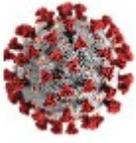
## Health Promotion

### Daily Health Check:

A Daily Health Check will be conducted for each child every day by a trained staff member. A daily health check is required by childcare licensing standards. This health check will be done as soon as possible after the child enters the Head Start center (or a quick check may take place when child gets on the bus) and whenever a change in the child's behavior or appearance is noted while the child is in care. The health check will include: a. Reported or observed illness (such as drainage from eyes, vomiting, diarrhea, cuts/lacerations, pain, or feeling ill) or injury; b. Reported or observed changes in behavior of the child or in the appearance of the child; c. Skin rashes, itching or scratching of the skin or scalp; check for head lice; d. A temperature check if the child appears ill (a daily temperature check will not be done unless required by childcare licensing). This daily health check serves to help reduce the spread of contagious illnesses and to observe that a child is as well as can be to have a fun day of learning.



# What you should know about COVID-19 to protect yourself and others



## Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.



## Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



## Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.



## Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.



## Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.



## Know your risk for severe illness

- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.



CS174057A 06/11/2020

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

# 6 Steps for Safe & Effective Disinfectant Use



## Step 1: Check that your product Is EPA-approved

Find the EPA registration number on the product. Then, check to see if it is on EPA's list of approved disinfectants at [epa.gov/llstr](http://epa.gov/llstr)



## Step 2: Read the directions

Follow the product's directions. Check "use sites" and "surface types" to see where you can use the product. Read the "precautionary statements."

## Step 3: Pre-clean the surface

Make sure to wash the surface with soap and water if the directions mention pre-cleaning or if the surface is visibly dirty.



## Step 4: Follow the contact time

You can find the contact time in the directions. The surface should remain wet the whole time to ensure the product is effective.

## Step 5: Wear gloves and wash your hands

For disposable gloves, discard them after each cleaning. For reusable gloves, dedicate a pair to disinfecting COVID-19. Wash your hands after removing the gloves.



## Step 6: Lock it up

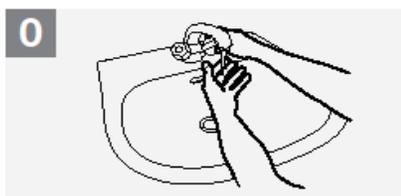
Keep lids tightly closed and store out of reach of children.

[coronavirus.gov](http://coronavirus.gov)

# How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

 Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



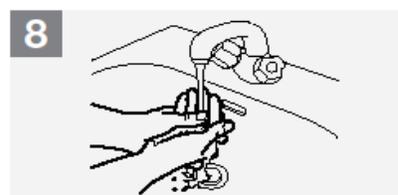
Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



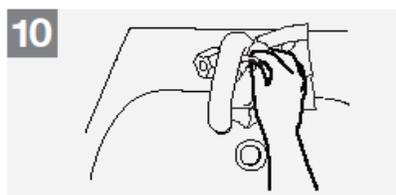
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



World Health Organization

Patient Safety

A World Alliance for Better Health Care

SAVE LIVES

Clean Your Hands

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May 2009

## Medication at the Head Start Center:

In order to ensure your child's safety during school hours, you must notify Head Start staff of any allergies and medications that pertain to your child prior to school entry.

The Medication Authorization Form must be completed and signed by you, the parent or guardian for medications given less than 10 days. For medications given 10 days or longer the child's physician needs to sign also.

- ◆ You are encouraged to discuss with your child's doctor a plan that will allow your child to take medicine only during hours at home.
- ◆ Prescription medication must be in its original container with your child's name, the name of the medication, date of the prescription, and instructions for time and dosage.
- ◆ Non-prescription medication (Tylenol, Triaminic cough syrup, etc.) must be recommended by your child's doctor. It must be labeled and accompanied by written instructions from his/her doctor.
- ◆ General over-the-counter skin care products (sunscreen, diaper ointment, bug repellent) do not require a doctor's prescription, unless prescribed by doctor. You as the parent will still have to give permission to have the skin care product applied.
- ◆ Staff will keep a record of the date and time each dose is given. When the medication is no longer needed, the Medication Authorization Form will be kept in your child's file and unused medication will be returned to you or disposed of properly if you can't be reached after five business days.
- ◆ You will be notified immediately by staff should your child experience an adverse reaction to medication.



