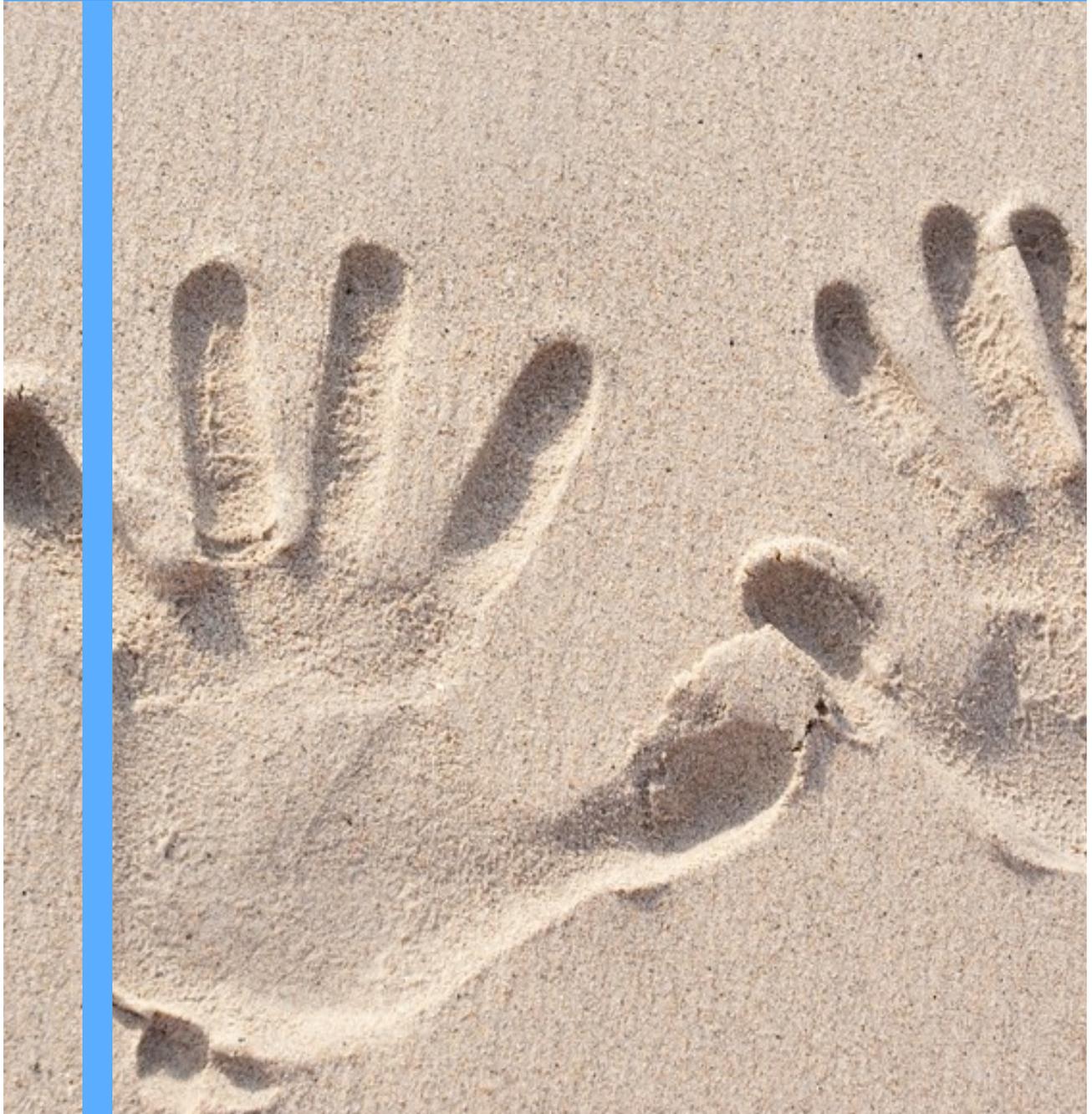


Alameda Family Services
Head Start / Early Head Start
Parent Handbook



Alameda Family Services

2325 Clement Avenue, Alameda, CA 94501

☎ (510) 629-6300 📠 (510) 865-1930

Head Start/Early Head Start Program

Main Office

2325 Clement Avenue, Suite A

510-629-6350

Childcare Centers

Angela Aguilar Center - 1901 Third Street
Head Start/Early Head Start

(510) 865-6403
(510) 865-1090

College of Alameda - 555 Ralph Appezato Memorial Parkway
Head Start/Early Head Start

(510) 748-9618
(510) 748-9628

Sue Matheson Center - 670 West Midway
Head Start/Early Head Start

(510) 521-3453

Woodstock Child Development Center – 500 Pacific Avenue
Alameda Family Services - Partnership Services Information

(510) 748-4001
(510) 629-6356

EHS Learning Together – 2325 Clement Avenue, Suite A
Home Visiting Services

(510) 629-6350
(510) 629-6354

CONTENTS

CONTACT INFORMATION

WELCOME

Page

EDUCATION SERVICES

Overview	2
Head Start	3
Early Head Start	3
Toddler Option	3
Education Screening and Assessments	4
Mental Health Consultation	4
Home Visits and Parent Conferences	4
Transitioning	5
Head Start Classroom Schedule	6
Meal Service	7

HEALTH SERVICES

Health Requirements	8
Health Services Advisory Committee	8

FAMILY SERVICES

Family Assessment and Partnership	9
Family Advocate Home Visits	9
Resources, Referrals and Services	10

PARENT ENGAGEMENT

Parent Volunteer Time (In-Kind)	10
Parent Volunteers	10
Parent Committee Meetings	11
Policy Council	11
Parent Teacher Aide (PTA) Program	11
Employment Opportunities	11

POLICIES:

Confidentiality	12	Absenteeism	14	Siblings in the Classroom	18
Files	12	Sick Child	14	Field Trips	18
Child Abuse	12	Short-Term Exclusion	14	Birthdays Holidays and Celebrations	19
Emergency Situations	12	Medication	16	Food & Candy	19
Discipline	13	Medication Administration	16	Smoke-Free Environment	19
Daily Sign-in/out	13	Medical Emergencies	17	Concerns and Complaints	20
Late Arrival/Pickup	13	Special Health Needs	18	Complaint Resolution	21
		Visiting the Classroom	18	Termination of Enrollment	21

SHORT TERM EXCLUSION POLICY 22

ALAMEDA FAMILY SERVICES PROGRAMS 27

Welcome to Alameda Head Start & Early Head Start Program.

