INTRODUCTION
Welcome.................................................................3
Mission Statement..............................................3
Philosophy Statement........................................3

PROGRAM INFORMATION
Available Program Options ..................................4
Attendance ..........................................................4
Bringing Pets into the Program .........................4
Bringing Toys into the Program ..........................5
Bus Pass Request .................................................5
Calendar .............................................................5
Children Pick Up ...............................................6
Clothing ............................................................6
Parental Access Procedures ............................6
Rest Time ...........................................................6
Sign In/Sign Out ................................................6
Smoke Free Grounds .......................................6
Socializations ...................................................6
Transportation ..................................................6

EDUCATION INFORMATION
Classroom Curriculums .....................................7
Developmental Screening & Assessment ........7
Disabilities ..........................................................7
Home Visitation Curriculums .............................8
PBIS .................................................................8
School Readiness Goals .................................8

HEALTH & WELL-CHILD CARE INFORMATION
Child Health Requirements ...........................9
Daily Health Checks .........................................9
Health Service Advisory Committee .............9
Health Screening ..............................................9
Medication in the Classrooms .....................10
Nutrition ..........................................................10
Wellness Support Services ...........................10

PARENT ENGAGEMENT
Fatherhood Program .....................................11
Home Visits Classroom ................................11
Literacy Program .............................................11
Parent Child School Readiness Activities ....12
Parent Complaint Process .............................12
Parent Meetings/Training .............................12
Parent Teacher Conferences .......................12
Policy Council (PC) ........................................12
Volunteering ...................................................13
Volunteers in the Classroom .......................13

SAFETY
Emergency Card Procedures .......................14
Emergency Closings .....................................14
Evacuation Sites ............................................14
Emergencies Preparedness .........................15
Guns/Weapons Not Allowed .....................15
Locked Facilities ............................................15
Mandatory Reporting .................................15
Parking Lot Safety ......................................16
Pedestrian Safety .......................................16

PROGRAM POLICIES
Access Policy ................................................17
Allergic Reactions ..........................................18
Behavior Management Policy .....................18
Suspension Policy ........................................19
Expulsion Policy ............................................20
Confidentiality of Child Records ................20
Notice to Parents .............................................20
Serious Illness or Injury Policy ....................22
Sick Child Policy ...........................................23
Social Media Policy ......................................23
Welcome to our Early Childhood Program! We are pleased you selected our program to provide high-quality early childhood services to your child.

Our program will not only provide a high quality early childhood education to your child but we will also work hard to offer your family opportunities for growth and support. We will provide you with many experiences, connections and resources that can help you realize your vision for yourself and your family and will work with you on accomplishing your goals. The more you participate in our program the more rewarding the experience will be for you and your child.

This Parent Handbook is designed to give you an overview of our program’s services and provide you with very important information about our policies and procedures. We encourage you to read through the handbook to learn about the main components that are essential in providing a safe, enjoyable and educational experience for your child. Please keep this handbook in a safe place so that you can refer back to it as needed.

We look forward to an exciting and rewarding year as we partner with you as a team in order to provide the support your child needs to succeed in school and in life!

Sincerely,

Rachael Ostermyer
Early Childhood Director
Community Action Agency of Siouxland
712-274-1610 ext. 230

OUR MISSION
To promote school readiness for children and families through the provision of education, health, nutrition, mental health, and family support services.

PROGRAM PHILOSOPHY
The Community Action Agency of Siouxland Early Childhood Programs promote school readiness by enhancing the social and cognitive development of children through the provision of education, health, nutritional, social and emotional services to enrolled children and families. Guided by the HighScope and Parents As Teachers curriculums, we believe that children learn best by pursuing their personal interests and goals while having support from staff and families. Children are encouraged to make choices about materials and activities in order to support learning through play and exploration. Staff supports children as they pursue their choices and plans, ask and answer questions, explore, solve problems, and interact with classmates and adults. Staff and parents provide children with a wide array of materials and plan experiences that build on children’s interests and extend their learning while taking into consideration each child’s individual needs. We believe that children learn best when their health and nutritional needs are met; therefore, we provide healthy meals which follow federal and state nutritional guidelines, provide health lessons, and ensure that all children have access to and receive necessary health screens and follow up treatment, if needed. Since parents are the first educators of their child, we believe strongly in the importance of engaging them in their child’s learning while helping them make progress towards their own educational, literacy and employment goals.
AVAILABLE PROGRAM OPTIONS

Home Visiting – The home visit option offers services in the home all year to pregnant women and children age 0-3 within Woodbury County. The weekly 90 minute home visits are done with children and parents; they are scheduled to meet parent’s needs. Two group activities are also held each month with activities for parents and children to join in.

Parent As Teachers (PAT) – This home visiting option provides home visits all year to pregnant women and children age 0-5 within Woodbury County. The numbers of home visits are determined by the families’ needs, while some families may need weekly home visits others may only meet two times a month. Two group activities are held each month with activities for parents and children to join in.

Classroom – The classroom option offers services to children, ages 6 weeks to 4, in a preschool setting. We have 29 classrooms within Woodbury County. Classes usually run September through May. We do have 7 classrooms that serve 6 weeks to 36 weeks that run all year long. Family services are also provided to parents/guardians of all enrolled children.

ATTENDANCE INFORMATION/Classroom
The program is to get your child ready for school. Being in school is very important to establish a regular schedule. Your child must be in school daily on time. Attendance in the classroom and on home visits is a very important for each child to do well in school. In our programs, we must have every child at school 90% of the time.

If your child misses a day or is running late for any reason, please call the school before 8:30 in the morning in order for us to plan lunch for the day. If we do not hear from you by 9 a.m., the staff will call to find out why your child missed school.

If 2 days are missed in a row and we have not heard from you; or you miss classes on a regular basis, staff will come to your home. For home based, if you must cancel your home visit or your home visitor must cancel, there will need to be a make-up visit for that same week. If your child misses too many classes or home visits, we will make every effort to find out why and assist families whenever possible. If this does not get better we will be looking into it more and a parent meeting will be held to see if this program is the best for the family. The program is here to work with you. We want to be caring and helpful to family needs and difficult situations.

ATTENDANCE INFORMATION/Home Visit
Early Head Start: you must complete 46 home visits per year. Home visits will be once a week for approximately 90 minutes.
Parents As Teachers: you must complete 2 visits per month – 24 visits per year. Home visits are approximately 60 minutes twice a month.

