Early Head Start

Free Services for Pregnant Women and Children from Birth to age Three

Home Based Option
Center Based Option
Family Child Care Option

Parent Handbook
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Clinton Township, MI 48036
Phone: (586) 469-5215
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Welcome and Mission Statement

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Welcome to the Early Head Start Program!

EARLY HEAD START MISSION STATEMENT

To build a foundation of educational values through community partnerships to promote healthy, resilient and confident parents, children, and families to help break the cycle of poverty.

Early Head Start Philosophy

Macomb Community Action Early Head Start values parents as the primary teachers of their children.

We believe children learn best in a consistent, safe and nurturing environment fostered by collaboration between families and school.

We believe each child is unique and respect his/her need for individualization through active learning. We meet each child where he/she is and build on strengths in order to promote growth in all areas of development. Our program also promotes children’s health, emotional wellness, and respect for cultural diversity.

Values

- Play as the work of children
- Learning at one’s own pace
- Teacher and child-directed activities in balance
- Exploration through hands-on activities
- Respect for diverse families & cultures
- Health education for optimal health and well-being
- Family and community partnerships
- Personal development of all staff and families
- Family-centered practices

Services offered by EHS:

- Supportive Home Visits
- Care and Education for Children
- Child Development Screenings
- Group Support for Parents
- Workshops for Parents
- Parent-Child Play Groups

Our goal is to promote and support the groundwork of each family, parent, and child to bring about opportunities where every child grows up happy, healthy, safe and secure, with the skills to attain his/her fullest potential. We also advocate for healthy prenatal growth and development, enhance positive parent-child interactions and relationships, encourage learning success, and support healthy family goals.
PROGRAM OPTIONS & POLICIES

Home-Based Option

The Home-Based Program is supportive and educational for both the children and adults in a family.

- Families enrolled in the home-based program receive a 90 minute, weekly, relationship-based home visit with a highly trained home visitor.
- These visits provide pregnant women and families the opportunity to engage in educational activities that foster infant and toddler development, as well as provide information on a range of topics including: child growth and development; positive parenting skills, nurturing relationships, pregnancy health and nutrition, dental health, mental health, pre/post natal care, parent educational/career advancement, financial management and self-sufficiency.
- Adults gain support and knowledge that helps them be the most nurturing and effective teachers of their young children and better understand what to expect at each developmental level of their rapidly growing infants and toddlers.
- Home-based families participate in two group socialization experiences per month. Socialization activities are held with other home-base families in a classroom, or a community facility. EHS socializations afford parents a wonderful opportunity to learn about child development, relax and play with their children in a safe stimulating environment. EHS also gives children the opportunity to interact with other children as they learn to participate in a group setting.
- Home-based services are offered through Early Head Start’s community partner, Judson Center.

Pregnant Women

EHS provides relationship-based home visits to support:
- Prenatal health & development
- Labor and delivery
- Post-partum recovery
- Breast feeding benefits
- Risks from smoking and alcohol
- Access to health insurance
- Comprehensive prenatal and postpartum health care
- Preventive dental services
- Maternal mental health
- Two week infant visit from health staff
- Substance abuse prevention and treatment

EHS provides parents with the opportunity to learn:
- Preventative medical and dental health
- Infant care
- Prevention of Sudden Infant Death Syndrome
- Prenatal development, and the transition to parenthood
- The addition of a sibling to an existing family
Center-Based Option

The Center-Based Program is for families who are employed and/or in school for 30 hours or more each week.

- Children 6 weeks to 3 years of age may attend high quality early childhood classrooms up to five days a week. (Full day/ Full year)
- EHS provides every child with a primary caregiver/teacher. EHS teachers offer primary caregiving to a maximum of 4 children.
- EHS classrooms have a maximum of 8 children per room.
- EHS teachers and staff provide two home visits and two parent-teacher conferences throughout the year.
- EHS classrooms may close periodically throughout the year for staff professional development. Families will be notified in advance of the closing dates.
- Center-based services are offered through Early Head Start’s community partners: Morning Star Early Learning Center (Mt. Clemens), Kennedy Early Learning Center (Warren), Mini Kampus (St. Clair Shores), The Giving Tree (Warren), Jelly Moon Early Learning Center (Clinton Township), and Close to Home Early Learning Center (Clinton Township).
- The program implements the Creative Curriculum for Infants, Toddlers, and Twos which promotes a daily routine of experiences for all children to individually grow in all areas of development, including physical, social/emotional, cognitive, language & pre-literacy, and self-help skills.
- Family members are encouraged to participate in the planning process, to volunteer in the classroom, and to communicate with EHS staff regarding their children’s health and development.

Family Child Care Option

The Family Child Care Program is for families who are employed and/or in school for 30 hours or more each week.