We look forward to working with you and your child.

Alameda Head Start/Early Head Start is a comprehensive program that offers services to children ages 0-5 and their families. Our program strives to meet the needs of each individual needs of each family by providing a variety of program options including home base and center based services.

The purpose of this handbook is to provide an introduction to the program and its policies. There is much more to learn about Alameda Head Start/Early Head Start than can be addressed in this handbook. As the year progresses, we hope you will feel free to ask staff any questions you might have.

EDUCATION SERVICES

Alameda Family Services Head Start's and Early Head Start's educational program is designed to meet each child's individual needs within the context of his/her culture. Early childhood research has shown that the needs of children vary considerably, and that to serve these needs most effectively, programs must take into account the developmental, individual and cultural needs of each child served.

Every child is exposed to a wide array of learning experiences to foster intellectual, physical, social and emotional growth, either through a center-based or home-based setting. Children participate in indoor and outdoor activities and are introduced to skills and concepts through play. They are encouraged to express their feelings in appropriate ways, to develop self-confidence and self-esteem, and to learn how to get along with others.

The diversity of Alameda Head Start/Early Head Start provides an opportunity to celebrate individual and cultural similarities and differences. The curriculum and classroom activities are reflective of the families and staff in the program.

To assure that children receive the high quality care and education, two teachers are assigned to each classroom. The adult child ratio is never greater than one to four with children 0-36 months and one to ten for children 3-5 years old.

Parents are encouraged to participate in all aspects of their child's education. We welcome your participation in the classroom by observing and working with the children and staff. We recognize and honor that parents are the most important teacher model for their child. We seek to reflect this in how we communicate with parents on a daily basis about their children, as well as in the systems we have developed for Early Head Start and Head Start.

Family Participation is FUN-damental to the Success of Head Start

Head Start

Children learn through relationships, and play-based activities such as dramatic play, block play, art, outdoor play, storytelling, and field trips. Each activity is designed to stimulate a child's imagination and awaken an interest in discovery and learning while promoting kindergarten readiness skills. In our preschool, children follow a daily schedule, which includes morning transition time, breakfast, indoor and outdoor play, circle time, small group activities as well as 'free' play.

The Head Start classroom environment is designed to enhance the intellectual, physical, social and emotional development of each child. The program is guided by the National Association for the Education of Young Children Developmentally Appropriate Practices, Anti-Bias Curriculum, Center for Social and Emotional Foundations of Early Learning and Creative Curriculum.

Early Head Start

Early Head Start offers many services to help pregnant women and families with children under age of three meet the medical, physical, emotional and developmental needs of their infant or toddler.

Our center-based program option uses the Creative Curriculum for Infants, Toddlers, and Two's. Curriculum for infants and toddlers is at its core about building safe, secure and stable relationships between caregivers and infants and toddlers. With this security infants and toddlers are free to explore the world around d them. Creative Curriculum provides a concrete framework to accomplish this. Teachers plan classroom experiences for both individuals and small groupings that integrate the Creative Curriculum developmental objectives.

Toddler Option

Alameda Head Start also offers placement in our center-based Toddler Option which provides full-day and part-day services to children 18 to 36 months of age.

Education Screenings and Assessments

All children grow and develop at their own rate. During the first weeks of your child's attendance, teachers will conduct developmental screenings designed to ensure that the program and classroom activities meet your child's individual needs. Sometimes these screenings may indicate potential developmental delays that require further evaluation. Concerns regarding your child's development will be discussed with you before any further evaluation is conducted.

Staff will work closely with parents, family members and community agencies to facilitate any additional services necessary to meet each child's developmental needs. Parents who have concerns about their child's development should discuss these concerns with their child's teacher and/or family advocate.

Children with a diagnosed disability or with special needs actively participate in all aspects of the program. Understanding, knowledge and support for children with special needs and their families is an integral part of our program.

Throughout the year, Head Start staff will observe your child for continuing progress. Using the State of California's Assessment tool – Desired Results Developmental Profile (DRDP) – staff will meet with you to discuss their observations and work towards developing educational goals for your child.

Individualization occurs for all children. For children with IEP's or IFSP's, ongoing communication between you as the parent, the teacher, the school district and other IFSP/IEP team members keeps us all up-to-date on your child's progress and challenges.

All children enrolled in the program are valued and will be given the opportunity to learn and develop at their own pace.

Mental Health Consultation

Alameda Head Start/Early Head Start is pleased to have services from mental health providers to support teaching staff, children and families regarding children's healthy social-emotional development. Mental health interns through Alameda Family Clinical Services Programs, as well as clinicians through Children's Hospital's SPARK Project (Successful Preschool Adjustment and readiness for Kindergarten) and The Link to Children, an early intervention mental health program support our program.

Home Visits and Parent Conferences - Center Based

Teachers will schedule at least two home visits: one at the beginning of the year and one during the second half of the year. During the first home visit, you will have the opportunity to discuss your child's behavior and social/emotional development with your child's teacher. The teacher will conduct a short screening interview with you. This information will be used to help us meet the needs of your child and to address any concerns you might have. The first home visit will take place within 45 days of enrollment.

The purpose of the second home visit is to review your child's growth and progress. We feel that home visits are sharing times for both parents and staff and we encourage you to ask questions and express concerns.

In addition to the home visits, conferences at the center will take place throughout the year, providing opportunities for sharing information, asking and answering questions and reviewing your child's progress. For children transitioning to preschool or kindergarten, the second visit will provide an opportunity to plan activities and gain information about what child is transitioning to.

Transitioning

Staff will begin transition planning with each Early Head Start child and family at least six months prior to the child's third birthday. For Head Start children and families transition planning will begin at least six months before kindergarten. We involve parents in all aspects of transition services.

Change can be hard for young children! Whether your child is changing childcare providers, changing classrooms or leaving Early Head Start for Head Start or kindergarten, you can support your child by:

- Participate in the program's Transition Planning process
- Talk about how the new school or childcare will be different.
- Arrange to visit the new school with your child and if possible, visit the classroom he/she will be in and introduce him/her to the new teacher.
- Locate paperwork you'll need for school registration.
- Teach your child his/her personal information: full name, address & phone number.