If you must cancel your home visit, contact your Home Visitor to reschedule for that same week. If the Home Visitor must cancel, a time will be rescheduled for that same week.

If you have poor attendance, our program will work with you to improve it. The program will call you and stop by your home for contact. A letter will be sent to you telling you to contact us to keep the program.

BRINGING PETS INTO THE PROGRAM
Pet permission forms must be completed before any pets can be brought in. Pets that are brought in to visit must appear to be in good health and disease free. Proof from a vet office will be required. Service animals will be allowed as long as their behavior is not a direct threat to the health and safety of others.
BRINGING TOYS INTO THE CLASSROOM/SOCIALIZATIONS
Our classrooms provide enough toys for children to play with. It is not needed for children to bring toys from home unless they are for an activity.

BUS PASS REQUEST
We have limited funds to help families with a city bus pass. If you have problems with transportation to and from the classroom you may request one. The bus pass must be used to take the child to and from school. If you fill out a Monthly Bus Pass Request it does not guarantee that it will be approved. Each request is taken into consideration on an individual basis. The request must be filled out monthly by the parents. Once the bus pass is approved, your child’s attendance will be monitored closely. If your child’s attendance falls to an extreme low, you will no longer receive a bus pass.

CALENDAR 2019 – 2020/Classroom – Subject to Change

<table>
<thead>
<tr>
<th>August 2019</th>
<th>Parent Orientation</th>
<th>January 2020</th>
<th>No Class (Holiday)</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 29</td>
<td>Parent Orientation</td>
<td>January 20</td>
<td>No Class (Holiday)</td>
</tr>
<tr>
<td>September 2019</td>
<td>First Day of Classes</td>
<td>February 2020</td>
<td>No Class (work day)</td>
</tr>
<tr>
<td>September 4</td>
<td>First Day of Classes</td>
<td>February 20</td>
<td>No Class (work day)</td>
</tr>
<tr>
<td>September 26-27</td>
<td>No Class (work day)</td>
<td>February 24-25</td>
<td>Conferences - No Class</td>
</tr>
<tr>
<td>October 2019</td>
<td>No Class (work day)</td>
<td>March 2020</td>
<td>No Class (work day)</td>
</tr>
<tr>
<td>November 2019</td>
<td>No Class (holiday)</td>
<td>April 2020</td>
<td>No Class (work day)</td>
</tr>
<tr>
<td>November 25</td>
<td>No Class (work day)</td>
<td>April 6</td>
<td>No Class (work day)</td>
</tr>
<tr>
<td>November 26-27</td>
<td>Conferences - No Class</td>
<td>April 7-9</td>
<td>Home visits-No Class</td>
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<tr>
<td>November 28-29</td>
<td>No Class (Holiday)</td>
<td>April 10-13</td>
<td>Spring Break</td>
</tr>
<tr>
<td>December 2019</td>
<td>Winter Break-No Class</td>
<td>April 24</td>
<td>Snow Make-UP Day</td>
</tr>
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<td>December 23 – Jan 3</td>
<td>Winter Break-No Class</td>
<td>May 2020</td>
<td>No Class (work day)</td>
</tr>
<tr>
<td>January 2020</td>
<td>No Class (work day)</td>
<td>May 1</td>
<td>Last Day of Class</td>
</tr>
<tr>
<td>January 6</td>
<td>Children return to class</td>
<td>May 20</td>
<td>Last Day of Class</td>
</tr>
<tr>
<td>January 17</td>
<td>No Class (work day)</td>
<td>May 20</td>
<td>Last Day of Class</td>
</tr>
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</table>

2019 – 2020 Home Visitation Calendar

There are no home visits or socializations on the following holidays:
- September 2nd
- November 11th
- November 28-29th
- December 24 & 25th
- January 1st
- January 20th
- April 10th
- May 25th
- July 4th
CHILDREN PICK UP
Please make sure you are at your center to pick your child up on time. Consistent late pick-ups will be addressed with parents. If the center closes and parents or emergency contacts are unable to be reached, the police will be contacted.

CLOTHING
Expect your child to get dirty! We use a large variety of materials and many of them are messy. Please send an extra change of clothing for your child to keep in the classroom and bring along a change of clothing to socials and program events. Include a pair of pants, shirt, socks and underwear. Mark all clothing with your child’s name. Please send it in a plastic grocery sack or backpack also identified with your child’s name. Your child should be dressed for the season of the year. Socks and shoes are recommended to be worn at all times. We request that children not wear flip flops, sandals, boots, or heeled shoes as they can limit children’s full participation in all learning activities.

PARENTAL ACCESS PROCEDURES
Parents have unlimited access to their children and their children’s classroom any time the classroom is open and when their child is in attendance, unless parental contact is prohibited by court order. If there is a court order it is the custodial parent’s responsibility to provide a copy of this to the program.

REST TIME
Rest time will be a part of every child’s day. Blankets will be provided, it is not necessary for parents to send any bedding to school.

SIGN IN/SIGN OUT
- Children must be signed in and out each day.
- This is a time to visit with teachers about your child’s day
- All persons picking children up must be listed on the emergency card and be at least 14-years-old.
- Photo ID may be required.

SMOKE FREE GROUNDS
Smoking is not allowed in our facilities or on our grounds. This includes parking lots, sidewalks, and entrances.

SOCIALIZATIONS
Social groups are held twice a month for all families in the Early Head Start and Parents as Teachers programs. Everyone in the family is welcome to attend these fun activities. It is a great opportunity to share information with others. You will learn about age-appropriate activities that parents and children can do together. Attendance is strongly encouraged and recommended!

TRANSPORTATION
Your worker can assist you in keeping medical appointments for your child. For help with these appointments please contact your worker as soon as possible. The decision to assist you with transportation is up to your worker. Our goal is to promote independence. It is our objective to assist you in finding another transportation possibility.
EDUCATION INFORMATION

Classroom Curriculums

HighScope –
- Hands on learning
- Consistent routine
- Safe and inviting classroom
- Shared control
- Allows for independence and creativity
- Allows for sharing and problem solving
- 58 Key Developmental Indicators

Second Step Curriculum (Head Start classrooms) –
- Weekly lessons
- Feelings and friendship skills
- Safety skills

Literacy –
- Planned language approach
- Daily teaching

I Am Moving, I Am Learning (IMIL) –
- Music and movement
- Healthy food choices

DEVELOPMENTAL SCREENING & ASSESSMENT

Developmental Screening: Staff will screen children’s development within 45 days of starting preschool. The screening helps teachers determine children’s strengths and needs. All results are shared with parents.