- Children birth to 3 years of age may attend high quality early childhood classrooms located within private homes up to five days a week. (Full day/ Full year)
- EHS provides every child with a primary caregiver/teacher. EHS teachers offer primary caregiving to a maximum of 4 children.
- EHS classrooms have a maximum of 6 children per home.
- EHS teachers and staff provide two home visits and two parent-teacher conferences throughout the year.
- EHS classrooms may close periodically throughout the year for staff professional development. Families will be notified in advance of the closing dates.
- EHS family child care services are offered through Early Head Start’s community partners and are located in 7 licensed homes in Sterling Heights, Warren, St. Clair Shores and Eastpointe.
- The program implements the Creative Curriculum for Infants, Toddlers, and Twos which promotes a daily routine of experiences for all children to individually grow in all areas of development, including physical, social/emotional, cognitive, language & pre-literacy, and self-help skills.
School Readiness Goals:

Each year our Head Start program sets goals to help prepare children for future success in school. Our goals are that all children will demonstrate growth in the areas of social-emotional, cognitive, physical, and language & literacy development. To meet these goals, our teachers work on specific objectives with the children according to each child’s age and developmental level.

Our guiding objectives this year are:
- Infants will form secure relationships with adults; show curiosity in exploring objects; recognize familiar people, places, and objects; attend to quantity such as reaching or looking for more than one object; engage in simple back and forth exchanges; listen and attend to familiar words or signs in rhymes and songs.
- Toddlers will develop a sense of belonging through relationships; use objects in new and/or unanticipated ways; recall familiar people, places, or objects; use a few basic words to refer to change in quantity; initiate and attend to brief conversations; say or repeat familiar words, rhymes, phrases, or refrains from songs or stories; and use fingers or whole arm movements to manipulate and explore objects.

Application and Enrollment:
The Early Head Start Program is open to all Macomb County families who qualify regardless of race, creed, ethnic or cultural background, lifestyle, disabling condition, gender, family structure or religion.

Children and families are enrolled in accordance with program-selection criteria which is adopted each year by the Policy Council.

Parents may apply anytime. Openings occur occasionally throughout the year and parents are notified when space is available. Families who wish to enroll are put on a waiting list until an opening occurs or the family is no longer eligible.

NO FEES ARE CHARGED FOR THE EARLY HEAD START PROGRAM.

Admission and Withdrawal Policies:
Pregnant women, children 0-3 and their families may enroll in Early Head Start if at least one of the following criteria is met:
- Family meets federal low-income guidelines
- Child is in foster care OR is a ward of the State of Michigan
- Family receives public assistance, i.e. TANF, SSI, FIP, etc.

Absences:
Regular attendance at school, home visits and socializations are important for your child and a requirement for our programming. As a federal program, we are required to record a reason every time your child is absent or a home visit is missed. If it is necessary for your child to be absent or for you to miss a home visit, please notify the teacher or home visitor as soon as possible to explain the reason.

We are required to document classroom absences in order to comply with regulations, so if we do not hear from you, you will receive a phone call, a note or a home visit asking about your child’s absences. Your child’s absence will be excused because of illness or family emergency.

Being a parent and a student is a very difficult job. Predictability and consistency are crucial for very young children to grow and develop to their fullest potential. Practicing this in your life is one way you show your child how much you love and care for them. Your child’s and your attendance
and participation at home visits, group socialization experiences, enrichment programs, and in the classroom help your family fully benefit from the services, programs and opportunities offered through EHS.

If your child is regularly absent from home visits or class, it may eventually cause your child to be returned to the waitlist for a more suitable placement in the program. Each case will be reviewed individually with the parents.

Our hope is that each participating family will remain in the program until the child turns 3 years old. However, we know that circumstances sometimes make it necessary for a family to leave early. If this happens with your family, please contact your home visitor, teacher, or our office and let them know when your child will no longer be participating.

Classroom Safety Policies

Child Information Sheets:
The Child Information Sheets are for the protection of your child. These sheets contain valuable information such as:

- How parent(s) or guardian(s) can be reached.
- Names and contact information of people you have authorized to pick up your child.
- The parent signature giving EHS permission to secure emergency medical and/or emergency surgical treatment for your child.

It is the parent's/guardian's responsibility to make sure the information is up-to-date and correct. Only the parent(s) or guardian(s) who has/have signed the child information sheets can make changes to them, and must do it in person. We will not release your child to anyone you have not listed on the Child Information Sheet.

Release of a Child:
A parent, guardian, or foster parent may pick up his/her child from the classroom unless one of the following conditions exists:

- A court order or a divorce decree denies the parent or legal guardian access to the child and a copy of the document is in the main office and classroom file.
- There is a valid reason to suspect the child may be in an unsafe situation. The staff member will exhaust all avenues of safety before the child is released.
  - The staff member will ask the parent/guardian if he/she would like us to call someone on the Child Information Sheet to care for the child.
  - The staff member will offer to keep the child until another caregiver can be located. If the parent/guardian insists on taking the child, staff will release the child and call 911 immediately.