Classroom Schedule

The classroom is a place to watch, play, teach and learn. Parents are always welcome and encouraged to be equal partners in creating a safe, fun and exciting environment. The following is an example of a Head Start classroom schedule with a brief description of each activity.

Arrival and Greeting
Parents and children enter the classroom and are greeted by a teacher or family advocate. Parents sign in on the roster with their full signatures, children place jackets and personal belongings in their cubbies and teachers conduct a daily health check. Children greet friends and socialize as they prepare for breakfast or lunch. This is a good time for parents and staff to ask each other quick questions.
Meal Time and Clean Up
Children prepare for breakfast or lunch by washing hands and joining classmates at the table for a family style meal. They enjoy a nutritious meal while staff and parent volunteers model appropriate conversation and mealtime behavior. Children learn to serve themselves, eat with a group, clean up after themselves and try new foods. Children are encouraged to try at least one bite of a new food, but are not forced to eat or clean their plates. After eating and cleaning up, children brush their teeth before moving to the next activity.
Circle Time
Circle time helps children develop listening skills and a sense of belonging to a group. Teachers often introduce and explain activities for the day. Children enjoy group activities such as story telling, singing, music and movement, exercises and games.
Activity and Small Group Time
Children have the opportunity to choose from a variety of activities including working on art projects, playing games, or participating in teacher directed projects designed to enhance their learning and social skills.
Outdoor Play
Outdoor play is for fun and physical development. The outdoor play area provides equipment designed for climbing, sliding, sand and water play and gardening. Children can ride bikes, use a wagon, swing or just run around and chase each other. Balls, hula-hoops, jump ropes and bubbles are available for children to use.
Meal Time and Clean Up
Children wash their hands and help set the table for lunch or an afternoon snack. Afterwards, children help clean up before moving to a quiet area. The use of the library or listening center and drawing or writing are all activities that help transition children for the end of their school day. Full-day children transition after lunch to an afternoon nap.
Good-bye and Departure
Children and parents gather artwork, belongings, notes and flyers. This is a good time for children to share with parents the happenings of the day. Parents sign out on the roster with their full signature and good-byes are extended to friends, parents and teachers.

**This classroom schedule is only an example and will vary depending upon the program option, time of the year and the needs of the children.*

Meal Service

Meals and formula are provided free of charge to all children enrolled in the program. Meals for enrolled children only are prepared daily and delivered to the centers by a caterer. Due to the high percentage of families who restrict pork from their diets, pork products are not served at the centers. Vegetarian and vegan meals are available upon request. Meal Modification forms are available from Family Advocates. Parents, visitors and volunteers are not allowed in the kitchen or areas designated for food preparation without the prior approval of a Head Start/Early Head Start Manager.

Head Start: Children enrolled in the full day program receive breakfast, lunch and an afternoon snack. Breakfast and lunch are served to children enrolled in the part day morning session and children enrolled in the afternoon session are served lunch and a snack. Family-style eating is in place in all preschool classrooms. Teachers and children share the same foods. Teachers sit at the tables and facilitate positive conversation during meals. Children are also involved in cleaning up after themselves after they finish their meals.

Early Head Start: Individualized Feeding Plans are updated monthly for infants and toddlers. Infants eat “on demand” similarly to how they eat at home. Older infants and toddlers eat in groups. If they are either tired or asleep when their infant/toddler group has their meals, they will be fed individually. EHS caregivers do not prop bottles for infant feedings, the children are held. Additionally, bottles only contain milk, breast milk, formula or water. Note: The following foods will not be served to children less than 12 months of age: eggs, corn, honey, chocolate, peanut butter by spoonful, citrus fruits, or shellfish.

Meal Modifications: If your child has specific food restrictions, please request a Meal Modification from your Family Advocate. The form must be completed and signed by your child's Physician. In order for us to make appropriate accommodations and/or substitutions, this form must be submitted to the Health Services Manager at least 2 weeks prior to the child's attendance.

CACFP Nondiscrimination Statement: *Alameda Head Start/Early Head Start receives funding through the United States Department of Agriculture (USDA) administered by the Child and Adult Care Food Program (CACFP) to provide nutritious meals for all children in the program. 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, Room 326-W, Whitten Building, 14th and Independence Avenue, SW, Washington, DC 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.*

HEALTH SERVICES

Alameda Head Start/Early Head Start assists families establishing of comprehensive health services for all children enrolled. In addition to ensuring that Head Start families have access to medical care and assistance with the establishment of a medical home for their children's care, the Head Start Program Performance Standards require a determination by a health care professional that a child is up-to-date on a schedule of well-child care.

Well-child care includes scheduled age appropriate preventive and primary health care including medical and dental, aligned with the State of California's Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program and the Centers for Disease Control and Prevention immunization recommendations.

Health Requirements

To comply with Head Start Performance Standards, parents must provide our program with the following supporting documentation:

- Up -to-Date Immunization Records
- Well Baby/Child Exams with appropriate sensory screenings, growth assessments and blood pressure results for age
- Blood Lead Test Results. Conducted at 12 months of age and 24 months of age
- Hemoglobin /Hematocrit (blood test results) appropriate for age
- Dental Exams are recommended for children once the first teeth appear and are required for children annually after 3 years of age

(Note: Dental Assessments are required with each physical exam.)

Families will be reminded (and assisted if needed) to keep their children up-to-date on an age-appropriate schedule of well childcare and immunizations, according to EPSDT and Centers for Disease Control Requirements.

Health Service Advisory Committee:

This committee is made up of parents, staff and community health professionals. Quarterly meetings are held to assist the program in making decisions about health policies and in developing plans to address the health concerns of families and children. Please let staff know if you are interested in participating as a member of this advisory committee.

FAMILY SERVICES

Alameda Head Start/Early Head Start is a family-centered program. Family services is a broad category and can include education, health, nutrition, mental health, social services, parent engagement, disabilities and transition into elementary school.

Family Assessment and Partnerships

After enrollment into the program, your Family Advocate will contact you to complete a Family Assessment. The information gathered from the Family Assessment will help your family identify its own strengths and begin thinking about areas you might like to strengthen and possibly develop goals and timelines.

You and your family will create three goals: a family goal, an educational parent support goal, and a social/emotional parent support goal. Goals can be related to your child, another family member or the whole family. Some examples of goals are:

- I want to improve my education.
- Our family wants to have better ways to communicate.
- I want to improve my relationship with my child's doctors.