Social/Emotional Screening: Staff will complete a social/emotional screen on each child within 45 days of starting. The screening helps teachers determine children’s strengths and needs. All results are shared with parents.

Assessment: Our program uses Teaching Strategies GOLD to assess children’s skills. The staff enters notes daily to document and track each child’s progress. The home visitors track each child’s progress weekly.

**Results are used to determine children’s needs and to help get additional services, if needed.

** All staff completing assessments and screenings have been properly trained to ensure accuracy in determining children’s skills. Staff completing assessments maintain reliability in scoring assessments properly.

DISABILITIES
- 10% of enrollment is children with disabilities.
- Staff and families work together with outside partners to meet the child’s needs.
- Parents are asked to participate in meetings and goal writing.
Home Visitation Curriculums

Parents As Teachers Curriculum – Parents as Teachers has a vision that all children will grow and develop to reach their full potential. Isn’t that what we all want for our children? You will partner with a home visitor focused on your child’s healthy growth and development. Your home visitor will personalize information for your needs, concerns, and hopes. Together you will discuss goals for you and your child. You will build on your strengths and skills.

- The love you have for your child and your warm, responsive interactions support her trust in this new wonderful world. With your love and interactions, she will grow and thrive.
- Share what you see your child doing. Your parent educator will help connect those behaviors and actions to what is happening in her development.
- You are building a healthy, nurturing environment for your child. Your parent educator is there to broaden your knowledge as you make decisions for your child and family.

Prenatal Curriculum – Partners for a Healthy Baby Curriculum’s main goal is to help with a healthy pregnancy. With visits from the home visitor and the nurse you will learn how to:

- have a healthy pregnancy.
- deal with physical and emotional changes.
- have a strong bond with your unborn baby.
- manage stress during pregnancy.
- identify early signs of problems.
- prepare for parenthood.

Pregnant women receive visits from the home visitor and from the nurse during pregnancy. The nurse will visit one more time after the baby is born.

POSITIVE BEHAVIORAL INTERVENTION & SUPPORT (PBIS)

- Improves social skills
- Reduces challenging behaviors
- Expectations – Take Care of Yourself, Take Care of Others, Take Care of Your Home/School

SCHOOL READINESS GOALS

The goals below were developed based on parent and teacher surveys. The goals are reviewed and approved annually.

Approaches to Learning
1. Children will develop and demonstrate positive approaches to learning.

Social and Emotional Development
2. Children will develop and engage in positive relationships with adults and other children.
3. Children will manage feelings and behaviors.

Language and Literacy
4. Children will understand and use language.
5. Children will increase literacy skills.

Cognition
6. Children will increase math skills.

Perceptual, Motor, and Physical Development
7. Children will develop motor skills.
HEALTH INFORMATION

The program works with families to keep children healthy. The Health Manager and your Family Advocate or Home Visitor will remind you when it’s time to take your child to their well child exams and dental exams. They will also help you with follow up exams that need to be done, like getting cavities filled. If your child has special health care needs in the classroom, the Health Manager will get information from you and write a plan to help meet those needs. It is important that all your child’s health exams are done and the follow up appointments are kept.

The Program needs the following:

- Immunization Record (if the child is behind on shots you can call Siouxland District Health Department to schedule at 712-279-6119)
- Well Child or Physical Exam
- Dental Exam
- Hemoglobin (blood test- iron, done at 12 months of age for children less than 3 years)
- Blood Lead level, one done at 12 months if less than 2 years old
- TB skin test for children with a risk
- Allergy information from physician if child has allergies
- Medication forms if needed during school hours
- All follow up medical appointments including your family doctor, specialists, eye doctor, and hearing follow ups

DAILY HEALTH CHECKS AND REPORTS

In the classroom, the staff will greet you and your child at the beginning of each day. Take this time to tell your teaching staff about any health concerns like recent illness or injury. Be sure to call your child in sick if he/she has a fever or is too sick to participate in school. This helps stop the spread of germs. Parents of children that are ages 6 weeks – 2 years will receive a written daily report about their child’s day. Parents can receive the report by e-mail, text, or printed.

HEALTH SERVICES ADVISORY COMMITTEE

The Health Services Advisory Committee (HSAC) is a group of people who are health professionals, community members, and parents. The committee makes recommendations to the health and program staff. The committee discusses subjects such as dental health, mental health, nutrition, and general health topics. If you would like to be part of the committee please contact us! 712-274-1610

HEALTH SCREENINGS

The Health Manager and staff will test (screen) your child’s vision and hearing. The screen will show if your child should go to the doctor. We will help you find an eye doctor or have you see your family doctor if needed. We may also take your child’s blood pressure, head circumference (if under age 2) and weigh and measure your child. If your child is 3 years old or older, his/her height and weight will be used to figure out their BMI (Body Mass Index). You will be notified of your child’s BMI so that you can discuss any concerns with your doctor.
MEDICATION IN THE CLASSROOMS
Medications should always be given at home if at all possible. If medication has to be given at school, the Health Manager (Nurse) has to be told. The child’s doctor has to complete a form and sign it. The Teacher cannot give any medication to your child until the forms are done. This can take time to get the order and the signatures. Please let us know as soon as possible if medication will be needed. (If you would like a copy of the medication policy, ask your Family Advocate.) All medications kept at school will be stored in a locked container.

NUTRITION
We provide nutritious meals and a snack each day in the classrooms. Food is never used as a reward or a punishment. We eat “family style” in our preschool classrooms. Healthy food is offered and children learn to fill their own plates. Children who have food allergies will need a special menu. The program will follow the child’s doctor’s order. The program receives money from the Child and Adult Care Food Program that helps pay for meals. The Child and Adult Care Food Program has rules our program has to follow. One of the rules is about food brought from home. Any food brought in to the classroom has to be store bought and wrapped. If you want to celebrate your child’s birthday or special occasion you might choose some way other than bringing food. You might donate a book to the classroom and write your child’s name and the date donated in it. Our program also does monthly cooking with the children. Children can learn lots of things during mealtime!

Our home visitation program offers nutrition lessons. The program also gives information on healthy foods, nutritious snacks, and physical activity. During food experiences, the home visitor brings a food item to the home to learn about and taste. Nutritious food will be served at socializations. No outside food should be brought to socializations. Parents and children eat together, learn about the food, and practice good table manners!