Volunteer Screening:

- After a person/parent volunteers in the classroom frequently (4 hours or more), and intends to continue volunteering, he/she will be required to complete the DHS Clearance and Criminal Background Check, complete and sign the Volunteer Participant Agreement, and complete the Child Abuse Questionnaire and all other documentation EHS policy requires.
- Only those volunteers who have been determined to be appropriate for the classroom will be allowed to work with the children.
- Any person who is eliminated by this policy may request to have his/her situation reviewed.
Staff Screening:
Early Head Start employees must comply with all State of Michigan, Department of Health & Human Services, and Office of Children and Adult Licensing regulations.

- All EHS staff has completed a State Police Criminal History Search and a Child Abuse/Neglect Central Registry clearance.
- Head Start is a drug and alcohol free work place.

Emergency Procedures

Fire Drills
1. Fire drills are conducted once a month, unannounced, at various times during the day, using different exits.
2. Documentation is recorded on the Fire/Tornado Drill Log, located on the emergency board.

Tornado Drills
1. Two tornado drills are conducted during the year, one in the fall and one in the spring, at various daily times.
2. Documentation is recorded on the Fire/Tornado Drill Log, located on the emergency board.

Lock Down Drills
1. Three Lock Down drills are conducted during the year, one in the fall and one in the winter, and one in the spring at various daily times.
2. Documentation is recorded on the Drill Log, located on the emergency board.

Evacuation Plan and Safety Plan for Emergencies:
1. The Evacuation Plan, posted in the classroom, includes a diagram of the building that depicts the approved means of exit from the children’s use areas, (including accounting for all children), and the “safe” ground outside the building, location of nearest fire alarm and fire extinguisher and location of emergency supplies.
2. Different colors are used to denote fire and tornado evacuation routes.
3. The Emergency Evacuation Form is posted near the Evacuation Plan and a copy is kept at the office.
4. Teachers identify those children who are too young or otherwise unable to evacuate themselves, and they complete the Emergency Evacuation Form assigning any “at risk” children to specific adults.

Notifying Parents in an Event of an Emergency:
1. In case of a child being involved in an emergency situation, the teacher will contact by phone a parent or a designee listed on the Child Emergency Sheet.
2. A copy of the Accident/Incident/Illness/Injury Form for accident and illness emergencies is given to the parent and/or designee upon face to face contact.
3. In case of a lost or missing child the following procedure will be followed:
   --911 called
   --Parent notified
   --Building Administration notified
   --A copy of the missing/lost child forum is given to the parent and/or designee upon face to face contact.
Weather

**Rainy Days:**
Teachers will plan indoor activities on rainy days. When the weather is only damp or misty, children usually go outside at least for a short time.

**Wind-chill Days:**
For toddlers, if the wind-chill factor is below 20 degrees, children will remain indoors. On most snowy days however, children go outside for a short time. Children should come to school appropriately dressed so they can enjoy play-yard activities.

**School/Program Closing:**
EHS classrooms will remain open as long as the center that the classroom is housed in is open.

**Severe Weather or Tornado Conditions:**
During severe weather or a tornado warning, EHS will not close early. Children will be kept on site until the regularly scheduled pick-up time, or until it is safe to travel.
If a Tornado Warning is issued, please keep your child at home/stay home until the warning has been lifted. If a warning is issued while your child is at school, **DO NOT COME** to pick up your child until the warning is over. All facilities have designated tornado shelters and children and families will stay there during the warning.
In the event of a non-weather related closing, every effort will be made to contact parents or guardians. If parents/guardians are not available to receive the child, someone listed on the emergency card will be contacted.

Respect for Privacy

**Photographs and Video:**
Group and individual pictures or videos may be taken for projects and children’s portfolios. If you object to having your child’s picture or video taken, individually or as a part of a group, please notify your child’s teacher or home visitor. If a picture or video is going to be used for any reason other than in the classroom, you will be given the opportunity to sign a release form. Photo and video releases are signed during enrollment.

**Observations and Video:**
Macomb Community Action Early Head Start conducts periodic on-site observations or video observations for educational purposes, developmental screenings and assessments of children, and for staff monitoring.
Some examples of the Observation, Assessment and Screening tools used are:
- Creative Curriculum for Infants, Toddlers, and Twos
- Partners for a Healthy Baby Home Visiting Curriculum
- ASQ-SE 2
- Brigance Assessment

**Transfer of Records:**
Unless otherwise authorized by law, any individual or agency requesting information other than parents/legal guardians, staff members, or authorized representatives must have a consent signed by the parent or a written order from a court jurisdiction.
Confidentiality:
All information you provide to Early Head Start is confidential. It will not be released to any person or agency without permission from you. Information will be shared within the program only. The Parent Agreement that you sign has a basic Release of Information on it. When information needs to be shared with doctors, school districts or other agencies, you will be requested to sign a Release of Information Form.