Resources, Referrals and Services

Family Advocates work with families to offer resources and referrals and assist them to obtain necessary services. Following are examples of information and services parents might request.

- Information about where to get free food and clothes.
- Learn ways to reduce your child's fear about going to pre-school.
- Where you could talk to someone about my feelings and stress.
- Trainings about helping my child learn letters.
- Support in learning the requirements for Head Start and kindergarten.

Family Advocate Home Visits

After the Family Assessment is completed, the parent and Family Advocate might decide that a series of home visits would be beneficial. The purpose of home visits is to assist parents with their goals, update or change goals when necessary and provide additional assistance that may be needed during the year. Frequency and length of home visits is determined by a parent's work and school schedule. For example, one parent might want weekly home visits while another parent might ask for a home visit once a month.

Head Start/Early Head Start's goal is to provide services to the family as well as the child.

PARENT ENGAGEMENT

Parent engagement is central to the Head Start philosophy. Alameda Head Start/Early Head Start is enhanced when parents participate. You are a crucial part of this program. You can have fun, make friends, learn new skills and have your children see the wonderful talents you have. Tell us about your strengths and we will put them to good use in the program. Make Alameda Head Start/Early Head Start your program.

Parent Volunteer Time (In-Kind)

Alameda Head Start/Early Head Start receives federal funds in order to provide services to the children and families in the community. Federal regulations require that we earn at least 20% of our total grant dollars. This 20% does not come in "real dollars", but is actually earned through parent and community volunteers, services and donations which are called "in-kind" donations.

One of the most important ways we meet the in-kind requirement is through parents volunteering in the program. Every time a parent volunteers by working in the classroom or attending a meeting or workshop, the amount of time volunteered counts toward the in-kind requirement. You can help us reach our funding goals by signing a Classroom In-Kind Form each time you visit the classroom or participate in a meeting, workshop or activity.

As you create child and family goals with your teacher and/or family advocate, you can also log in time spent on home activities on a Home Activities Log. Time spent with your child and family working toward these goals can also count towards the program's In-Kind requirement. Every effort counts and we would like you to know we appreciate all of your volunteer efforts!

Parent Volunteers

All parents and guardians are encouraged to volunteer as often as possible. Each classroom has handouts for parents describing how to be good classroom volunteers and what areas of the routine where parents can help the most. Your child's teacher or Home Visitor can also inform you of volunteer opportunities.

While volunteering in the program is not mandatory, children, parents and staff benefit when you become involved. Every little bit helps.

Parent Committee Meetings

Meetings with staff, other parents in your child's class or home base group, focus on information about what's going on and occasional training. Topics will be varied and reflect parent interest. Even if you cannot attend every meeting, we hope you'll experience the variety available to you. Watch for the schedule to be posted on the monthly calendar.

Policy Council

Parents elected to the Policy Council participate with staff and the Alameda Family Services Board of Directors in making and approving decisions that directly affect the program. Through this shared partnership, Policy Council members are included in decisions about enrollment priorities, evaluations of the program, hiring personnel and writing the program's federal funding grant. Most importantly, parents who serve on the Policy Council work in partnership with staff to shape the future of the program and services provided. Please let staff know if you are interested in how to become a Policy Council Representative.

Parent Teacher Aide (PTA) Program

The Parent Teacher Aide Training Program was established in 1998 and provides job experience and educational opportunities to parents interested in entering the field of Early Childhood Education. This three-year parent-training program has given our program the ability to employ a qualified, loyal staff that reflects the ethnically, culturally and linguistically diverse community we serve. Hiring qualified current or former parents enables us to provide services to families with a parent-focused perspective and an intimate understanding of Alameda Head Start.

If you are interested in entering the field of Early Childhood Education and interested in participating in our Parent Teacher Aide Training Program please contact your Family Advocate and/or the AFS Human Resources Coordinator for a job description and application.

Employment Opportunities

There are several job opportunities for parents in the program. Many Head Start parents began pursuing a career working with children by volunteering in the classroom. By becoming involved in the program, many parents have also become valued Head Start/Early Head Start employees in almost every position available, including office and teaching jobs.

AHS/EHS POLICIES

For more information regarding policies and procedures presented in the Alameda Head Start/Early Head Start Parent Handbook, contact your child's teacher or your Family Advocate. For comprehensive information, please feel free to consult the Alameda Head Start/Early Head Start Policies and Procedures Manual. Copies of this manual are available at each center and at the Alameda Family Services Main Office at 2325 Clement Avenue, Alameda, CA 94501.

Confidentiality: All information between you and Alameda Family Services is held strictly confidential unless (1) you authorize the release of information, (2) the disclosure is allowed by a court order, (3) you present a physical danger to yourself or others or (4) child or elder abuse/neglect is suspected. In the cases of potential harm, abuse or neglect, Alameda Family Services staff is required by law to inform the proper authorities so that protective measures can be taken. If you are receiving services through more than one Alameda Family Services program, relevant information may be shared between program staff in order to coordinate services.

Files: Your child's file will be stored in a locked file cabinet. Information in your child's file will only be shared with others in accordance with the child abuse and confidentiality policy. You have the right to see your child's file and copies can be obtained through the enrollment office.

Child Abuse: Alameda Head Start/Early Head Start staffs are mandated by law to report incidents of child abuse or neglect and suspected incidents of child abuse and neglect. All suspected child abuse cases will be reported to one of the following. In addition a report may be made to Alameda Police Department and/or Community Care Licensing. The agency receiving the report will decide whether it will investigate the report.

Emergency Situations: In the event of an emergency involving your child our first call will be to 911. We will then contact you. If we are unable to reach you, we will contact the emergency contact(s) listed in your child's file and apprise them of the situation. It is essential that you provide several emergency contacts to the program, including all your current numbers, and update them regularly in case there is a problem and someone needs to be reached. Emergency telephone numbers must be working numbers at all times.

Discipline: Corporal punishment is prohibited. This applies to everyone who participates in the Alameda Head Start/Early Head Start program including, parents, volunteers, and staff. The use of corporal punishment is not allowed in the classrooms, during home visits, while on school property or during any Head Start/Early Head Start event or at program-sponsored events. Children will not be yelled at, grabbed, pushed, spanked or treated in a harsh manner. Instead, children will be re-directed to positive activities. Time-outs may be used when children need to calm down or are hurting themselves or others. Time-outs will last no longer than five minutes and children will not be left unsupervised. When there is an ongoing behavior issue with a child, staff will ask parents to participate in developing problem-solving interventions.