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (800)795-3272 (voice) or (202)720-6382 (TTY). USDA is an equal opportunity provider.

WELLNESS SUPPORT SERVICES
Your child should know, accept, and enjoy who they are. Children should always feel like they can help themselves. They should use their body and minds to express themselves in positive ways. If needed, our program has a Mental Health Consultant who can visit the classroom to see how the classroom staff and child interact. The consultant can help the child and staff in the daily routine.
PARENT ENGAGEMENT

Children's success in school is very important to parents and our program. One way to help our children is by being involved in your child’s program’s experience. Engagement is about building relationships with families to support the families’ well-being. It is also relationships that are strong between parents and children to continue learning and growth within them. Parent, Family, and Community Engagement is a plan for growth to reach goals that lead to positive and long lasting change in children and families. During the year your worker will work with you to set goals based on your family’s need.

FATHER ENGAGEMENT
The program is open to all parents, including fathers and father figures. A father figure is any male that is a role model in your child’s life. All parents are encouraged to be active in their child’s classroom and home visit. Throughout the year, the program will offer events to engage all parents with a focus on fathers. Be watching for Father and Kids Night events. Parent meetings will have a focus time on father engagement. Be sure to attend your parent meeting to learn more.

If you have a baby on the way and mom is in Early Head Start, supports for fathers will be part of the home visit to learn ways to help the baby develop and grow healthy before and after it is born.

HOME VISITS Classroom
Classroom staff and Family Advocates will set up times to come to your home for home visits during the year. Each family will receive 2 home visits from teachers and 2 home visits from their Family Advocate. Home visits are opportunities for staff to get to know your family. The teacher will share information about policies and procedures, classroom activities, and other information about childhood growth. Parents have the opportunity to talk about their child’s growth, express any concerns and set goals. The visits with the Family Advocates will give the parents the opportunity to talk about their strengths, areas for improvement, and individual family needs. Together, you and the staff will complete the Family Partnership Agreement with family goals.

LITERACY PROGRAM
Our program helps parents who want to get their HSED High School Equivalency Diploma (GED) find the right place for them. We can help with testing costs. Parents interested in attending English as Second Language (ESL) classes will be guided to programs that offer classes. Contact your worker for additional information. A Family Book Club is held each month. These groups read a book and have a parent and child activity. The families attending will receive that book each month.

LENA Home helps parents learn new ways to improve their child’s communication skills. LENA uses a “talk pedometer” to see how many words your baby is hearing. Like wearing a fitbit for measuring your steps, this counts your words. LENA measures how many words your baby hears and how many sounds or words they make. All families in the Early Head Start home visitation program have the option to participate in LENA Home.
PARENT CHILD SCHOOL READINESS ACTIVITIES
For the home visitation programs, parents will be provided with activities to complete with their child in the home. For classroom, staff will provide weekly activities in the classroom for parents to complete with their child. Your child will make twice the progress as parents and staff work on the same needs. The time spent working on these activities will keep our program running.

PARENT COMPLAINT PROCESS
We try to offer the best services possible to your family but there may be a time that you have a concern or complaint about services provided. We ask that you first have a conversation with that person about the concern to see if you can resolve it. If this is not possible or the concern is not resolved, please take your concern to the appropriate manager listed below:

Concerns within classrooms: Early Childhood Assistant Director, Christie Beatty - 274-1610 ext. 247
Concerns within home visitation: Family Service Manager, Michelle Saravia – 274-1610 ext. 233

PARENT MEETINGS/TRAINING
Parent meetings are every other month in your child’s center. You can participate in activities and get to know other parents and the program. You will have the opportunity to plan activities and chose topics of interest for following meetings. Parents that have children in the program are encouraged to attend and are able to represent their classroom at Policy Council. There will be training events offered throughout the school year. These topics are based off interest from parents.

PARENT TEACHER CONFERENCES
Parent teacher conferences are 2 times a year or more, if needed. This is an opportunity for parents to increase their understanding of their child’s educational growth. During conferences, parents will team up with classroom staff to review evaluation information and make individual goals.

POLICY COUNCIL (PC)
Each classroom elects one Policy Council Representative at the Parent Meetings. The Early Head Start elects 2 representatives. Members work closely with staff to make decisions which will best benefit the program. When you attend a PC meeting you represent yourself but also the other parents in your classroom. In order to represent them well, you must know their feelings and opinions on the matters being considered by the Policy Council. Policy Council meetings are held monthly. Members receive a notice and a packet in the mail approximately one week before the scheduled meeting. A light dinner and childcare is provided for the meeting. Transportation can be arranged if needed.
VOLUNTEERING
Parents are welcomed to volunteer in the classroom during the year. Bi-lingual volunteers are needed too. Opportunities include:

- Reading books
- Assist with classroom activities
- Help during mealtimes
- Boost children to learn
- Be positive role models
- Helping children develop good social skills
- One-on-one with children
- Help them adjust to the classroom
- Help interpret for the children
- Help teachers communicate with parents
- Translating classroom postings

We have to raise over $1.2 million in In-Kind (volunteer time) every year. When you volunteer, you help us get closer to our goal!

- How? – Every volunteer hour = $16.34, if you volunteer 3 hours, you give us 3 x $16.34 = $49.02.
  If you are interested in volunteering ask staff for a Request to Volunteer form. You will be contacted by a manager and asked to attend a volunteer orientation. During this time you will be asked to sign a waiver. It gives our agency permission to conduct an:
    - Iowa criminal history record
    - FBI national criminal history record (fingerprinting)
    - TB test (if needed)

You will not be able to volunteer until you have completed this orientation, record checks have been processed and approved. All volunteers must be at least 16 years of age.

VOLUNTEERS IN THE CLASSROOM
Throughout the year, volunteers may be present in your child’s classroom. All volunteers will be required to have a thorough background check. Volunteers will only work with your child under the direct supervision of teaching staff and no children will ever be left alone with volunteers.
EMERGENCY CARD PROCEDURES
Each child’s emergency card must be complete and accurate. If we do not have a complete emergency card, your child may not be able to attend school. We must have a current address and working phone number for parents/legal guardians.

- Your child will only be released to people listed on the emergency card. Authorized persons must be at least 14 years old. **We WILL NOT accept a note or phone call allowing someone else to pick up your child.**
- Please tell people listed on the emergency card to bring a photo ID. If they do not have ID, then you must bring them to the classroom to meet the staff.
- If someone not listed on your emergency card comes to pick up your child, we will not let them go with them.
- Please let your teacher know of any address or phone number changes.

