



## Head Start/Early Head Start Family Child Care Program



## 2021-2022 Parent Handbook

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@JCCDCHEADSTART



@jccdheadstart

*"Bridging Gaps and Building Partnerships!"*

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I want to personally welcome you to the Jefferson County Child Development Council, Inc.'s Head Start and Early Head Start programs! Since 1972, our agency has provided comprehensive services: cognitive, emotional, physical, and social, while promoting self-esteem, self-confidence, and self-sufficiency in a nurturing family childcare environment that is responsive to the individual needs of each child and their family.

Our agency is unique! Head Start and Early Head Start services are offered at Family Child Care Provider Sites that are located within their residences. This family setting allows young children a supportive place each day with a Department of Human Resources state certified staff. It is in this setting that all learning will take place.

JCCDC strives to provide comprehensive services in the areas of Health, Mental Health, Disabilities, Education, and Family and Community Partnerships. Through our diverse program, you will better understand your child's areas of strength and any challenges they are facing. In collaboration with our Community Partners, we will support the needs you share with us. Our Family and Community Engagement Specialists will be in regular contact with you supporting those needs with other agencies in the area.

"We believe that you are your child's first teacher." JCCDC is here to support you in your efforts to provide a safe, loving environment for your child. Please understand that Head Start **must** have your support! We encourage you to attend Parent Meetings as often as possible to learn about the opportunities for growth for you, your child, and your entire family.

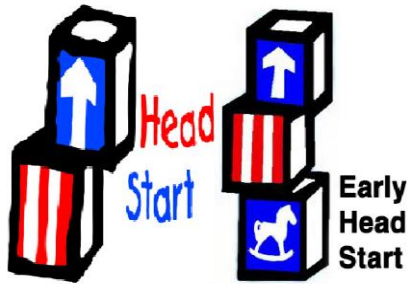
We want to create an opportunity for this to be an awesome Early Head Start or Head Start experience for both you and your child(ren).

We look forward to helping you reach foundational goals to a great start for the success of child!

Sincerely,

*Tena Sales, Head Start/Early Head Start Director*

# Introduction



The Jefferson County Child Development Council, Inc. (JCCDC) began in January of 1972 as a non-profit organization.

JCCDC EHS/HS FCC became an innovative program to prepare children birth to five years of age for public school. This program is one of the few FCC HS/EHS programs in the country. We are currently federally funded to serve 6 Expecting Mothers & Infants (EMIs), 36 children ages 6 weeks-3 years and 240 children 3-5 years old.

Since Head Start was established over fifty years ago, it has continued to be the best effort made by our government to give young children in this country the head start in life they might not otherwise receive.

Since receiving funding in 1973 for Family Child Care, the JCCDC HS/EHS Family Child Care program has worked tirelessly to deliver high quality Head Start services to children and families in Jefferson County. Our agency is partnering with more than 30 licensed Family Childcare Providers within Jefferson County.

We invite all of our parents to become active in our program by donating goods, volunteering, attending parent meetings, participating in monthly events or involvement in policy council meetings. Each of these meetings are held on a monthly basis.

Parents are the most important people in their children's lives. Children look to their parents for guidance as they begin their journey through life. The purpose of Head Start/Early Head Start is to assist the family in giving the child a good foundation to build as they begin their journey. By working together, staff and parents help strengthen a child's socialization skills, help each develop emotionally, and help prepare them to succeed. The JCCDC Head Start/Early Head Start staff and parents are a team. As a team we will assure each child receives an excellent HEAD START!

# Mission Statement

JCCDC provides comprehensive developmental services: cognitive, emotional, physical, and social, while promoting self-esteem, self-confidence, and self-sufficiency in a nurturing Family Child Care environment that is responsive to the individual needs of each child and their family.

## JCCDC Head Start Philosophy and Goals

We believe that a developmentally appropriate curriculum does not concentrate on pre-academic subjects, such as the alphabet, science, and math. These and other school readiness skills will, however, be integrated into a developmentally appropriate curriculum. Each child will participate in activities to meet his/her individual needs in an environment that is nurturing and stimulating and one that promotes his/her physical, emotional, social, language and cognitive development. Daily lesson plans will reflect activities designed to promote self, critical thinking, problem solving, academic readiness, and motor skills. There will be a balance of large and small group experiences throughout the day. Learning centers and activities will incorporate materials and resources, which provide for the unique needs, interests, and development levels of children in the classroom. In addition, daily activities will include opportunities for children to participate in health, nutrition, and related experiences. We believe that children with disabilities both benefit from and contribute to programming for preschool children, so we make a special effort to serve and support children with disabilities.

JCCDC's goals are: (1) to provide the most developmentally appropriate, cultural, and relevant curriculum for each child who is enrolled in our program. (2) to include a curriculum that encourages the parent to be involved with the child in order to maximize his/her social, intellectual, and physical development, while building a strong sense of self-esteem. (3) to ensure that all children, their families, and their caregivers enjoy themselves during their Head Start/Early Head Start experiences. (4) to involve parents in the program in ways that enhance their abilities to support their child's growth and development, and to assure that JCCDC Head Start/Early Head Start Program effectively addresses their own goals for their children. (5) to provide training and support for staff so they can best meet the needs of and promote the physical, social, emotional, and cognitive development of their children.