Daily Sign-in and Sign-out: The person who drops off and picks up the child must be authorized by the child's parent or guardian and be listed on the Emergency Information and Authorization form. He or she must sign the daily sign-in sheet using full signature, time of arrival and time of departure. Staff members will confirm identity and ask for photo identification when a new person comes to pick up your child. Alameda Head Start/Early Head Start requires that a person must be at least 16 years old to pick-up your child. Please keep your list of authorized persons up-to-date with your Family Advocate.

Late Arrival & Pick-Up: Late arrivals are disruptive to the classroom and are difficult for the child who comes in late. To ease the transition from home to school, please bring your child to school on time. If you are going to be late, please notify the teacher. If parents are continually late bringing their children to school, the family advocate will work with the family to develop a plan to remedy the situation.

Your child must be picked up by the scheduled ending time of his/her Head Start/Early Head Start site. **There is no grace period for late pick-up.** If you are late, your child's teacher will begin contacting you and/or any emergency contacts. It is important to keep your Emergency Contact sheet current with correct phone numbers. If you or a contact from your emergency list has not been reached within thirty minutes of the Center closing, the Alameda Police Department will be contacted and they will take your child into their custody. If late pick-up becomes an on-going issue, your Family Advocate will assist you in developing a family plan that ensures on time pick-up.

Absenteeism: If your child will not be in the classroom for any reason, please call your Family Advocate, or leave a message on the classroom answering machine. If you do not notify us of your child's absence your Family Advocate will contact you and offer assistance as appropriate. If your Family Advocate is unable to contact you and your child is absent for four (4) consecutive days, or displays a pattern of unexcused absences, you will receive notification in writing of your child's potential loss of placement.

When your child's monthly average daily attendance drops below 85%, your Family Advocate will contact you to discuss the reasons for the lack of attendance and will assist in the development of a plan of action to improve your child's attendance. If attendance does not improve, your Family Advocate will review and make amendments to the plan of action. If absenteeism continues to fall below 85% you will be notified in writing of your child's potential loss of placement. Your child may be dropped from the program or transferred to a different program option.

In the event you and your child will be on vacation, please notify your Family Advocate. When given prior notification, a vacation of up to two (2) weeks within the program year is considered an excused absence and your child's name will not be placed on the waiting list. If you and your child will be on vacation for more than two (2) weeks during the program year, or you do not notify us of your vacation plans, your child's name will be placed on the waiting list. During the summer transition, program absenteeism due to vacations of any length may result in loss of placement.

Sick Child: Teachers will conduct daily health checks and children determined to be ill will be sent home. If your child is sick, please do not bring him/her to the classroom and call your Family Advocate or leave a message on the classroom answering machine. If you are scheduled to receive a home visit from a staff member and your child or any other person in your home is ill, please call and cancel your home visit.

In general, there are three reasons to keep your child at home:

- The child does not feel well enough to participate comfortably in routine activities.
- The child requires more care than staff is able to provide without compromising the health and safety of the other children.
- The illness is on the list of diagnosed symptoms or conditions for which exclusion is recommended

Short Term Exclusion List: The National Centers for Disease Control and Prevention, American Academy of Pediatrics and California Community Care Licensing recommend that sick children or children with symptoms should be excluded from child care either to reduce the risk of spreading the infection, or to allow children time to recover to the point where you can safely care for them or both.

If your child become ill, follow these suggestions:

- ✓ Have a backup plan for child care in the event of short or long term exclusions.
- ✓ Request the primary care provider's note to readmit a child if the primary care provider's advice is needed to determine whether the child is a health risk to others, or the provider's guidance is needed about any special care the child requires.
- ✓ Remember that the program staff will make the final decisions about whether children who are ill may stay based on the program's inclusion/exclusion criteria and their ability to care for the child who is ill without compromising the care of other children in the program.
- ✓ Review the Alameda Head Start/Early Head Start Short Term Exclusion Manual. The manual is at the end of this Handbook.
- ✓ Describe to the classroom staff your child condition to determine if the child is well enough to return.

Medication: If your child is taking medication, prescription or non-prescription, and the medication must be administered during classroom hours, you and your Doctor must support AHS/EHS in following the **Incidental Medical Services (IMS)** procedure recommended by California Community Care Licensing.

Under specific circumstances, Alameda Head Start/Early Head Start, will provide the following types of incidental medical services:

- Inhaled medication.
- Blood glucose testing.
- EpiPen JR. and EpiPen.

All pertinent documentation, such as written permission from the parent's or legal guardian's to provide the incidental medical service, written instructions from the child's physician, verification of staff training; records of medication/service provided will be completed, secured and maintained in the child's working file.

Parent and child's primary physician must complete Medication Administration form and Individualized Health Care Plan. Whenever possible and for previously diagnosed chronic conditions, the Medication Administration Form must be signed by the child's primary care provider and submitted at least one week prior to the child's attendance.

This form must be updated every six months and/or every year your child is enrolled in our program. The form must accompany all medication that is to be administered by Alameda Head Start/Early Head Start staff and all medication must be in its original container.

Parents must provide Alameda Head Start and Early Head Start with:

- Medication in the original container, with instruction for exact dosage.
- Container labeled by a Pharmacist with the child's name, the name of the medication and the date the prescription was filled.
- The name of the health care provider who wrote the prescription.
- The medication's expiration date.
- Administration, storage, and disposal instructions.

Please note that the only non-prescriptions medications that Alameda Head Start and Early Head Start staff will administer are: diapering creams/ointments, topical teething ointments/gels, and/or sunscreens. Non-prescription medications must be in their original containers and parents must complete a Medication Authorization Form with instructions for administration.

AHS/EHS Medication Authorizations include designation of a trained staff member(s) to administer, handle and store child medications, and documentation of the child's physicians' instructions and written parent or guardian authorizations for all medications administered by staff.