### Sick Child Policy:

As a parent, you can help to keep your child healthy as well as any other people your child may come in contact with while participating in the Head Start Program. We ask your help in the following ways:

Call the center to tell an employee that your child is sick and will not be attending. We ask that you let us know of any contagious/communicable disease (including head lice and scabies) your child may have or to which your child has been exposed.

1. Contact your doctor if your child has a high fever or a fever that has lasted several days, a severe sore throat, vomiting which has persisted for more than 24 hours, or if you're in doubt.
2. If your child shows any of the symptoms on the Communicable Disease Chart (found on the next page) while at the Head Start center, you will be called and asked to come as quickly as possible and get your child. Please help us protect your child and the other children by responding promptly.
3. If your child is sick and you cannot be reached, one of the emergency contacts you have listed for your child will be called. It is important that you let Head Start staff know of any changes to your emergency contact list throughout the year.
4. In some situations, children may be required to be excluded from Head Start group activities for longer than listed in the "Then Child Remains Home..." column. The Site Administrator will make that determination on a case by case basis. The local health department or child's physician may be contacted to assist in making that decision.
5. **If you believe your child is too sick to go outside with the other children, you must keep your child home until he/she is completely able to take part in all activities.** Head Start children go outside daily, weather permitting, and due to licensing requirements and staff demands, we are unable to keep one staff person inside with children not participating in outside activities.
6. For some illnesses we may require a doctor's excuse for your child to return to the classroom or group activities. The Site Administrator will make that determination on a case by case basis.
7. If your child has any of the symptoms listed on the Communicable Disease Chart, before they are to come to the center, you must keep him or her at home until the symptoms are gone or until your doctor says it is all right for your child to return to the Head Start Center.
8. Your child (as well as any adult) may be excluded from the Head Start Center if not age appropriately immunized against a communicable disease (such as Chicken pox, Rubella) or if immunocompromised. This exclusion is in affect to protect all individuals. The diseases which can be particularly threatening to the immunocompromised and those inadequately immunized are Fifth disease, Coxsackievirus [hand, foot, and mouth disease], Chicken Pox, and Rubella.

**COMMUNICABLE DISEASES CHART (Summary of the most common contagious diseases from the current versions of VDH Communicable Disease Chart and the VA DSS Child Care Licensing Standards\*\*)**

<b>If the Disease or Illness is..... and the Symptoms are . . . .</b>	<b>Then Child Remains Home.....</b>
<b>Chicken pox</b> – Fever, runny nose, cough, rash of pink bumps, blisters, and scabs.	Until at least 5 days after rash begins or until <u>all</u> sores have dried and crusted and child is fever-free.
<b>Severe coughing</b> – child makes high-pitched croupy or whooping sounds after the cough.	Until symptoms are gone.
<b>Diarrhea</b> - increased number of stools, increased stool water, and/or decreased form that is not contained.	Until diarrhea stops for a full 24 hours.
<b>Fever</b> – A child shall not be admitted to the center if he or she has a fever. During this COVID-19 pandemic a fever is considered to be 101.4°F by non-contact thermometer. The temperature used to determine a fever is subject to change according to child care licensing standards.	If the fever is NOT related to COVID-19, child must remain at home for full 72 hours until fever-free without taking medicine to reduce. Child may return after 24 hours being fever-free without use of medicine IF cleared by primary care doctor or local health department. If fever is COVID-19 related, child must stay-at-home and self-quarantine until cleared by the local health department to return.
<b>Fifth disease</b> – Headache, body aches, sore throat, fever, chills, rash on face, rash on body that makes a “lacy” pattern	Until fever-free, as defined above, for a full 24 hours and the child feels well enough to participate.
<b>Flu</b> (influenza) – fever, chills, headache, sleepiness, muscle aches, cough, sore throat, nausea, vomiting.	Until fever-free, as defined above, for a full 24 hours and the child feels well enough to participate.
<b>Hand, Foot and Mouth disease</b> (Coxsackievirus) – fever, sore throat, runny nose, cough, tiny blisters in mouth, on palms of hands and soles of feet, sore muscles, diarrhea, and stomach ache, pink eyes.	Until fever-free, as defined above, for a full 24 hours and the child feels well enough to participate.
<b>Head Lice</b> – Sesame seed size insects on scalp or hair, eggs (nits) deposited on hair strands near scalp on top of head, behind the ears, nape of neck, excessive itching of the head.	NRCA Head Start follows a no-live head lice policy. Parent or guardian is required to treat child with appropriate head lice killing treatment and work toward removing nits. Child may return to the center after a full 24 hours has passed since the treatment was completed.
<b>Impetigo</b> – Red, cracking, oozing, blister-like bumps which often occur on the face, but may be anywhere on the body.	Until a full 24 hours of antibiotic treatment has been completed or until blisters have healed.
<b>Mononucleosis (“mono”)</b> - Sore throat, tiredness, fever, enlarged lymph nodes, especially of the neck.	Until child is able to participate fully in daily group activities and is fever-free as defined above.
<b>Pink Eye</b> – White or yellow discharge from eyes, often with matted eyelids after sleep; itchy, painful, watery eyes.	Until a full 24 hours of antibiotic treatment has been completed.
<b>Rash</b> – With fever, behavior changes, child is unable to participate, oozing open wound, rash is not healing	Until a doctor determines that the rash is not a contagious disease and is fever-free as defined above.
<b>Scabies</b> - Extremely itchy, red bumps or blisters in a thread like line. Commonly found between the fingers and toes, but can appear anywhere on the body.	Until a full 24 hours of appropriate medication treatment has been completed.
<b>Strep throat</b> (streptococcus) – Sore throat that is red and painful, fever, swollen glands in the neck.	Until a full 24 hours of antibiotic treatment has been completed and fever is gone.
<b>Shingles</b> – Painful, red blisters which occur mostly on the abdomen (belly) and sides.	Sores must be covered; child does not need to remain at home unless recommended by a doctor or when the child is not feeling well enough to participate in activities.
<b>Ring worm (Tinea Corporis)</b> - Skin has reddish scaling, circular patches, with raised edges. The center of the circle is smooth. Cracking, peeling of skin between toes. Scalp has redness, scaling with broken hairs or patches of hair loss.	Sores must be covered and/or child is receiving medical treatment. .
<b>Vomiting</b> – two or more episodes of vomiting within 24 hours.	Until vomiting stops completely for a full 24 hours.