(If parents/guardians cannot agree about people to be on the emergency card, then a meeting will be held with program staff. Staff will work with parent/guardians to complete the emergency card. If changes need to be made later, the initials of both parents/guardians will be required.)

EMERGENCY CLOSINGS
Please watch and listen to local television and radio stations for snow days. If you opted in for text messages you will also receive text messages from school messenger, concerning emergency closings.

- When the Public Schools close:
  - Head Start classrooms close
  - Home Visits and socializations will cancel

- When the Public Schools have a late start:
  - Head Start classrooms will begin at 10:30
  - Home visits & socializations - to be determined

- When the Public Schools have an early out:
  - Classrooms will dismiss at the same time as the Public Schools for a winter related early out.
  - Home Visits & socializations - to be determined

EVACUATION SITES
Each Head Start location has an evacuation site. In case of an emergency these sites is where your child will be transported to. Practice drills to our evacuation sites are held two times per year.

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Distance</th>
<th>Phone</th>
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<tbody>
<tr>
<td>English</td>
<td>L &amp; L Laudromat</td>
<td>1056 feet</td>
<td>(712) 277-2668</td>
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<td>1906 Court St.</td>
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EMERGENCIES PREPARENESS

Our program has an Emergency Preparedness Plan that helps us be prepared to take care of your child in an emergency situation. Policy number 9.40 states: The program will maintain an Emergency Preparedness Plan that will include but not be limited to:

- Preparedness and Precautionary Measures
- Training and Drills
- Emergency Supplies
- Emergency Procedures
  - Evacuation
  - Shelter in Place
  - Lock down
- Possible Disasters or Emergencies
  - Fire/Explosions
  - Extreme Weather
  - Utilities Emergency
  - Hazardous Material
  - Potentially Violent Situations
  - Missing/Abducted Child
  - Medical/Dental Emergency
- Reunification and Recovery Plan
- Mental Health Support
- Cyber Security and Back-Up Records

GUNS/WEAPONS NOT ALLOWED

Absolutely no guns or other lethal weapons are allowed on the property of our child care centers.

LOCKED FACILITIES

For the safety of your child all of our centers are locked facilities with a buzzer and camera system in place. Anyone wishing to enter the center must be buzzed in. Any person that staff does not recognize will be asked the reason they are there before being allowed in. We ask that parents do not hold open doors for others as we do not always know the reason someone may be trying to enter our facility.

MANDATORY REPORTING

All employees are mandatory reporters of child abuse. We are required to report any suspected child abuse. Please let your child’s teacher know if your child has any unusual injuries or conditions. If a child abuse report is filed against a classroom staff member, the staff member will be removed from the classroom until an investigation is complete.
Please contact the Family Service Manager at 274-1610, ext. 233 if you have any questions or concerns about child abuse.

PARKING LOT SAFETY
- Children should never be left alone in a vehicle. **All staff are mandatory reporters and 911 will be called if a child is left alone in a vehicle.**
- Children must be with an adult when going in and out of the building. Hold your child’s hand to ensure they stay safely by your side.
- Teach your child to ‘watch for cars’ when exiting your vehicle.

PEDESTRIAN SAFETY
Some of your children will walk to school this year, but even if they do not, all kids need to learn to be safe walkers. Even if your child doesn’t walk to school every day, someday they will walk to the bus stop, to a friend’s house, to church, a park, the pool, to the store, or one day to a job.

**Walking Safely** – Some reasons parents should walk with their kids include:
- Young children aren’t able to make safe choices for themselves.
- Kids can’t read or understand traffic signs.
- Kids often want to run out into the street.
- Kids get sidetracked easily.
- Kids can’t judge how quickly cars move and how long it will take them to cross the street.
- Children are small and it is hard for drivers to see them.
- Children learn from parents and adults who show safe behaviors... if you cross safely, chances are they will, too!

**Tips for Walking & Crossing Street Safely** – Some important tips for parents to remember about walking safely with your children:
- Always walk with your child until age 10 because children can’t always read or understand traffic signs
- Firmly hold your child’s hand so they can’t run away or into traffic and so they can be seen more easily by drivers
- Stay on sidewalks or paths because staying away from cars is the safest place to walk
- Don’t walk in the street, if there aren’t any sidewalks, always walk on the left side of the road – and walk facing traffic so cars can see you more easily
- Always look for a crosswalk, even if it means walking to the end of the block. Crosswalks also let drivers know to expect pedestrians.
- Corners are a safer place to cross. Cars are slowing down.
- Look left, look right, then left again before crossing to be 100% sure you check both directions for cars. Always look back to the first direction again
- Look and listen for cars while you cross because the most dangerous cars are the ones you never see
- Obey traffic signals

**Tips for Staying Safe Near Vehicles** – Areas around cars and buses are never a safe place for children and are very unsafe places to play.
- All vehicles have blind spots where small children may not be seen by a driver. Big and tall cars have bigger blind spots.
- A child’s small size makes it hard for drivers to see kids up to 15 feet behind or near a car
  - Keep children out of blind spots when walking, crossing or playing
- Children should never play in streets, around cars, in driveways, or parking lots

**Staying Safe Near School Buses** – Many children ride a school bus or public bus to get to and from school each day.
- Walk with your child to the bus stop
- Stay on the sidewalk while waiting for the bus
- Kids should always cross at least 10 feet in front of a school bus
- Children should never walk behind a school bus
ACCESS POLICY

Centers are responsible for ensuring the safety of children at the center and preventing harm by being proactive and diligent in supervising not only the children, but other people present at the facility.

1. Any person in the center who is not an owner, staff member, substitute, or subcontracted staff or volunteer who has had a record check and approval to be involved with child care shall not have “unrestricted access” to children for whom that person is not the parent, guardian, or custodian, nor be counted in the staff to child ratio.
   *“Unrestricted access” means that a person has contact with a child alone or is directly responsible for child care.
   *It is imperative that centers not allow people without a record check to assume child care responsibilities or be alone with children. This relates both to child safety and liability to the center.

2. Persons who do not have unrestricted access will be under the direct “supervision” and “monitoring” of a paid staff member at all times and will not be allowed to assume any child care responsibilities. The primary responsibility of the supervision and monitoring will be assumed by the teacher unless he/she delegates it to the teacher assistant due to a conflict of interest with the person.
   *“Supervision” means to be in charge of an individual engaged with children in an activity or task and ensure that they perform it correctly.
   *“Monitoring” means to be in charge of ensuring proper conduct of others.