Medication Administration Procedures: AHS/EHS Medication Administration Procedures include processes for labeling and storing, medications under lock and key, and the refrigeration of medications, and include provisions for all medications held on site, including those required for staff and volunteers. AHS/EHS policies identify individuals responsible for providing staff training in medication administration/service. AHS/EHS will ensure that staff have received training and management will conduct ongoing monitoring of staff on medication administration/service, use and maintenance of required equipment and/or supplies, what to do in emergencies.

- Training for staff is provided annually, during the all staff pre-services meetings, by CHDP pediatrician consultant and/or license health care provider, and the AHS/EHS Health Services Manager.
- AHS/EHS will ensure that appropriate staff members can demonstrate proper techniques for administering, handling, and storing medication, including the use of any necessary equipment to administer medication.
- The designated staff person (usually the child's primary teacher) is responsible for the Medication Administration and an alternate staff person (Site Supervisor) at the site are trained by the child's Parent/Guardian, Health Services Manager or physician on how Medication Administration is to occur. The designated staff will be available during field trips. In the case of the designated staff person's absence, the alternate will assume all the responsibilities of the designated trained staff person.
- The staff person dispensing the medication must follow universal precaution and blood borne pathogens procedures. Nonporous gloves will be provided and worn by staff when they are in contact with spills of blood or other visibly bloody bodily fluids.
- In the event of a disaster or emergency that requires relocation of a child from the facility, the designated staff person (usually the child's primary teacher) will collect any medications from the Medication Lock Box and follow Emergency Preparedness and Response Plan.
- Staff will record the time and dosage of medication given (including non-prescription medications) on the Medication Log located in each classroom. Staff will record behavioral observations of side effects that might be related to the medication(s) taken by the child. Parents are encouraged to check the log each day and talk with staff about the observations. All medications, including non-prescription medications, are to be kept in a locked child-safe storage unit
 - a) The time, the dosage given and any reactions are recorded each time the medication is administered.
 - b) Changes in behavior are recorded in the *Observation* column on the log.
 - c) If the child experiences any changes in behavior after taking the medication, the child's Parent/Guardian or if unavailable emergency contacts provide by the parent/guardian will be contacted immediately.
 - d) When medication is administered, the log is reviewed with the Legal Guardian and must be initialed by the Parent/Guardian daily.

Reporting Medical Emergencies: Alameda Head Start staff members are to report any unusual incidents that occur in the classroom and/or center to their supervisor immediately. The Site Supervisor with support from the Family Advocate and Manager will determine based on information provided by the staff witnessing and/or reporting the incident if the incident meets CCL reporting requirements. The Site Supervisor, Manager or Program Director will contact Community Care Licensing for advice if unsure whether incident would meet reporting requirement standards listed within the Community Care Licensing Regulation: Reporting Requirements 101212(d) This report will be made by contacting CCL by the next working day and a written report will be filed with CCL within 7 days.

Special Health Needs: Alameda Early Head Start/Head Start will work with parents to accommodate children with chronic illnesses and children with identified special health needs. The Family Advocate, Teachers and Health Services Manager will collect necessary information and case conference with the family and health care provider to establish an Individualized Health Care Plan.

Visiting the Classroom: Alameda Head Start/Early Head Start encourages and welcomes parents to visit the classroom. You have the right to enter and visit the classroom at any time during your child's regularly scheduled classroom session.

Siblings in the Classroom: If you plan to participate and help out in the classroom, please do not bring other children with you to the classroom, even if they are your own, since California Community Care Licensing regulations regulates the number and ages of children in attendance in the classroom. Other children may only accompany parents for a very brief period while you drop off and pick up your enrolled children. Siblings are not allowed to participate in any meal service.

Field Trips: Field trips are conducted throughout the program year. Examples include but are not limited to local parks, recreation areas, farmer's market and libraries. Parents will be notified in advance of all field trips and must give written permission for their child's participation. Parents are encouraged to volunteer for field trips but due to licensing regulations, non-enrolled children may not accompany parents who are chaperoning children. Parents are not permitted to buy anything for their children while on the field trip, since this causes conflict within the class.

Birthdays, Holidays and Celebrations: Alameda Head Start/Early Head Start serves families of very diverse cultural backgrounds. In our effort to respect each family's practices, religious holidays, cultural and birthday celebrations are not included in classroom practices. Please do not bring food or other items to school on these days. Classroom activities focus on broader themes such as the changing seasons, community building and family appreciation.

Food & Candy

Please do not send food, candy or gum to school with your child.

Smoke-Free Environment

Alameda Head Start/Early Head Start is a smoke-free environment for children, parents, staff and other participants. The following are included in the smoke-free policy:

- There will be no smoking by parents, staff and other participants when the children are present. This includes indoor activities, outdoor activities and off-site activities.
- There will be no smoking in any Alameda Head Start/Early Head Start facility at any time.
- The area outside of the classroom is smoke-free. There will be no smoking within the children's sight and at least twenty (20) feet from the main entrance of the classroom.
- There will be no smoking during outdoor activities within the children's sight and at least one hundred (100) feet from the activity area.
- There will be no smoking in any Alameda Head Start/Early Head Start vehicle at any time.
- There will be no smoking by parent, staff and other participants when personal vehicles are being used to transport the children, parents, staff and other participants on Alameda Head Start/Early Head Start activities (e.g., field trip).
- There will be no smoking during off-site activities.

Concerns and Complaints

While it is usually best to first try to resolve the problem with the person your problem is with, if that is not possible, please call one of the following for help.

Who Do I call if I have a concern about or issue with...

My child's teacher?

- Speak with or call the SITE SUPERVISOR at your child's center

The Site Supervisor?

- Call the CHILD DEVELOPMENT SERVICES MANAGER at 510-629-6335

My home visitor?

- Call the ECC PROGRAM SUPERVISOR at 510-629-6363

My family advocate?

- Call the HEALTH SERVICES MANAGER at 510-629-6358

Another parent?

- Speak with or call the SITE SUPERVISOR at your child's center

The Mental Health Intern?

- Call the MENTAL HEALTH SPECIALIST at 510-629-6324

About another staff person or a program related issue?

- Call the AHS/EHS PROGRAM DIRECTOR at 510-629-6331

Complaint Resolution

When program staff, Policy Council, Parent Committee or Governing Board members are informed of a community complaint, the Policy Council Co-Chairs will meet with the appropriate AHS Director and the complainant to hear the complaint. Following the meeting and if a resolution cannot be reached at that time, the complainant will be requested to put the complaint in writing and submit it to this group.