Revised: 8 January 2013 as approved by HS Health Advisory Committee in November 2012

\*\*For communicable diseases, our HS Program will follow the current version of the Virginia Department of Health's **Communicable Disease Reference Chart for School Personnel and DSS Child Care Licensing Standards** except in decisions made by the HS Health Advisory Committee for individual diseases. Parents are to be notified when children at the Head Start Center have been exposed to a communicable disease listed in the above chart. Parents shall be notified within 24 hours or the next business day of the Head Start Center having been informed of a communicable disease, unless forbidden by law, except for life threatening diseases, which must be reported to parents immediately. [22 VAC 40-185-490, C. Preventing the spread of disease. From Standards for Licensed Child Day Centers]

## INSURANCE POSSIBILITIES:



**1-855-242-8282**

<http://www.coverva.org>

### **Welcome to Cover Virginia**

On this website you can learn about Virginia's Medicaid and FAMIS programs for children, pregnant women and adults. You can also get information about health insurance options available through the Federal Marketplace. You can apply online or search for someone who can assist you with your application.

To begin, use the screening tool on the Am I Eligible page or the New Health Coverage for Adults page to get connected to the right health care coverage for you and your family.

If you have questions about insurance, please discuss with your Family/Health Advocate located at the center where your child attends to obtain assistance with locating resources

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## Community Disaster Plan

Every Head Start Center has its own individual “**Emergency Preparedness Plan**”. This plan is posted at each Head Start center. Please ask a staff person about the plan and its location. In the event of an emergency (fire, earthquake, flood, bomb threat, hostage situation, power outage, tornado and/or hurricane), please follow these procedures:

1. Remember that the center staff’s main priority is to get everyone to a safe place as quickly as possible. Be assured they are giving your child any emergency care that may be needed.
2. **Do not** call the center. When possible, the center staff will contact you by telephone to arrange pickup of your child.
3. **Do not** come to the center unless you have been contacted by the center or you are close and radio reports indicate there is no danger in traveling local streets.
4. Community disasters will be reported on the radio. Listen to it for directions. The safest place in case of a disaster is off the local streets, out of the way of emergency and rescue equipment. All centers have posted emergency procedures to follow that apply to each jurisdiction.
5. In the event the center must close due to a community disaster, NRCA, Inc. Head Start will attempt to broadcast closings on: WPSK (101) and Q-99 radio stations and WSLs (Channel 10) television station. Please listen to your local stations for announcements of closings.