3. Center staff will approach anyone who is on the property of the center without their knowledge to ask what their purpose is. If staff is unsure about the reason they will contact their Center Manager or another management staff to get approval for the person to be on site. If it becomes a dangerous situation staff will follow the “intruder in the center” procedures. Non-agency persons who are on the property for other reasons such as maintenance, repairs, etc. will be monitored by paid staff and will not be allowed to interact with the children on premise.

4. A sex offender who has been convicted of a sex offense against a minor (even if the sex offender is the parent, guardian, or custodian) who is required to register with the Iowa sex offender registry (Iowa Code 692A):
   a. Shall not operate, manage, be employed by, or act as a contractor or volunteer at the center.
   b. Shall not be on the property of the child care center without the written permission of the Early Childhoods Program Director, except for the time reasonably necessary to transport the offender’s own minor child or ward to and from the center.
      i. The director is not obligated to provide written permission and must consult with their DHS licensing consultant first.
      ii. If written permission is granted it shall include the conditions under which the sex offender may be present, including:
         1. The precise location in the center where the sex offender may be present.
         2. The reason for the sex offender’s presence at the facility.
         3. The duration of the sex offender’s presence.
         4. Description of how the center staff will supervise the sex offender to ensure that the sex offender is not left alone with a child.
         5. The written permission shall be signed and dated by the director and sex offender and kept on file for review by the center licensing consultant.

   **If you are aware of a sex offender residing within 2,000 feet of your center, contact the police non-emergency number (279-6960).
   **If an adult that you know is on the sex offender registry and is lingering or hanging around outside of your center, call 911.
   **The following link is provided for citizen protection: [http://www.iowasexoffender.com/](http://www.iowasexoffender.com/).

This policy will be included in the parent handbook that is distributed to the parents at the start of school.
ALLERGIC REACTIONS
- All classroom staff will be made aware of any allergies of children that are in enrolled in their classroom.
- The Health Manager will visit with the classroom staff to ensure all know how to manage the allergy and what to do in the event of an allergic reaction.
- Classroom staff should follow instructions given by the child’s physician and the Health Manager.
- Children with a prescribed EpiPen will have a classroom order for use and an Individual Health Plan.

Signs and Symptoms of a severe allergic reaction include:
- Throat feeling like it is closing off
- Wheezing, coughing or shortness of breath
- Swelling of face, tongue, eyelids, lips, or throat
- Increasing apprehension
- Sweating
- Hives or Itching
- Tingling sensation in mouth, face or throat
- Loss of consciousness
- Breathing or heartbeat stops
- Signs of shock – pale or red, sweaty or dry, confused, anxious, or unconscious
- Stomach pain, nausea, vomiting, diarrhea or bloody diarrhea
- If any child or adult shows signs of a severe allergic reaction, call 911 and then the Health Manager.

BEHAVIOR MANAGEMENT POLICY AND PROCEDURES
Our program has adopted Positive Behavioral Interventions and Supports (PBIS) strategies and techniques as the basis for:
1. Preventing challenging behaviors
2. Teaching social emotional skills
3. Implementing interventions for children with persistent behavior concerns

At NO TIME, are any of the following permissible in the classrooms:
   a. Any form of physical abuse including rough handling, shaking, hitting, spanking, paddling, slapping, jerking, squeezing, kicking, biting, pinching, and/or pulling
   b. Any form of verbal abuse including profanity, sarcastic language, threats and/or derogatory remarks about a child or child’s family.
   c. Any form of emotional abuse, including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child.
   d. Use corporal punishment, isolation, or methods to restrict a child’s movement such as binding or tying a child or taping their mouth shut.
   e. Toilet training methods that punish, demean, or humiliate a child.
   f. Withholding of food or physical activity or outdoor time as a punishment or reward.

Within each of our classrooms, staff will:
- Be trained in the use of the Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children.
- Implement developmentally appropriate preventative measures to prevent challenging behaviors. This includes forming strong, supportive relationships with children, developing consistent routines, teaching expectations, and using visual supports.
- Teach social skills – sharing, turn taking, and appropriate behaviors.
- Teach friendship skills by encouraging children to work together.
- Teach about emotions and utilize calm down strategies for children that become upset.
- Teach children to solve their own problems in appropriate ways.
- Implement individual supports, as needed, in order for children to be successful.
Interventions for children with persistent challenging behavior:

- Aggressive acts such as biting, hitting, kicking will be handled in the following manner:
  1. Staff will deescalate the situation and ensure all children are safe.
  2. Staff will provide needed first aid and attention to any child or staff member who was bitten or injured, showing concern and support for that child or staff member. A Child Incident Report or a Staff Injury Report will be completed to document injuries and turned into the Center Manager. Parents will be notified of their child’s injury and a copy of the Child Incident Report will be given to the them to sign at pick up time. Center Manager’s will turn all Child Incident Reports into the Center Health Manager and all Staff Injury Reports into the Human Resource Director.
  3. For the child demonstrating the act of aggression:
     - Staff will calmly talk with the child to determine the purpose of the behavior remembering that acts of aggression are generally a form of communication. Biting or other aggressive behavior is almost always a response to the child’s needs not being met or coping with a challenge or stressor.
     - When the child is calm, staff will teach replacement skills, example: “If you want something that your friend is playing with, you can use your words by saying ‘can I have a turn’.”
     - Staff will complete a Behavior Incident Report (BIR) and notify their Center Manager. Center Managers will keep all Behavior Incident Reports on file.
  4. The Center Manager will meet with classroom staff to assess the adequacy of caregiver supervision and the context and environment in which the injury occurred. They will evaluate 1) the quality of relationships between the child and staff, 2) any environmental influences, 3) what social/emotional and preventative supports are in place, and 4) staff training. Strategies will be discussed on how to prevent future incidents from occurring. The Center Manager will also work with staff to determine if the act was an isolated incident or if a behavior concern needs to be addressed.
     - If it’s determined to be an isolated incident, staff will implement PBIS strategies and individual supports for the child to teach appropriate behavior.
     - If it’s determined to be a situation of a child with persistent challenging behavior, the Center Manager and the classroom staff will work through the Behavior Concern Process and begin PTR-YC (Prevent, Teach, Reinforce for Young Children). The child’s parents and the Mental Health Consultant will be engaged. Additional referrals may be made to the local AEA.
  5. Community Action Agency of Siouxland policy 707 regarding confidentiality will be followed. The highest level of confidentiality will be maintained in order to enable children and their families to comfortably share information with staff. The name of the child who bit or caused injury will be kept confidential as well of the name of the child who was bitten or injured.