Upon receipt of the written complaint, the Policy Council will appoint a three-member committee to investigate the complaint. The assigned committee will investigate the complaint with the assistance of the appropriate AHS Director and the AFS Board liaison.

If the nature of the complaint is urgent, the committee will complete the investigation within ten consecutive calendar days upon receipt of the written complaint. If the nature of the complaint is not urgent, the committee will complete the investigation within thirty consecutive calendar days upon receipt of the written complaint.

Upon the completion of the investigation, the appointed committee will meet with the entire Policy Council to report their findings.

The council will finalize the investigation and make a recommendation for resolution of the complaint. The resolution will be written, incorporating the final appeal process, and mailed to the originator of the complaint.

If the complainant is dissatisfied with the resolution, s/he will meet with the AFS Board President, the AFS Executive Director and the Policy Council Co-Chairs to restate the complaint and appeal the Policy Council resolution.

Within five consecutive calendar days of the appeal meeting, if the matter is urgent, and ten consecutive calendar days if the matter is not urgent, the final decision of the above-mentioned parties will be written, mailed to the complainant.

Termination of Enrollment

Enrollment in the program may be terminated for non-compliance of Head Start/Early Head Start procedures and/or policies. Threats of any kind, inappropriate, unmanageable or negative behavior by a child or adult which causes disruption of the daily schedule, classroom management or poses immediate physical harm or threat to staff, volunteers, parents and/or children may result in the termination of enrollment.

Short Term Exclusion

The National Centers for Disease Control and Prevention recommends that children with the following conditions or symptoms should be excluded from child care either to reduce the risk of spreading the infection, or to allow children time to recover to the point where you can safely care for them or both:

Teachers will conduct daily health checks and children determined to be ill will be sent home.

Symptom	Documentation or Criteria To Return
<p>1. Exclude children with symptoms or illness that prevents them from participating comfortably in program activities as determined by classroom staff.</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p>
<p>2. Exclude children with symptoms or illness that results in a greater need for care than the classroom staff can provide without compromising the health and safety of other children.</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p>
<p>3. Cold/Flu symptoms Exclude children with symptoms of cold /flu symptoms which may include (not limited to):</p> <ul style="list-style-type: none"> a. Fever b. Child looks or acts very ill c. Difficulty breathing d. Blood red or purple rash not linked to an injury <p>Classroom staff may opt to exclude children with significant nasal discharge that prevents them from participating comfortably in program activities and/or needs greater care than the staff can provide</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission. Parents should consider seeking medical attention.</p>
<p>4. Cough: Exclude children with</p> <ul style="list-style-type: none"> a. Severe cough b. Rapid and/or difficult breathing c. Wheezing if not previously evaluated & treated d. Blue color of skin and mucous membranes e. Tuberculosis until treated ☒ f. Pertussis (whooping cough) until 5 days after antibiotic treatment ☒ 	<p>Health Care Professional Note: (510) 629-6358 ☒ Contact AHS/EHS Health Services Manager</p>
<p>5. Diarrhea is defined by loose or watery stools that are not associated with changes in diet.</p> <p>Exclude children with diarrhea (3 or more loose stools in a 24 hour period), until symptoms are resolved or medical evaluation indicates that inclusion is acceptable.</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p>

Teachers will conduct daily health checks and children determined to be ill will be sent home.

Symptom	Documentation or Criteria To Return
<p>5. Diarrhea - continued Exclude diapered children whose stools are not contained in the diaper or toilet-trained children whose diarrheal episodes are causing “accidents” that challenges the ability of classroom staff to maintain sanitary techniques and/or conditions.</p> <p>Exclude students of any age with uncontrolled diarrhea or stools that contain blood or mucus. 📞</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p> <p>Health Care Professional Note: (510) 629-6358. 📞 Contact AHS/EHS Health Services Manager</p>
<p>6. Difficulty breathing or Noisy Breathing Exclude children (not limited to) :</p> <ul style="list-style-type: none"> ◆ Hard, fast, difficult breathing that does not improve with any medication the program has been instructed to use for child’s difficult breathing. ◆ Barking cough with fever or behavior changes ◆ Chest retractions ◆ Breathing problem that makes feeding very difficult ◆ Looks or acts very ill 	
<p>7. Exclude children with Earache if unable to participate and/or has fever.</p>	
<p>8. Eye Irritation, Pinkeye: Exclude children with pink or red conjunctiva (whites of eyes) with white or yellow mucus, or diagnosed with bacterial conjunctivitis (purulent), until treated. 📞</p>	<p>Health Care Professional Note. If more than 1 or 2 children in group have watery red eyes without chemical irritant exposure, and Health Care Professional Note: (510) 629-6358. 📞 Contact AHS/EHS Health Services Manager</p>
<p>9. Fever : Fever is defined by age:</p> <p>a. For Infants 4 months of age and younger (even if there has not been a change in child’s behavior): Rectal temperature: 101.0 ° F or greater</p> <p>b. For Infants & Children older than 4 months of age:</p> <ul style="list-style-type: none"> • Axillary (under the arm) temperature: 100.0 ° or > • Oral temperature: 101.0 ° F or > <p>c. Fever in a child 60 days of age or younger (axillary >100.5 or >101 rectally) requires immediate medical attention.</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p> <p>Exclude children who have fever and do not have signs of illness, until medical evaluation indicates inclusion is acceptable and</p> <p>Health Care Professional Note: (510) 629-6358. 📞 Contact AHS/EHS Health Services Manager</p>

Teachers will conduct daily health checks and children determined to be ill will be sent home.