# **JCCDC Administrative Staff and Contacts**

<b>Executive Director</b> – Earlene Reynolds.....	205-379-6048
<b>Chief Financial Officer</b> – Yolanda Woods.....	205-379-6060
<b>Human Resource Coordinator</b> – Sharon Duncan.....	205-379-6070
<b>Office Manager</b> – Lisa Harris.....	205-379-6073
<b>Head Start/ Early Head Start Director</b> – Tena Sales.....	205-379-6065
<b>Early Childhood Development Manager</b> – NaKendra Massey.....	205-379-6069
<b>Family Engagement Manager</b> – .....	205-379-6064
<b>Health &amp; Safety Coordinator</b> – .....	205-379-6059
<b>Community Engagement Coordinator</b> – Wanda Borders.....	205-379-6066
<b>ERSEA Coordinator</b> – Tamara Tellis.....	205-379-6056
<b>Nutrition Coordinator/ Monitor</b> – Stella Baskin.....	205-379-6058
<b>Receptionist</b> – Diane Faught.....	205-379-6074

## **JCCDC Family Engagement Specialist**

Olivia Nunez.....	205-379-6061
Family Engagement Specialist .....	205-379-6071
Family Engagement Specialist .....	205-379-6001

## **JCCDC Early Childhood Development Specialist**

Amberley Williams.....	205-379-6062
Nashanna Madison.....	205-379-6063
Early Childhood Development Specialist .....	205-379-6002

## **JCCDC Nutrition Assistant**

Porsha Davis.....	205-379-6057
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## **JCCDC Contractors/Consultants**

Disability/Mental Health, Willie Glass	
Nutrition Consultant, Barbi Moore.....	205-379-6057
Financial Consultant – Stephen McGhee.....	205-379-6049
<b>Office Number</b> .....	205-933-1095
<b>Fax- Front Office</b> .....	205-933-7828

# JCCDC Services

## Head Start

## Early Head Start

### Information for Parents

- **You as a parent are encouraged** to volunteer at your child's provider site, attend Parent Meetings, workshops, Policy Council, and other meetings.
- **Be sure to send an extra set of clothes** to be left at the provider's site. This is done in case of accidents. Make sure the child's name is written on the tags with a permanent marker.
- **Be sure to send 2 sets of covers for nap time.** If your child has an accident and covers are sent home to be cleaned, be sure to bring them back.
- When you **volunteer** your time in your child's classroom, this is considered an In-Kind Contribution. Each hour you volunteer is matched by federal funding which allows your child to attend Head Start/Early Head Start free of charge. We ask that each parent volunteer at least 20 hours of their time per month. That is only 5 hours a week or 1 hour each day.
- **Make sure** your child visits the doctor/dentist for routine check-ups and follow ups annually or more frequently if needed.
- **Make sure** important documents are turned in to your child's teacher (immunization, physical, dental, etc.) in order to have a smooth into Head Start/Early Head Start program.
- **Under no circumstance** shall a child begin school or remain attending school without a current immunization form.
- Please advise staff and Providers of any known food allergies or special diets.
- **Over the counter or prescription medicine** shall **not** be given to a child without a written and signed authorization from a **licensed physician**.
- **In case of an emergency**, you will be notified immediately. Therefore, it is extremely important that your provider and the agency have current phone numbers. We **must** be able to contact you or someone authorized to pick up your child.
- As we work with children, we are **mandated** by the State of Alabama to report any suspected child abuse and/or neglect.

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

## **The Principles of Head Start/Early Head Start**

These principles are designed to nurture healthy attachments between parent and child (and child and caregiver), emphasize a strengths-based, relationship-centered approach to services, and encompass the full range of a family's needs from pregnancy through school age.

### **They include:**

- **An Emphasis on High Quality** which recognizes the critical opportunity of HS/EHS programs to positively impact children and families in the early years of development and beyond.
- **Prevention and Promotion Activities** that both promote healthy development and recognize and address atypical development at the earliest stage possible.
- **Positive Relationships and Continuity** which honor the critical importance of early attachments on healthy development in early childhood and beyond. The parents are viewed as a child's first, and most important, relationship.
- **Parent Involvement** activities that offer parents a meaningful and strategic role in the program's vision, services, and governance.
- **Inclusion** strategies that respect the unique developmental trajectories of young children in the context of a typical setting, including children with disabilities.
- **Cultural competence** which acknowledges the profound role that culture plays in early development. Program also recognizes the influence of cultural values and beliefs on both staff and families' approaches to child development. Programs work within the context of home languages for all children and families.
- **Comprehensiveness, Flexibility and Responsiveness** of services which allow children and families to move across various program options over time, as their life situation demands.
- **Transition planning** respects families' need for thought and attention paid to movements across program options and into—and out of—Early Head Start program, and into—and out of—Head Start program into public school.
- **Collaboration** is, simply put, is central to Early Head Start/Head Start program's ability to meet the comprehensive needs of families. Strong partnerships allow programs to expand their services to children and families beyond the door of the program and into the larger community.

### **Cornerstones**

1. **Child Development:** Programs must support the physical, social, emotional, cognitive, and language development of each child. Parenting education and the support of a positive parent-child relationship are critical to this cornerstone.
2. **Family Development:** Programs must seek to empower families by developing goals for themselves and their children. Staff and parents develop individualized



family development plans that focus on the child's developmental needs and the family's social and economic needs. Families that are involved in other programs requiring a family service plan will receive a single coordinated plan so that they experience a seamless system of services.

3. **Community Building:** Programs are expected to conduct an assessment of community resources so that they may build a comprehensive network of services and supports for pregnant women and families with young children. The goal of these collaborative relationships is to increase family access to community supports, make the most efficient use of limited resources, and effect system-wide changes to improve the service delivery system for all families in the community.
4. **Staff Development:** The success of the Head Start/ Early Head Start program rests largely on the quality of the staff. Staff members must have the capacity to develop caring, supportive relationships with both children and families. On-going training, supervision, and mentoring will encompass an inter-disciplinary approach and emphasize relationship-building. Staff development will be grounded in established "best practices" in the areas of child development, family development, and community building.