## **NRCA Head Start Community Grievance/Complaint Policy 1304.50(d) (2) (v)**

**This policy applies to Head Start only and outlines the steps to follow if a parent of a Head Start child or a concerned citizen has a complaint/grievance concerning a Head Start matter.**

Step #1 Notify the Site Administrator at the local center involved.

**If you still have concerns or the issue has not been addressed:**

Step #2 Notify the appropriate Main Office Specialist (listed below):

### **Radford Main Office Head Start Administrative Staff:**

Director of Early Childhood and Family Service	Sheryl Helm
Administrative Assistant/Data Coordinator	Amy Beecher
Data Management Technician	Debra Taylor
Family Services and ERSEA Specialist	Leah Hill
Disabilities and Mental Health Specialist	Jodi Roop
Teaching Practices and Coaching Specialist	Alison Harris
Early Education & Program Planning Specialist	Roni Fitch
Nutrition & Health Advocacy Specialist	Trina Porterfield

### **If you still have concerns**

Step #3 Notify the Head Start Director **or**

Step #4 Address your concerns with the Head Start Policy Council **or**

Step #5 Notify the NRCA Board of Directors Chairperson.

At any time during this process, the complainant has the option to speak individually with any staff, Policy Council member, Head Start Director, Community Action Executive Director, or the Board of Directors.

Once enrolled, no child or family will be denied an opportunity to fully participate in the NRCA Head Start Program. If you have a concern regarding breach of fairness or equal opportunity, please contact the NRCA EEO/AA Officer. This officer should be contacted if you have a complaint regarding discrimination. No one will be denied an opportunity to enroll in the program because of race, color, creed, belief, religion, gender, national origin, age, mental/physical disability, political affiliation, or past participation in the complaint process.

NRCA Administrative Offices are located in Radford and may be contacted by the following phone number: (540) 633-5133

## *New River Community Action, Inc.*

### *Client Appeal Process*

**IF YOU ARE DENIED SERVICE OR IF YOU HAVE BEEN TERMINATED FROM ANY NEW RIVER COMMUNITY ACTION PROGRAM, YOU HAVE THE RIGHT TO APPEAL THE DECISION. IF YOU DO NOT UNDERSTAND THIS APPEAL PROCESS, PLEASE ASK A NEW RIVER COMMUNITY ACTION STAFF MEMBER TO ASSIST YOU.**

New River Community Action is an equal opportunity agency, providing services to eligible persons regardless of age, sex, race, disability, religion, color, creed or national origin. The agency follows Title VI of the Civil Rights Acts of 1964, Title VII of the Civil Rights Act of 1964, as amended in 1991, Title I of the Americans with Disabilities Act (ADA) of 1992, and federal/state program requirements when determining eligibility for service.

Upon denial or termination of service, a New River Community Action (NRCA) staff member will provide you a written explanation of the specific reason(s) for the denial or termination, along with a copy of the Client Appeals Process. You have the right to appeal the decision by following these steps:

1. You may submit additional information or documents to the NRCA staff member who made the decision to deny or terminate services and request a second review. The staff member will review the additional information or documents and reach a decision within three (3) business days and share with you by phone, letter and email, if available. If you do not agree with the decision, you may proceed to step 2.
2. Within three (3) business days of receiving the denial or termination decision in the mail, you may contact the supervisor by phone, letter or email and request a meeting to appeal the decision. (An NRCA staff member will provide you the supervisor's name, address, phone number and email address.) The supervisor will then schedule the meeting with you to occur within five (5) business days of receiving your request. You may bring a representative to help you with the appeal and the staff member who denied service will be present to respond. The supervisor will reach a decision within three (3) business days and share with you by phone, letter and email, if available. If you do not agree with the decision, you may proceed to step 3.
3. Within three (3) business days of receiving the denial or termination decision in the mail, you may contact the Director of Community Services Programs or the Director of Early Childhood and Family Services by phone, letter or email and request a meeting with to appeal the decision. (An NRCA staff member will inform you which Director is appropriate for your appeal, and the Director's name, address, phone number and email address.) The Director will then schedule the meeting with you to occur within five (5) business days of receiving your request. You may bring a representative to help you with the appeal and the staff members who denied service and the appeal will be present to respond. The Director will reach a decision within three (3) business days and share with you by phone, letter and email, if available. If you do not agree with the decision, you may proceed to step 4.
4. Within three (3) business days of receiving the denial or termination decision in the mail, you may contact the Chief Executive Officer (CEO) by phone, letter or email to request a meeting with the Staff Appeal Committee. (An NRCA staff member will provide you the CEO's name, address, phone number and email address.) The CEO will then schedule the meeting of the Staff Appeal Committee and you to occur within five (5) business days of receiving your request. The CEO will serve as Chairperson on the Staff Appeal Committee, which will consist of the CEO, Affirmative Action Officer, and a staff member from another program selected by the CEO. You may bring a representative to help you with the appeal and the staff members who denied service and the appeal will be present to respond. The Committee will reach a decision within three (3) business days and share with you by phone, letter and email, if available. If you do not agree with the decision, you may proceed to step 5.
5. Within three (3) business days of receiving the denial or termination decision in the mail, you may contact the Chairperson of NRCA's Board of Directors to request a meeting with the Board's Client Appeal Committee. (The NRCA CEO will provide you the Board Chairperson's name, address, phone number and email address.) The Board Chairperson will then schedule the meeting of the Board Client Appeal Committee and you to occur within five (5) business days of receiving your request. The Board's Chairperson will appoint a Client Appeal Committee which will consist of the three (3) Board members, preferably with two (2) members being target representatives. You may bring a representative to help you with the appeal and staff members who denied service and the appeal will be present to respond. The Committee will reach a decision within three (3) business days and share with you by phone, letter and email, if available. This is the final appeal step within New River Community Action. If you do not agree with the decision, you may wish to seek legal advice.

**This appeal process will be posted in each New River Community Action office and a copy given to each person denied or terminated from program services.**

**Approved by the Board of Directors April 18, 2019**



## Emergency Medical Plans

1. Keep cool. Do not panic.
2. Follow OSHA Blood Borne Pathogens Universal Precautions
3. Give child immediate attention – check the scene for potential dangers.
4. **Call 911** if immediate help is needed.
5. If child is bleeding seriously, is unconscious, has broken bones, head injury, or breath stoppage, do the following:
  - Do not move child
  - Call 911** immediately
  - In case of poisoning, dial 1-800-222-1222
  - Do not give liquids or medication
  - Cover child with blanket, cloth, or any available covering
  - Trained staff should administer first aid/CPR, if necessary. Refer to emergency information posted in classroom.
  - Notify Site Administrator
  - Notify Parents
  - Notify Doctor (doctor's name is on Emergency Information Form in child's file)
6. If child needs to be transported to the emergency room, a familiar staff member will accompany the child to the hospital, taking that particular child's Head Start medical and emergency contacts' information. A Hartford Insurance Co. form is to be taken if child incurred an accident/injury.
7. If child suffers from an ailment not mentioned above, proceed with emergency first aid, **call 911** if necessary, and notify Site Administrator and child's parent or emergency contact when parent not available.
8. In the case of an accident/injury, the primary witness to the accident will complete the Enrolled Head Start Child's Accident Report Form as soon as possible after the accident occurred yet by end of educational day for children. Provide parent with a copy of the Enrolled Head Start Child's Accident Report Form and VA DSS Licensing will be notified.
9. Refer to the Instruction page for NRCA Head Start Enrolled Child's Accident Report Form for additional protocol.

## Procedures for Choking

1. Keep cool. Do not panic.
2. Follow OSHA Blood Borne Pathogens Universal Precautions
3. Give child immediate attention.
4. **Call 911.**
5. If child is conscious:
  - a. Give 5 back blows.
  - b. If object is not forced out – give 5 quick abdominal thrusts (Place thumb side of fist against the middle of abdomen just above the navel. Grasp fist with other hand). Give quick, upward thrusts. Repeat until object is coughed up and person breathes on their own or person becomes unconscious.
6. If child is unconscious:
  - a. Try 2 rescue breaths
  - b. If chest does not rise after rescue breaths, give 30 chest compressions
  - c. Look for an object in the mouth/throat area and remove object if seen
  - d. Give 2 rescue breaths
  - e. If breaths do not make the chest rise – repeat steps 6a through 6d.
  - f. Continue cycles of CPR. Do not stop CPR except in one of these situations: you find an obvious sign of life, such as breathing; and AED is ready to use; another trained responder or EMS personnel take over; you are too exhausted to continue; the scene becomes unsafe.
  - g. If the chest clearly rises – check for breathing. Give care based on conditions found.
  - h. If breathing normally, roll child onto one side and wait for help to arrive. Continue to check for breathing.
7. Also, consult the American Red Cross choking chart.