Symptom	Documentation or Criteria To Return
<p>10. Exclude child with Headache, if child is unable to participate in school activities, as determined by classroom staff.</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p>
<p>11. Itching Exclude children with Head lice (at end of day until first treatment; no exclusion for nits) from the end of the school or program day until after the first treatment with an appropriate pediculicide (medication) or other effective lice removal product.</p> <p>The American Academy of Pediatrics recommends that, until the end of the program day, students with head lice avoid any activities that involve the student in head-to head contact with other students or sharing of any headgear. Classroom staff may opt to exclude children immediately if close head-to-head contact cannot be avoided in the classroom/center setting. Sports or physical education governing bodies may impose additional restrictions on participation.</p> <p><i>See under "Rash" for chickenpox, shingles, scabies, impetigo, ringworm, eczema, contact or allergic dermatitis</i></p>	<p>Parent Note</p>
<p>15. Mouth Sores: Exclude for sores, including mouth ulcers and blisters, inside the mouth.</p>	<p>Health Care Professional Note, documenting diagnosis and non-infectiousness. If diagnosed with recurrent HSV, Health Care Provider with diagnosis only</p>
<p>16. Rash Exclude children with symptoms of a contagious disease, which may include (not limited to):</p> <ol style="list-style-type: none"> Rash with behavior change or fever Oozing/open wound Bruising not associated with injury Joint pain and rash Unable to participate in school activities Scabies until treated Ringworm (at end of day until treatment started) Measles until 4 days after start of rash ☎ Rubella until 6 days after onset of rash ☎ Chickenpox (Varicella) until all lesions have dried (usually 6 days) ☎ Impetigo until treated for 24 hours ☎ 	<p>Health Care Professional Note: (510) 629-6358 ☎ Contact AHS/EHS Health Services Manager</p>

Teachers will conduct daily health checks and children determined to be ill will be sent home.

Symptom	Documentation or Criteria To Return
<p>16. Rash - Continued</p> <p>Exclusion is not required for:</p> <ul style="list-style-type: none"> a. Allergic or irritant reactions unless appears infected. b. Eczema unless appear infected. c. Shingles (must be able to keep lesions covered with clothes and/or dressing) 	
<p>17. Sore Throat (pharyngitis)</p> <p>Exclude children with Sore Throat if they have fever, excessive drooling with breathing difficulty and inability to swallow or unable to participate as determinate by classroom staff.</p>	
<p>18. Stomachache</p> <p>Exclude children with persistent abdominal pain (continuing for 2 or more hours) or intermittent abdominal pain associated with fever, vomiting, dehydration, yellow skin/eyes or other systemic symptoms.</p>	
<p>19. Swollen Glands (Lymph Nodes)</p> <ul style="list-style-type: none"> • Exclude children with swollen glands associated with fever, difficulty breathing or swallowing. • Exclude children with: red, tender, warm glands. • Exclude children with Mumps, until 9 days after swelling of parotid glands ☎ 	<p>Health Care Professional Note: (510) 629-6358 ☎ Contact AHS/EHS Health Services Manager</p>
<p>20. Vomiting</p> <p>Exclude for Vomiting 2 or more times during the previous 24 hours, unless Child Health Care Provider determines that the vomiting is caused by a non-communicable condition and the child is not in danger of dehydration.</p> <p>No exclusion is required for a brief, non-repeating episode of vomiting with no other signs of illness.</p>	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p>
<p>25</p>	

Teachers will conduct daily health checks and children determined to be ill will be sent home.

Symptom	Documentation or Criteria To Return
<p>21. Exclude children with <u>other manifestations of possible illness</u> or symptoms which may include (not limited to):</p> <ul style="list-style-type: none"> a. Unusual Lethargy (an unusual tiredness or lack of energy) b. Unusually severe irritability, especially in younger students c. Persistent crying d. Rapidly spreading rash f. Weeping or draining sores that cannot be covered g. Severe vomiting and diarrhea or vomiting blood h. When a student poses a risk of spreading a harmful disease to others in the school setting. 	<p>Children will be eligible to return to center base program 24 hours after these symptoms have resolved, or after a healthcare provider have cleared the child with signs of illness for re-admission.</p>
<p>22. Exclude for conditions or illnesses that public health department or a health care provider indicates warrant exclusion. This includes children determined to be contributing to the transmission of illness in the AHS/EHS Center.</p>	

Alameda Family Services Programs

2325 Clement Avenue, Alameda, Ca 94501

510-629-6300 Fax 510-865-1930

www.alamedAFS.org

Alameda Family Services is a human service organization active in Alameda and the East Bay, whose programs improve the emotional, psychological and physical health of children, youth and families. Alameda Family Services serves Alameda and the East Bay by providing a wide range of intervention services for youth and families in crisis or at risk. Our programs include:



HEAD START AND EARLY HEAD START (HS/EHS) 629-6350: A comprehensive child development program serving income eligible families, at no cost, with children who are from birth to 5. Head Start offers a holistic approach for each child, including services and support to families of children enrolled in the program. The center-based preschool program offers an enriching classroom environment; the home-based option offers in-home support and education. Parent participation is encouraged. Serving the City of Alameda.

SCHOOL LINKED HEALTH CENTERS (SHC) (337-7006/Alameda High and 748-4085/ Encinal High and Island High/748-4024 x137) Open to all students at Alameda, Encinal, Island, Community Learning Center and Base High schools in Alameda. Services include a medical clinic, counseling, health education, drug and alcohol prevention, tobacco cessation, crisis intervention and youth leadership opportunities.



HOMELESS YOUTH SERVICES (HYS) 1-800-379-1114: HYS provides an emergency shelter and youth support center for runaway and homeless adolescents in Alameda County. The shelter offers a safe place to sleep, receive meals, clothing. The service center offers counseling, case management, medical screening and treatment, academic and job support and street based outreach.



BEHAVIORAL CLINICAL HEALTH SERVICES (CSL) 629-6210, for Intake. Professional therapists provide sliding scale counseling to individuals, couples, groups, and families; short term adolescent/family counseling at the School-Based Health Centers; crisis intervention, parenting education classes to Alameda residents with youth aged 10-18 as part of the Alameda County Delinquency Prevention Network; child-parent psychotherapy for ages 0-5; counseling and assessment at Alameda Point Collaborative; counseling services for elementary school students in a special needs class are offered through the **Counseling Enriched Classroom**. **MEDI-CAL ACCEPTED**



DRUG & ALCOHOL TREATMENT (DAT) 629-6209, for Intake.

DAT offers alcohol and drug assessment, intervention and outpatient treatment for youth (12-18) and adults. Court-ordered drug diversion programs are also offered for clients referred by Youth Court, Probation, PC1000. Anger Management groups for Youth and Adults and a 52-week Domestic Violence Treatment (men only) is also provided. Serving Alameda County.



CLINICAL TRAINING PROGRAM (CTP) 629-6300: Alameda Family Services is a placement for graduate students & therapists collecting hours towards their degrees or licensure. Training focuses on supporting multi-stressed families in context.