#### **What services you can expect from Head Start/Early Head Start:**

- quality early education in and out of the home, including home visits
- ongoing child development screening
- family support for all families
- parent education, including parent-child activities
- comprehensive health services, including services to women before, during and after pregnancy, assistance with well-baby and well-child check-ups; immunization tracking; dental screening
- nutrition education
- mental health services and referrals
- ongoing support for parents through partnership development focusing on family and individual goals, referral to agencies in the community to meet specific needs and peer support groups

# My Personal Parent Engagement Plan



## As a Head Start/Early Head Start parent I can:

- Set goals for myself and/or my family
- Seek a regular doctor and dentist for my child(ren) and/or family
- Take my child to the doctor for regular appointments and follow-ups
- Attend at least **three** meetings during the program year
- Assist with special activities and plans to help my child thrive
- Observe and volunteer at a Head Start/Early Head Start provider site at least once a month
- Communicate with providers about my child's curriculum, assessments, development skills and nutrition patterns, etc.
- Talk with appropriate staff about any behavioral concerns I might have about my child
- Participate in parent/child take home activities, sign in-kind forms monthly
- Seek assistance from Family, and Community Engagement Specialists when and if resources are needed.
- Give your child positive reinforcement about attending Head Start/Early Head Start
- Encourage your child to talk about his/her experience in the program
- **You** as parents are advocates for your child, if you have any questions or concerns please refer to contacts on page 6.



## **Program Component Areas of Head Start/Early Head Start**

### **Child Development Services**



***Head Start/Early Head Start is divided into component areas to better serve our families.***

- **Education**
- **Disabilities/Mental Health**
- **Health & Safety**
- **Family, and Community Engagement**
- **Eligibility, Recruitment, Selection, Enrollment & Attendance**
- **Nutrition**

## Education

After the curriculum has been selected and approved, it is closely monitored by the Education component. Monitoring ensures that its delivery, by our Providers, is developmentally appropriate and helps to maximize the learning experiences for all children.

The current curriculums that are being implemented are:

The Creative Curriculum for Infants Toddlers, and Twos for Early Head Start, which is a comprehensive curriculum that offers expanded daily support, guidance, and inspiration to our children. It is based on 38 objectives for development and learning. These objectives are fully aligned with the School Readiness Goals for Infants and Toddlers and the Alabama Early Learning Guidelines.

Creative Curriculum Preschool for Head Start which is a well- structured curriculum. It offers thematic units aligned with the School Readiness Goals and the Alabama Early Learning Guidelines. The aim of this curriculum is to promote, develop and enhance Language and Literacy skills, as well as mathematical, scientific, listening, and social skills, creative expression, and positive self-esteem. Each curriculum is enhanced by additional resources.

The children's exposure to our daily environments offer concrete and abstract experiences to enhance each child's knowledge of themselves and his/her environment, promote development, social behavior, emotional well-being, physical skills and art appreciation.



## School Readiness Goals



**Assessment Opportunity** – playful, curriculum-embedded classroom experiences that are opportunities for observations on literacy and numeracy. The objectives are guidance for adjusting the experience for children at different developmental levels. Tips for helping young children construct their own understanding of concepts as they interact and work with people, materials, events, and ideas.

### Teaching Strategy Gold (TSG)

#### Objectives for Development & Learning

##### Birth through Kindergarten

###### Social-Emotional:

1. Regulates own emotions and behaviors
2. Establishes and sustain positive relations
3. Participates cooperatively and constructively in group situations.

###### Physical:

4. Demonstrates traveling skills
5. Demonstrates Balancing skills
6. Demonstrates gross- motor manipulatives skills
7. Demonstrates fine-motor strengths

###### Language:

8. Listens to and understands increasingly complex language
9. Uses language to express thoughts and needs
10. Uses appropriate conversational and other communication skills

###### Cognitive:

11. Demonstrates positive approaches to learning
12. Remember and connects experiences
13. Uses classification skills
14. Uses symbols and images to represent something not present

Literacy:

- 15. Demonstrates phonological awareness
- 16. Demonstrates knowledge of the alphabet
- 17. Demonstrates knowledge of print and its uses
- 18. Comprehends and responds and other texts
- 19. Demonstrates emergent writing skills

Mathematics:

- 20. Uses number concepts and operations
- 21. Explores and describes spatial relationships and shapes
- 22. Compares and measures
- 23. Demonstrates Knowledge of patterns

Science and Technology:

- 24. Uses scientific inquiry skills
- 25. Demonstrates knowledge of characteristics of living things
- 26. Demonstrates knowledge of the physical properties of objects and materials
- 27. Demonstrates knowledge of Earth's environment
- 28. Uses tool and other technology to perform tasks

Social Studies:

- 29. Demonstrates knowledge about self
- 30. Shows basic understanding of people and how they live
- 31. Explores change related to familiar
- 32. Demonstrates simple geographic knowledge

The Arts:

- 33. Explores the visual arts
- 34. Explores musical concepts and expression
- 35. Explores dance and movements concepts
- 36. Explores drama through actions and language

English Language Acquisition:

- 37. Demonstrates progress in listening to and understanding English
- 38. Demonstrates progress in speaking English

## The Importance of Play for Young Children



*“When you asked me what I did in school today and I say, ‘I just played’. Please don’t misunderstand me. I am learning as I play. I am learning to enjoy and be successful in my work. Today, I am a child and work is play.”*

Anita Wadley, 1974

### Importance of Play:

The JCCDC Head Start – Early Head Start Program is serious about your child’s continued growth and development, just as you are as your child’s first and most important teacher. Play is how children naturally learn about the world and how they fit in it. We provide interesting materials and activities to promote exploration. Play helps your child build close bonds with you and with others, learn social skills, develop physically, develop and practice thinking skills and language skills. In addition, math and science concepts are learned and associated skills are developed. As you can see, through play, children gain school readiness skills that are important for their future success in school and their lives.

### More Benefits of Play:

- Pretending to read, to write a story, and other related activities provides opportunities to develop literacy skills.
- Playing in small groups is a great way to develop language skills, learn how to work with others, learn how to express feelings appropriately, and problem solve.
- Playing with table toys, drawing, and painting are but a few ways children are helped to develop their small muscle skills that will aide them in developing their writing skills.
- Hopping, jumping, running, dancing and other movement experiences to assist with the development of children’s large muscle development.