## Procedures to Follow During Convulsions/Seizures

1. Keep calm. Do not panic.
2. If this is the first-time seizure for this child – **CALL 911**. Follow steps 4 through 14 until emergency help arrives
3. If child has a diagnosed seizure disorder, follow physician completed Seizure Action Plan for this child.
4. Have someone take the other children to another area in the classroom away from the affected child.
5. Have someone else contact parent (or emergency contact when parent unavailable) and the Site Administrator.
6. Follow OSHA Blood Borne Pathogens Universal Precautions when giving care.
7. If child is standing or sitting, gently lower to ground to prevent falling, where she/he cannot hurt her/himself. Push away nearby objects.
8. Place on side to prevent choking on secretions and blockage of airway.
9. Loosen tight clothing, especially around the neck.
10. If possible, place a cushion or blanket under child's head.
11. **DO NOT** hold or restrain the child.
12. **DO NOT** force any object between child's teeth.
13. **DO NOT** give food, drink or medication during a seizure UNLESS the medication is a prescribed seizure medication by the child's physician. ONLY properly trained staff are to give the medication.
14. Observe and record all of the child's activity during the seizure including:
  - Time the seizure began
  - Area of the body where seizure began
  - Any movement of the seizure from one area of the body to the other
  - Type of movements of the head, face, and arms during the seizure
15. If seizure lasts 5 minutes or longer...**CALL 911**.
16. If seizure is less than 5 minutes, when the seizure is over:
  - If necessary, clear secretions from mouth. Turn individual onto side to allow drainage of secretions.
  - Monitor breathing
  - Determine level of awareness
  - Determine child's ability to move arms and legs
  - Provide privacy
  - Check for loss of control of urine and stool
  - Check for injuries. If necessary, use appropriate first aid treatment
  - Remain with child until fully conscious. Allow child to rest or sleep as needed.
  - If child remains unconscious after seizure is over, maintain open airway and continue to assess breathing. If necessary, trained personnel should start CPR. **CALL 911**.
17. Allow child to sleep or rest as needed.



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## Dental Emergency Procedures

1. Keep cool. Do not panic.
2. Follow OSHA Blood Borne Pathogens Universal Precautions
3. Give child your immediate attention.
4. Proceed with emergency dental first aid (see below).
5. Inform Site Administrator
6. Inform Parent (or emergency contact if parent unavailable)
7. If child suffers from trauma resulting in lacerations to the mouth:
  - a. Apply a clean, wet paper towel to wound
  - b. If bleeding continues, the dentist that works with your center, or that child's dentist should be contacted immediately by phone.
  - c. If bleeding is severe and cannot be stopped – **CALL 911**
8. If trauma results in the loss of a tooth with well-formed root:
  - a. Plug the sink. Rinse tooth under tap water. Do not scrub.
  - b. Reinsert the tooth into the socket making sure it is in the correct position.
  - c. Allow child to physically hold tooth in socket.
  - d. Seek immediate dental attention.
9. If tooth cannot be reinserted:
  - a. Place tooth in glass of cool water or milk or in wet towel.
  - b. Seek immediate dental attention.
10. If a fracture to one of the teeth or jaw is suspected:
  - a. Seek immediate dental attention and follow his/her instructions.
  - b. Make child as comfortable as possible.
11. When immediate dental attention is needed and the child must be transported to the dentist, the teacher or familiar staff member will transport the child, taking that child's Head Start medical and emergency contact information.
  - a. Contact the child's dentist. Let him/her know you are on your way and what to expect.
  - b. If child doesn't have a dentist, take to child to the emergency room.
  - c. Make a record of date, time, what happened, condition of child, and what the child was doing when accident occurred.
  - d. Center staff contact NRCA finance department (Primary: Finance Director, secondary: Accountant) on how to handle Hartford Insurance for accident.
12. The primary center witness will complete the Enrolled Head Start Child's Accident Report Form. Provide parent with a copy of the Enrolled Head Start Child's Accident Report Form.
13. Refer to the Instructions page for Enrolled Head Start Child's Accident Report Form for further protocol.

Emergency Plans, updated by HS Health Advisory Committee, April 22, 2016 previous editions obsolete  
Reviewed April 17, 2017 no changes needed; reviewed April 13, 2018 changes made; reviewed April 5, 2019 no changes