**SUSPENSION POLICY**

The procedures outlined within this policy are in compliance with Head Start Performance Standards, Iowa Dept. of Education policies and federal and state civil rights laws and also align with the POLICY STATEMENT ON EXPULSION AND SUSPENSION POLICIES IN EARLY CHILDHOOD SETTINGS jointly created by the U.S. Department of Health and Human Services and the U.S. Department of Education.

Program staff are prohibited from suspending children from the classroom due to challenging behaviors. This includes ‘soft’ suspensions and/or requesting parents pick children up from school early due to their behavior. In the event that a child’s behavior poses a severe safety risk to themselves or other children and the program has exhausted all recommendations and interventions given by a Mental Health Consultant and/or AEA personnel, a temporary suspension may be enforced as a last resort. The enforcement of a temporary suspension would be a decision made by the team of individuals supporting the child – parent, teacher, Center Manager, Mental Health Consultant, AEA personnel, and Early Childhood Assistant Director. Data documenting the severity of the behavior and the risks of the child remaining in school must also be available to support the decision to temporarily suspend.
During a temporary suspension, program staff will work with families to facilitate the child’s return to the classroom as quickly as possible while ensuring child safety by:

- Continuing to engage with the parents and Mental Health Consultant, and continuing to utilize appropriate community resources to help address the behavior concerns;
- Conducting home visits with the family during the temporary suspension;
- Developing a written plan to document the action and supports needed; and
- Determining if a referral to AEA is appropriate, if one has not already been made.

**Expulsion Policy**

Program staff are prohibited from expelling or un-enrolling children due to challenging behaviors. In the event that a unanimous decision is made, by the team of individuals supporting a child, to seek alternative placement to better meet the child’s behavioral needs, the program will:

- Work with the Mental Health Consultant and/or AEA personnel to facilitate the transition of the child to the new placement. This includes conversing with the receiving program to share techniques, strategies, and interventions that have been either successfully or unsuccessfully used.
- Facilitate an evaluation of the classroom/environment that the child is transitioning out of to ensure staff are 1) adequately trained to support children with challenging behaviors, 2) have environmental supports in place to support the prevention of challenging behaviors, and 3) implement developmentally appropriate social/emotional teaching practices and prevention strategies.

**CONFIDENTIALITY OF CHILD RECORDS - NOTICE TO PARENTS**

The following procedures will be adhered to in order to protect the confidentiality of any personally identifiable information (PII) in child records. PII means any information that could identify a specific individual, including but not limited to a child’s name, name of a child’s family member, street address of the child, or other information that is linked or linkable to the child. Child records means records that: (1) are directly related to the child; (2) are maintained and secured by the program, or by a party acting for the program; and (3) include information recorded in any way, such as print, electronic, or digital means, including media, video, image, or audio format.

**Release only with Parent Consent:** When applicable the program will require parent’s written consent in order to disclose specific child records. The consent will explain why the records will be released and identify the party or parties to whom the records will be released to. Parents will be required to sign and date the consent. Parent consent is voluntary and may be revoked at any time, however it cannot be retroactive.

**Release without parent consent but with parental notice and opportunity to refuse:** The program will notify parents when forwarding records to another program, school, or school district in which the child seeks or intends to enroll or where the child is already enrolled. Only records related to the enrollment or transfer will be disclosed. Upon parent request, a copy of the forwarding records will be provided in advance, and will give the parent an opportunity to challenge and refuse disclosure of the information in the records, before they are forwarded.

**Release without parental consent:** The program will disclose PII from child records without parental consent to:

1. Officials within the program or acting for the program, such as contractors, as long as the program maintains oversight with respect to use, further disclosure, and maintenance of child records, such as through a written agreement;
2. Officials within the program, acting for the program, or from a federal or state entity, in connection with an audit or evaluation or education or child development programs, or for enforcement of or compliance with federal legal requirements of the program;
3. Officials within the program, acting for the program, or from a federal or state entity, to conduct a study to improve child and family outcomes, including improving the quality of programs, for, or on behalf of, the program;
4. Appropriate parties in order to address a disaster, health or safety emergency during the period of the emergency, or a serious health and safety risk such as a serious food allergy, if disclosure is necessary to protect the health or safety of children or other persons.
(5) Comply with a judicial order or lawfully issued subpoena;
(6) The Secretary of Agriculture or an authorized representative from the Food and Nutrition Service to conduct program monitoring and evaluations for the Child and Adult Care Food Program without any specific child or parent being identified;
(7) A caseworker or other representative from a child welfare agency (DHS), who has the right to access a case plan for a child in foster care placement, in which the agency is legally responsible for the child’s care and protection, if the agency agrees in writing to protect PII, to use information from the case plan to address child’s needs, and to destroy information that is no longer needed for those purposes; and,
(8) Appropriate parties in order to address suspected or known child abuse and neglect.

**Limit on disclosing PII:** The program will only release information that is deemed necessary for the purpose of the disclosure.

**Written agreements:** All written agreements with third parties contain procedures to protect PII and actions taken if violations occur. Written agreements will include provisions for the destruction of PII when no longer needed for the purpose of the disclosure. All parents have the right to inspect any written agreements with third parties.

**Parental rights:**

(a) Inspect record
   (1) A parent has the right to inspect child records.
   (2) If the parent requests to inspect child records, the program will make the records available within a reasonable time frame, but no more than 5 business days after receipt of request.
   (3) If the program maintains child records that contain information on more than one child, the program will ensure the parent only inspects information that pertains to the parent’s child.
   (4) The program will not destroy a child’s record with an outstanding request to inspect and review the record under this section.

(b) Amend record
   (1) 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.
   (2) The program will consider the parent’s request and, if the request is denied, provide a written decision to the parent within a reasonable time that informs the parent of the right to a hearing.