### Play is Important:

According to the National Association for the Education of Young Children, a professional advocacy agency for young children, and those that teach young children.

## Sample Head Start Daily Schedule

### JCCDC Head Start Family Child Care

#### 9-Hour Daily Schedule

7:30 AM – 9:00 AM	Arrival, breakfast, free play
9:00 AM – 9:30 AM	Cleanup, Bathroom Break/Brush Teeth
9:00 AM – 10:00 AM	Large Group Time/Circle Time
9:40 AM – 9:50 AM	Transitions
10:00 AM – 10:30 AM	Small Group Activities
10:30 AM – 11:00 AM	Individual Quiet-Time/Storytime/Cleanup
11:00 AM – 11:45 AM	Outdoor Play or Inclement Weather Indoor Play
11:45 AM – 12:00 Noon	Bathroom Break/Wash Hands/Prepare for Lunch
12:00 PM – 12:45 PM	Lunch
12:45 PM – 1:00 PM	Bathroom Break/Brush Teeth
1:00 PM – 2:30 PM	Nap Time/Rest Time on Cots
2:30 PM – 3:00 PM	Snack/Bathroom
3:00 PM – 3:45 PM	Table-Top Activities. Ex: (play dough, puzzles)
3:45 PM – 4:30 PM	Small Group Play, Clean-up and prepare for departure/Family Engagement





## Sample Early Head Start Daily Schedule

### JCCDC Early Head Start Family Child Care

#### 9-Hour Daily Schedule

7:30 AM – 9:00 AM	Arrival, breakfast, free play
9:00 AM – 9:15 AM	Circle Time & Provider directed activities: Read a Story Unit Theme Discussion Finger Plays                      Creative Movement Music                              Language Development
9:15 AM – 10:15 AM	Child directed/learning centers
10:15 AM – 11:15 AM	Outdoor Play/Gross Motor Activities
11:15 AM – 11:30 AM	Cleanup/Lunch
11:30 AM – 12:00 PM	Lunch
12:00 PM – 12:15 PM	Cleanup/Prepare for Nap
11:45 AM – 12:00 Noon	Bathroom Break/Wash Hands/Prepare for Lunch
12:15 PM – 2:15 PM	Nap/put cots away/prepare to go outside
2:15 PM – 2:45 PM	Snack
2:45 PM – 3:30 PM	Outside Play
3:30 PM – 3:45 PM	Cleanup/Bathroom
3:45 PM – 4:30 PM	Child directed/individualized activities/ prepare for departure/Family Engagement



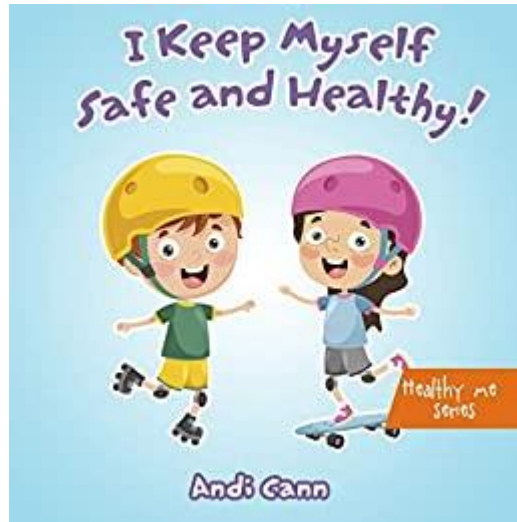
## DISABILITIES/MENTAL HEALTH



The Disabilities/Mental Health component is responsible for overseeing the area of individualized education services and mental health services for the children, families, and staff. Engagement opportunities include:

- Recruiting children who may require individualized services through the distribution of flyers, phone calls and meetings with community agencies and schools.
- JCCDC will collaborate with other agencies, schools, and community partners to assist those children who may need referrals for, but not limited to, vision, speech, behavior, cognition, fine/gross motor, emotional or adaptive needs.
- The Disabilities/Mental Health Coordinator will proceed through the referral process with each child, including the referral meeting, eligibility meeting, and the Individual Education Program (IEP) meeting with the parents, if they qualify for services.
- JCCDC will provide professional development opportunities for Providers to meet the needs of children with individualized plans of care.
- Identify social or emotional concerns by screening each child with a mental health screener.
- Support the family, Provider, and child through, the use of a staffing procedure that documents behavioral concerns.
- Refer children, if necessary, to a certified counselor to receive treatment, observations, and recommendations.

## Child Health and Safety



JCCDC makes your child's health and safety a priority. All Provider homes are monitored and inspected to make sure that they are following all Head Start and DHR rules and regulations. Healthy habits are part of the daily routine and encouraged within the home as well. These daily habits include proper hand washing techniques, tooth brushing after meals, and awareness of germs through coughing and sneezing. To encourage physical activity, children have daily outside play except during inclement weather.

Our staff is committed to assisting parents to establish a medical and dental home for their families. We want to see our children grow and develop into healthy, happy, students ready for Kindergarten and beyond. This can be done by taking the children to their routine doctor's appointments and dentist appointments. All office staff work together along with the Providers to see that each child's individual needs are being met. Those children who have needs that are not within the normal range are supported with resources and information given to parents and families. Children with individual needs are given a Health Care Plan. The plan is completed by a physician to alert all staff to health concerns, allergies, or needs we should be aware of to properly care for each child individually.

All staff are committed to staying up to date with trainings and certifications, including certification in Standard First Aid/CPR. Staff also receives annual training in Recognition of Child Abuse & Neglect as well as OSHA Standards/Blood borne Pathogen Training.

In order maintain compliance with the Alabama Department of Education, all Family Child Care Providers receive annual Medication Training, which allows providers to administer medication during school hours.

## SICK CHILD PROCEDURES

Please do not send your child to school if he/she displays any of the following symptoms: fever, cold (runny nose, coughing, and sneezing), vomiting, diarrhea, skin rashes, pink eye, and ringworm. When a child is sent to school sick, it is dangerous to his/her health and the health of the other children. Please notify the Provider site if your child is being kept home because of sickness. If a child becomes ill while at the FCC home, he/she must be isolated from the other children. The parent must be contacted and informed to make necessary arrangements to have their child taken home.

The Family Child Care Provider, or FCE Specialist will contact the parent if the child has a fever of 100 degrees F, has diarrhea, is vomiting or has other medical conditions that cause concern. Parents are asked to be considerate of other children enrolled in the center and to keep a sick child at home if signs of illness are evident.

FCC Providers are required to document unusual incidents relating to the health of the child, such as bowel movements with blood, a sore that may not be healing or a child who is unusually irritable without an apparent reason. All incident reports must be kept confidential and will be brought to the parent's attention by the child's FCC Provider, Family and Community Engagement Specialist.

Some common childhood diseases and guidelines are listed below:

**Fever:** A temperature of 100 degrees or higher. The child must stay home until his/her temperature is normal without medication for 24 hours.

**Diarrhea:** Watery or foamy bowel movements, more frequently than usual. Diarrhea is defined as three or four watery stools during a period of two hours. If the child is sent home for diarrhea, he/she should not return to the center until at least one normal bowel movement has occurred.

**Vomiting:** Once within a 24-hour period.

**Impetigo:** A skin infection consisting of blisters surrounded by a reddened area. When the blisters break, the surface becomes raw, weeps and oozes. The lesions eventually become crusted and yellowish.

**Conjunctivitis:** An eye infection commonly referred to as "pink eye" in which the eye is generally red with some burning and sometimes a thick yellow drainage). The child must be on medication for 24 hours and all signs of the irritation must be gone before returning to the center.

**Bronchitis:** Begins with hoarseness, cough, and a slight elevation in temperature. The cough may be dry and painful and then becomes loose.

**Strep Throat:** If the doctor diagnoses strep infection, the child should be on medication for 24 hours before returning to the center.

The following are contagious childhood diseases:

- Chicken pox
- Impetigo
- Lice or scabies
- Ringworm or other fungus infections
- Pinworms
- Giardia or other parasites
- Strep throat
- Skin rashes
- Pink eye
- Sinus infection (green or yellow drainage from sinus)
- Cold with fever

**Some common childhood diseases and guidelines for when the child may return to the center is listed below:**

<u>Disease/Illness:</u>	<u>May not return to the center until:</u>
Chicken Pox	When all lesions have dried or scabbed over (5-7 days)
Impetigo	After lesions have healed
Measles	Return is advised by a physician
Conjunctivitis (Pinkeye)	Return is advised by a physician
Ringworm (in scalp)	Doctor's statement indicating condition has been treated with medication
Scarlet Fever	Adequately treated and temperature is completely gone
Mumps	All swelling has disappeared or upon the advice of a physician
Strep Throat	Adequately treated and temperature is completely gone
Whooping Cough	On the advice of a physician and the cough is completely gone

JCCDC reserves the right to send the child home and/or require a note from the child's physician before re-admitting him/her into any FCC Home under these conditions.

## **SAFETY AND INCIDENT REPORTS**

We encourage all parents to report any health and safety hazards to their FCC Provider or FCE Specialist. It is very important to note unusual or strange circumstances that may cause an accident or become a safety issue.

A Daily Health Check will be completed by every FCC Provider. This report documents any unusual signs, marks, or bruises that a child may have when he/she arrives. It also documents things such as a sore that is not healing properly, or if your child is unusually irritable without any apparent reason. We also keep Incident Reports on your child, if necessary. If your child gets a minor scratch, bump, or bruise while in care, we will note it on the incident report and give a copy to you. All incident reports are kept confidential and signed by the FCC Provider and then forwarded to the Health and Safety Coordinator.

## **AUTHORIZATION FOR EMERGENCY MEDICAL/DENTAL TREATMENT**

Parents must sign consent forms allowing their child to receive Emergency Medical/Dental treatment, if necessary. In the event the parent or emergency contact cannot be located, the consent form can be used to seek treatment until the parent or guardian arrives.

## **ACCIDENTS**

Minor accidents requiring first aid will be treated at the FCC Home. If the child sustains any type of head injury, bump or broken skin, the child's parent must be notified by the Health and Safety Coordinator immediately. The FCC Provider must prepare an Incident Report immediately after the child is treated and it must be signed by FCC Provider and Health and Safety Coordinator. The original will go to the child's parent, a copy will be placed in the child's file; and a copy will go to the Health & Safety Coordinator. First aid will consist of a cold compress when appropriate. Open wounds may be cleaned using soap and water only. A non-medicated band aide or sterile cloth may be used to cover the exposed area. Under no circumstances are topical medications or sprays to be applied.

Serious accidents might occur inside the home or on the playground. The first step is for the staff member to assess the extent of the injury. If the child is not able to be moved, the following procedures will be followed:

- \* If the child has sustained a head, neck, or spinal cord injury, has an obvious leg or arm fracture or is unconscious, the provider will call 911 Emergency Medical Services (EMS) and the parent/guardian immediately.
- \* If the child has none of the above and is able to be moved, the child's parent/guardian can choose to transport the child to the doctor or emergency room.
- \* The Health and Safety Coordinator will call ahead to alert the emergency room or doctor with pertinent information.
- \* Emergency records will be sent to the hospital with the adult accompanying the child if it is not the parent or legal guardian.

\* If the child is not accompanied by a parent/guardian or emergency contact person, an Early Head Start/ Head Start staff person will accompany the child in the EMS vehicle. Under NO CIRCUMSTANCES are staff or a Provider to transport an injured child.

## **HOLIDAYS, SCHOOL CLOSINGS & CELEBRATIONS**

### **INCLEMENTS WEATHER/SCHOOL CLOSINGS**

Severe winter storms are usually forecast far enough in advance to allow for preparation. JCCDC Head Start/Early Head Start will follow the decision of the Jefferson County Schools in determining school delays or closure for inclement weather. For example, if Jefferson County Schools is operating on a 2-hour delay, the children in our program will operate on a 2-hour delay. Parents are encouraged to listen to the local news or radio for school closings.