(c) Hearing
   (1) The program will schedule a timely hearing and ensure it is conducted by a person without direct interest in the outcome.
   (2) The hearing will afford the parent a full and fair opportunity to present evidence relevant to the issue(s).
   (3) If the program determines the information contained in the record is inaccurate, misleading or in violation of the child’s privacy, the program will either amend or remove the information and notify the parent in writing.
   (4) If the program determines the information contained in the record is accurate, not misleading, or does not violate the child’s privacy, the program will inform the parent of the right to place a statement in the child records that either comments on the contested information or states why the parent disagrees with the program’s decision, or both.

(d) Rights to copy of record – The program will provide a parent, free of charge, an initial copy of 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.

**Maintaining Records:**
The program will abide by the Community Action Agency of Siouxland’s Record Retention Policy.

The program will maintain child records in locked files and password protected databases (including web-based), ensuring that only parents, and officials within the program or acting on behalf of the program have access. All web-based data systems that are currently used by the program have privacy policies that adhere to the industry standards set forth under administrative, technical, and physical safeguards.
The program will keep within the child records, for as long as the records are maintained, information on all individuals, agencies or organizations to whom a disclosure of PII from the child records was made (except for program officials and parents) and why the disclosure was made.

If a parent places a statement in the child record, the program must maintain the statement with the contested part of the child record for as long as the program maintains the record and, disclose the statement whenever it discloses the portion of the child record to which the statement relates.

SERIOUS ILLNESS OR INJURY POLICY
Program staff have been trained in pediatric first aide and will provide care for illness or injury.

- When emergency services are needed, the first staff member begins giving care. A second staff member will call 911. If there is only one staff member, that person will give care for 2 minutes, call 911, and then return to the child to resume giving care.

Poison Control 800-222-1222  Unity Point St. Lukes 279-3500  Mercy 279-2010

- When possible, other students and staff will be removed from the scene.
- A staff member will stay with the injured or ill child until the parent or guardian takes over.
- Staff ratios will be maintained by using all employees including Center Managers, Family Advocates, and Health Services.
- Classroom staff will complete an Incident Report the same day of the emergency.
- Dental emergencies will follow the Dental Emergency First Aid posting located in the classrooms.
- Staff will receive American Red Cross CPR training and American Red Cross First Aid training every two years.

Dental Emergency First Aid:

Injuries to Mouth and Teeth:
- Rinse mouth with cold tap water
- Apply pressure dressing if bleeding – direct pressure with folded sterile dressing.
- Apply cold compress to reduce swelling
- Take child to dentist or physician.
- In the event the tongue or lips are stuck to an object and the tissue tears:
  - Stop the bleeding
  - Cover area with sterile petroleum jelly
  - Take child to the dentist or physician

Tooth is Fractured, Chipped, or Broken:
- If dirty, gently clean the area.
- Place sterile dressing in space left
- Apply cold compress
- Take child to dentist

Tooth is Knocked Out or Loosened:
- Rinse out mouth
- Save any displaced teeth
- Do not attempt to move teeth
- Take child to the dentist

Tooth is knocked into the Gums:
- Do not attempt to pull on the tooth
- Rinse out the child’s mouth
- Take the child to the dentist
SICK CHILD POLICY
For the protection of your child and others, please do not send your child to school/socializations if he or she is ill. The list below reflects symptoms that indicate illness.

- Fever (above 100º, must be fever free for 24 hours without fever reducing medication)
- Signs and symptoms of possible severe illness:
  - Lethargy that is more than expected tiredness,
  - Uncontrolled coughing,
  - Inexplicable irritability or persistent crying,
  - Difficult breathing, wheezing
  - Other unusual signs for the child
- Diarrhea – more watery, loose stools, increased frequency of passing stool, child can’t get to the bathroom in time
- Blood in stools not explainable by dietary change, medication, or hard stools
- Vomiting illness, more than once in the past 24 hours, or once and accompanied by other symptoms, until vomiting resolves or until a health care provider determines that the cause of the vomiting is not contagious and the child is not in danger of dehydration.
- Persistent abdominal pain (continues more than 2 hours)
- Mouth sore with drooling
- Rash with fever, behavior change, or drainage, or undiagnosed rash
- Earache or drainage from the ear(s).

A child who is under-immunized will be excluded from class in the event that a vaccine preventable disease to which the child is susceptible has been identified in that Center. Recommendations of the Siouxland District Health Department will be followed.

If your child develops any or a combination of the above symptoms, you or an emergency contact person will be contacted and arrangements will need to be made to have your child picked up. Contact the Center Manager or Health Manager by calling 274-1610, extension 237, if you have any questions regarding your child’s health. Please contact your Home Visitor if your child is experiencing any of these symptoms to discuss whether your home visit should be rescheduled.

SOCIAL MEDIA/VIDEO/PHOTOGRAPHS POLICY
With social media websites continuing to expand into our personal and professional lives, Community Action Agency of Siouxland (referred to as “our programs”) are implementing several policies regarding the acceptable use of social media websites, video, and photographs within the scope of our programs. These policies will be effective for all social networking websites used to share or view text content or photographs. These websites include, but are not limited to: Facebook, Twitter, YouTube, Instagram, and blogging sites.

Communications: Communication between staff and family members may not occur through any social media website, including but not limited to: Facebook comments, tweets, direct messages or adding as a friend or connection. This policy includes any communication directed toward any employee’s social media profile created and maintained on their personal time. Our program staff will only use means of communication provided to them by our programs for contacting families in order to maintain confidentiality.

Social media: Our programs currently maintain a social media webpage on Facebook as a way to connect with our communities and provide program information and updates. Staff within our programs controls these pages and we reserve the right to restrict or remove functions and posted content as necessary to best reflect the mission of our programs. Social media websites created and managed by our programs are not provided means of communication between the families we serve and our programs or staff.

HEAD START • EARLY HEAD START • PARENTS AS TEACHERS • WOODBURY COUNTY • COMMUNITY ACTION AGENCY OF SIOUXLAND
Video content and photographs: Our programs serve many vulnerable clients dealing with issues such as custody, foster care, or drug/alcohol treatment. These situations, as well as a variety of other situations, call for sensitivity and confidentiality. For these reasons we request that all families do not use cameras, video recorders, or any other photographic devices while within the premises of any of our locations, under any circumstances. This policy extends to sharing photographs or videos within social media websites. **It is important to note that any videos or photographs that our programs choose to use have had a release signed by a parent/legal guardian.

Thank you for taking time to review these policies within our programs. Implementing these policies helps us ensure every family we serve is guaranteed the highest possible levels of courtesy and confidentiality and we truly appreciate your cooperation with these standards of conduct.