### **HOLIDAYS AND CELEBRATIONS**

Young children can be over stimulated by the consumerism associated with major holidays (Halloween, Christmas, Easter, etc.) The program is interested in facilitating an environment which offers meaningful experiences for children so there is not an emphasis on specific holiday celebrations or activities. Children will be exposed to meaningful experiences within their own family traditions, which they will be asked to share with the class. Conversations about the diversity of ways that people celebrate is encouraged and will be included as part of our multicultural and anti-bias curriculum.

### **END OF YEAR/EXIT CELEBRATION/INTERNATIONAL DAY**

At the end of each program year, Jefferson County Child Development Council, Inc. Head Start/Early Head Start FCC program celebrates our uniqueness and our differences by showing appreciation to the children, families, and the community that we serve through Diversity Day activities. This event includes a parade of countries, games, and field day activities for the children and families. Also, community vendors are onsite to offer an array of information and resources for families. It is always our intent to provide developmentally age-appropriate activities to the children that we serve. Children that leave the Early Head Start program to attend Head Start and/or children who leave the Head Start Program to attend Kindergarten in the fall are simply TRANSITIONING to the next level; therefore, the JCCDC Head Start/Early Head Start program does not conduct ANY type of GRADUATION ceremonies. This also includes CAP & GOWN PICTURES. Please be informed that activities such as Graduation and Graduation picture taking are "PROHIBITED".

## **DISCIPLINE POLICY**

### **GUIDANCE AND DISCIPLINE/ SUSPENSION AND EXPULSION**

The long-term goal for children enrolled in the program is to provide a setting where children can slowly develop a sense of inner self-control; that they can begin to understand the reasons for limits that are set and to develop a sense of both being respected and respecting other's rights and feelings.

When behavior problems arise, staff is encouraged to look at classroom routines, the environment, and individual needs of the child in order to help the child overcome the behavior. Classrooms are also equipped with behavior modification kits used by teaching staff to assist children in controlling their behavior. Parents are also expected and may be required to assist with their child's behavior by volunteering in the classroom to provide extra assistance to the teaching staff if deemed necessary by the Mental Health Consultant.

It is important for all adults to be aware of the language, the tone of voice and the manner of speech used when working with young children. Providing each child with choices, foreseeing problems, and responding to their needs immediately enables us to help the child positively without having to use direct discipline.

The program will limit the use of suspension due to child's behavior. Temporary suspension will be the last resort in extraordinary circumstances where there is a serious safety threat that cannot be reduced or eliminated by the provision of reasonable modifications.

Before the program determines whether a temporary suspension is necessary, the program will engage with mental health consultant, collaborate with parents, and utilized appropriate community resources. If a temporary suspension is deemed necessary, the program will help the child return to full participation in all program activities as quickly as possible, while ensuring child safety.

One of the goals of guidance and discipline is to help children develop the necessary skills for problem solving. Discipline is the external tool to help children develop internal control. Young children learn by experimenting, testing limits, and experiencing the consequences of their behavior.





## ADMINISTERING MEDICATION



No medication or medical procedures (prescription or over the counter) shall be administered without a written, signed Authorization form from the child's guardian/parent and prescription from a physician or health care professional.

1. HS/EHSFCC Providers may administer medication to children if the following conditions are met: The medication or dosage schedule cannot be adjusted to exclude hours the child is in the HS/EHSFCC home.
2. A child has a chronic medical problem, which may require urgent administration of a medication.
3. A child is recovering from an illness and is well enough to attend the HS/EHSFCC Program, but still requires medication (except in cases of fever).
4. The medication is prescribed and written instructions from the child's physician accompany the medication. (The label is sufficient).
5. The medicine is brought in its original container, the label is legible, and it is current.
6. **The legal guardian must complete an Authorization for Administering Medication form. This form shall be valid for no more than 7 days (5 business days) unless accompanied by a written physician's statement. Based on this regulation, the parent's authorization form alone is good for 7 days. No time frame specific if there is a written physician statement.**

If over the counter medicine is given to a child before he/she enters the Provider's home, the provider must be notified by the parent the medication given, time the medicine is given, and any known reactions from the medicine given. You must inform this information to the Provider at the time you sign the child into the Provider's home on a confidentiality form. The information will be confidential between the Provider and the parent.

*DHR-CDC-1949*



## JCCDC EHS-HS FCC

### Authorization to Administer Medication/Medical Procedures DHR-CDC-1949

**Provider:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Dear Parent/Guardian,

Your written permission is required to administer medication or medical procedures to your child. Any prescription drug or over the counter drug sent to the child care facility (home or center) must be in its original container and must be clearly labeled with your child's name, the name of the drug, and directions for administering the drug. A new authorization form is needed each week. If it is absolutely necessary for your child to be given medication while at the child care facility, **please complete the following information.**

Child's Name \_\_\_\_\_

Prescription Number \_\_\_\_\_

Name of Medication \_\_\_\_\_

Amount of medication to be given at each dosage \_\_\_\_\_

Instructions (How to give or apply, such as given by mouth, apply to skin, inhale, drops in eyes, etc.) \_\_\_\_\_

Time for last dosage given at home \_\_\_\_\_

Time(s) of dosage(s) to be given at the childcare facility \_\_\_\_\_

*Please give my child the above-named medication at the time(s) and in the amount(s) indicated.*

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

#### **To be completed by licensee/staff/caregiver:**

Date medication given	Time medication given	Signature of person giving medication

#### **Instructions:**

- Staff person should complete or assist parent in completing this form
- Complete a separate form for each prescription medication

## Family & Community Engagement



The Family, and Community Engagement (FCE) component is responsible for fostering meaningful relationships with their families. Being a part of the JCCDC Head Start/Early Head Start program means individualized services for the parents as well as the children. When enrolled, you will be asked to develop a family partnership agreement (FPA) with our agency.

The purpose of the **Family Partnership Agreement (FPA)** is to support parent/guardian(s) in identifying their own strengths, interests, and goals. We feel that fathers are very important and play an integral role in a child's development. Therefore, we want to include them in this process, even if they are not residing in the home with the child. Our staff will encourage both parents, (if possible) to be a part of the family partnership process. This includes writing down goals and interests, as well as, setting timetables for achieving them. Your FCE Specialist will schedule meeting times to complete the Family Partnership Agreement. After the initial meeting, your FCE Specialist will continue to follow up and work with you to achieve your family goals and document accomplishments.

Your FCE Specialist can assist in:

- making referrals for utility assistance,
- writing resumes,
- completing applications (employment, SNAP, Medicaid, etc.),
- Spanish translation (if needed),
- Enrolling in a GED program, and
- Looking for housing and much more!

JCCDC's team of FCE Specialists also serve as the link between parent, staff, family and community. Specialists can assist parents with resources available in the community and in every phase of the program, from beginning to end. We are here to offer you quality service and provide you an unforgettable Head Start experience.

- There are also several ways **YOU** as a parent, can participate:
- Become a member of JCCDC's Policy Council.
- Dads, Uncles, Grandfathers, Big Brothers (19 or older), any male figure in your child's life can join our Male Involvement "Fatherhood Initiative Program."

Parents are encouraged to volunteer. We need you: in the classroom, on field trips, at parent meetings, at screenings, agency activities, etc. Parent Orientation will be the **first official** Parent Meeting. This meeting is very important. Parents will be informed of the Head Start/Early Head Start rules, regulations, hours of operation for JCCDC providers and much more!

**All** meetings are held once a month. Topics of the meetings will be distributed to parents by way of flyers, phone calls, emails, and text messages. Providers will also post flyers at their sites. FCE Specialists will call as a reminder one week prior to the meeting date or event.



## ERSEA

(Eligibility, Recruitment, Selection, Enrollment and Attendance)



## Attendance Matters

Children are recruited and enrolled in the program without regard to race, sex, color, national origin, or special needs. This component area also assists families in their efforts to improve their quality of life.

As a Head Start/Early Head Start parent great things are expected of you on this journey towards **EXCELLENCE**. As a parent or guardian, you are expected to:

- Bring your child to school every day.
- Notify your child's provider if the child will be absent.
- Sign your child in upon arrival and sign out upon departure.
- Make sure the teacher or aide knows your child is present.
- Obtain a doctor's excuse if three or more consecutive days are missed.
- Only allow individuals on your "pick up" list to pick up your child from school.
- Make sure all individuals on the "pick up" list are over 19 years of age.

### ARRIVAL & DEPARTURE

To ensure your child's safety, they must be escorted by you or an authorized adult into each FCC site then you must sign him/her in. When you pick your child up in the afternoon, you must sign him/her out. Please make sure your child does not arrive until the assigned arrival time and is picked up by the closing time. Picking your child up after the required pickup time could result in you being charged fees from your Provider.

Your child will not be allowed to enter or exit the FCC site without an escort and the FCC Provider will not permit your child to enter or exit their home without an escort. If you are consistently late bringing your child to the FCC site, you will need to meet with your Family and Community Engagement Specialist so that they may assist you with options to get your child to school in a timely manner. A pattern of picking up your child late is unacceptable, upsetting to

your child and difficult for the Provider that needs to close their site/home and attend to their own families. If you are consistently late in picking up your child, your FCE Specialist will schedule a conference to assist you with developing strategies in picking up your child in a timely manner.

### **ATTENDANCE & ABSENCES**

The Family Childcare Provider will contact parents on the 1<sup>st</sup> day of an absence then, after three (3) consecutive days, the Family and Community Engagement Specialist will contact the parent. If your child is absent for 4 consecutive days, has a pattern of absences and you have not contacted your FCE Specialist, she will attempt to contact you via telephone. If unsuccessful, then a home visit and conference will be scheduled with JCCDC Administration for problem-solving solutions. If your child continues to remain absent, then he/she WILL BE REMOVED FROM THE ACTIVE ROLL and placed on the waiting list. After thirty (30) days your child WILL BE TERMINATED FROM THE PROGRAM. We know that children who attend on a regular basis have a better outcome. Therefore, we want to maximize the number of days your child attends.

### **Termination of Enrollment**

- Children can be **terminated** from the Head Start/Early Head Start program for the following reasons:
- Absenteeism- documented established pattern of excessive absences
- Violating Head Start/Early Head Start policies
- Knowingly falsifying eligibility determination or income documentation
- Failure to maintain immunizations and annual physicals

*Head Start/Early Head Start is a federally funded program. Funds are paid for your child to be in attendance each day the school is open. When your child does not attend on a consistent basis, it not only upsets their continuity of education, but it also allows federal funds to be wasted. If federal funds are not used properly, we, **JCCDC** can be asked to return funding. Returning funds means reduced access to developmentally appropriate education for some children in our program. This is not what we want to happen.*



## Nutrition



Here at JCCDC, we strive to ensure that the nutritional needs of our children and families are met consistently. We encourage family style dining within the Provider homes and to be re-enforced in the homes of our families. We do Body Mass Index (BMI) screenings at least two times per Program year to make sure that the children are at a healthy weight according to their age and height. When children are well nourished, it helps with their healthy growth and development.

All JCCDC Providers participate in the Child and Adult Care Food Program (CACFP), where nutritious meals are prepared according to the USDA standards. All children are offered breakfast, lunch, and a snack each day. The meals are prepared with all allergies taken into consideration. Water and milk are required unless there are special dietary restrictions.

There are resources sent home to parents and posted within each Provider's site. The Provider's participate in workshops to learn more creative ways to prepare meals for the children.

We work with the Health & Safety Coordinator to identify any food allergies, especially in the child's health history completed at intake or on the physical received from the doctor.

For our families wanting to eat healthier, we offer resources to help facilitate opportunities for the transition to a healthier lifestyle.

For breastfeeding mothers, we support nursing practices at the agency and in provider sites.





# Parent Complaint and Resolution Policy

The JCCDC Parent Complaint Form can be completed for any complaints or incidents. If you need to submit a form, the following steps should be taken:

- If the complaint is concerning another parent/child – complete the form and contact the Family, Community Engagement Coordinator at (205) 379-6064.
- If the complaint is concerning agency staff - complete the form and contact the Head Start/Early Head Start Director at (205) 379-6065.
- If the complaint is concerning a provider - complete the form and contact the Head Start/Early Head Start Director at (205) 379-6065.

After a complaint has been recorded on the Complaint Form, every effort will be made to resolve the complaint quickly and fairly. All complaints must be filed no later than three (3) days from the date of alleged incident. Forms can be mailed to 728 37<sup>th</sup> St. South Birmingham, AL 35222 or faxed to (205) 933-7828. Confidentiality will be always respected.

The form can also be found on the agency's website at [www.jccdc.com](http://www.jccdc.com) under the "For Parents" dropdown.





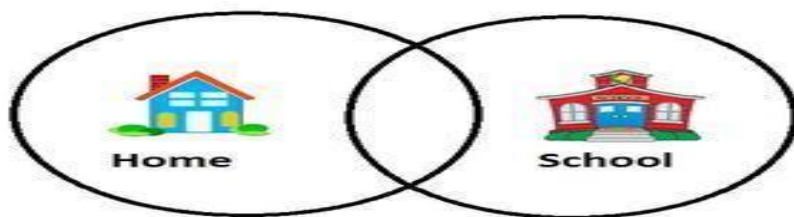
**JCCDC HEAD START-EARLY HEAD START  
PARENT COMPLAINT FORM**

<b>Name:</b>	<b>Family Child Care Site:</b>
<b>Phone No:</b>	<b>E-mail Address:</b>
<b>Date Complaints Occurred:</b>	
<b>The issues are (use attachments if necessary):</b>          	
<b>The facts supporting this are (use attachments if necessary):</b>          	
<b>The solution that I am seeking is (use attachments if necessary):</b>          	
<b>Date:</b>	<b>Signature:</b>

**FOR OFFICE USE ONLY:**

<b>Date Received:</b>	<b>Date of Conference:</b>
<b>Response (use attachments if necessary):</b>          	
<b>Date:</b>	<b>Executive Director, HS-EHS Director</b>

# Who is teaching my child?



My child's provider is \_\_\_\_\_

My provider telephone number is \_\_\_\_\_

My provider address is \_\_\_\_\_

My FCE Specialist \_\_\_\_\_

My Specialist's direct extension is \_\_\_\_\_

## **DAY TO DAY PROGRAM OPERATION FCC EARLY HEAD START PROGRAM HOURS OF OPERATION**

7:30am-4:30pm

## **FCC HEAD START PROGRAM HOURS OF OPERATION**

7:30am-4:30pm

## **JCCDC ADMINISTRATIVE OFFICE HOURS OF OPERATION**

8:00 am – 5:00 pm

# Program Calendar

## Jefferson County Child Development Council, Inc.





July 2021						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
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25	26	27	28	29	30	31
						10
August 2021						
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29	30	31				21
September 2021						
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October 2021						
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31						20
November 2021						
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28	29	30				16
December 2021						
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2021-2022 HS/EHS Program Calendar	
728 37th Street South Birmingham, AL 35222-3206 Phone: 205-933-1095 Fax: 205-933-7828	
Jul 8-Jul 9	Educator Workday
Jul 12-Jul 16	Pre-Service Days for FCCE
July 19	First Day of School for Students
Aug 27	Professional Development Day
Sep 6	Labor Day
Sep 17	1st 45 Days of School
Oct 8	Professional Development Day
Nov 11	Veterans Day
Nov 15	1st 90 Days of School
Nov 22-26	Thanksgiving Vacation
Dec 20-Jan 3	Winter Break
Jan 4	Students return to School
Jan 17	Martin Luther King, Jr. Day
Feb 11	Professional Development Day
Mar 19	FCC Educator Workday
Mar 28-Apr 1	Spring Break
Apr 4	Students return to school
May 2-6	Mass Screening Week
May 27	Year End Celebration/Last Day of School
May 30	Memorial Day
May 31- June 3	FCC Program Closeout
1st Home Visit - August 16, 2021	
2nd Home Visit - April 15, 2022	
1st Parent-Teacher Conference August 2, 2021	
2nd Parent-Teacher Conference January 14, 2022	
TSG Dates: Fall 11/8/21, Winter 2/15/22, Spring 5/17/22	
Students - 201 Days	
Educators/Providers - 213 Days	
Agency Observed Holidays/Closures	
Jul 2-5, 2021	Independence Day
Sep 6, 2021	Labor Day
Nov 11, 2021	Veterans Day
Nov 24-26, 2021	Thanksgiving Holiday
Dec 20, 2021-Dec 31, 2021	Winter Holiday
Jan 17, 2022	ML King Jr. Day
May 30, 2022	Memorial Day

January 2022						
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February 2022						
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March 2022						
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April 2022						
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May 2022						
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June 2022						
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26	27	28	29	30		

Professional Development Days	
July 12-Jul 16, 2021	PD - Preservice
Aug 27, 2021	PD - Inservice 1
Oct 8, 2021	PD - Inservice 2
Jan 3, 2022	PD - Inservice 3
Feb 11, 2022	PD - Inservice 4

Code of Service Provision	
45 and 90 Day Timeline	
TSG Dates	
Home Visit	
Parent Teacher Conferences	
Program Year Closeout	

 School Closed	 Professional Development Day - No School for Students
 Students Return to School	 TSG Begins

	Parent Teacher Conferences
	First & Last Day of School