THE EARLY HEAD START PROGRAM

Attendance:
For your child to achieve the most from his/her school experience, it is important to maintain a consistent and predictable schedule of attendance. EHS monitors attendance very closely and you will be contacted if your child is not attending on a regular basis. This will allow your child to receive the most benefit from the planned educational opportunities each day. If your child is going to be absent, please call your classroom by 8:00 a.m. to report the absence. This is very important for planning purposes for the teachers as well as obtaining an accurate attendance record.

Visiting the Classroom:
We believe that parents are the primary educators of their children. It is critical that parents take an active role in their child’s education.

Parents are encouraged to visit the classroom to observe and discuss their child’s development and give input on the goals and objectives for their child and the classroom curriculum. You will be able to assist in a daily program that provides activities and experiences for your child in all developmental areas.

We respect all of our children and families. We request that you also respect the confidentiality of other EHS children and their families. Please refrain from sharing information to others, inside or outside the program, about EHS children and families. You are welcome to discuss any concerns or questions you may have with the teacher or any EHS staff.

If a court order or divorce decree denies access to the child, it is the custodial parent’s responsibility to provide Early Head Start with a copy of the legal documentation denying access to the child.

Outside Food Policy:
We cannot allow food or treats to be brought into our classrooms. Due to increasing numbers of nut/peanut allergies, all Head Start and Early Head Start classrooms are NUT-FREE and CHOCOLATE-FREE. We exclude chocolate products because chocolate is often processed with other items that contain nuts. Foods containing nuts and/or chocolate cannot be brought into the classroom, nor served to anyone in the Head Start or Early Head Start classroom.

Please talk to your child’s teacher about alternatives to sending in food treats.

Daily Communication:
Teachers complete a daily information sheet on each child. This log will provide parents with information about the experiences your child has throughout the day. It is also a means for parents to inform the teachers about anything that would be helpful in caring for your child during his/her time in the classroom. There is a special space for parents to make notes about injuries, changes in the family that the child is expecting, changes in behavior, special events that occurred that the child might be speaking about during the day, how the child slept the night before, and any other
individual needs you would like to communicate with EHS staff so we can provide individual, responsive care to your child.

**Tooth Brushing:**
EHS values children’s oral health and dental care. Tooth brushing is part of each infant and child’s daily routine in the classroom. Children brush their teeth at least once a day either after a snack or a meal. Each infant and child has his/her swab or child size toothbrush. Each classroom is equipped with a toothbrush sanitizer that sanitizes the toothbrushes after every use.

**Diapering & Toileting:**
EHS provides disposable diapers and wipes for all children while in our care. If a child’s health condition necessitates that disposable diapers or wipes cannot be used, alternative arrangements will be made according to a licensed physician’s instructions. All diapering is done in a designated diapering area. EHS maintains all supplies and equipment in this area in a safe and sanitary manner. All caregivers thoroughly wash their hands before and after each diapering and after cleaning up bodily fluids, using soap and running water. Toilet learning shall be planned cooperatively between the child’s primary caregiver and the parent so that the toilet routine established is consistent between the center and the child’s home.

**Outdoor Play:**
Fresh air is essential for healthy development. Providing children time to play outdoors as often as possible is important. Classroom staff will use Michigan Child Care Licensing guidelines when considering weather conditions and taking children outside to play. Please remember to send your child in clothing appropriate for playing outside. If your child is too sick to play outside, he/she is too sick to come to school.

**Family Traditions and Classroom Celebrations:**
EHS is comprised of a diverse population. We are very fortunate to have children and families in our program who represent many cultures, ethnic groups and religious preferences. We encourage families to teach their children, and to share with the classroom, about their heritage and to celebrate the holidays that are special in their homes.
EARLY CHILDHOOD EDUCATION

Early Relationships
Research tells us that healthy development and early learning for infants and toddlers unfolds within the context of relationships with parents and caregivers. Young children learn by being connected to adults who nurture their curiosity and help give meaning to their experiences. Children need at least one adult in their lives who is focused and caring, and who they can connect and bond with in a secure, warm and trusting relationship. This relationship builds resilience in children. EHS recognizes that attachment is the essence of all work in early childhood. Therefore, we promote this critical foundation of strong relationships through three focused practices:

1. Continuity of Care
   - Supports the development of secure attachments with caregivers
   - Promotes staff’s understanding of families’ individual cultural values through established long-term relationships
   - Nurtures connections between children, as they remain in the same group over time (pro-social skills)

2. Individualization
   - Recognize each child’s unique “zone of proximal development”
   - Allows for effective inclusion of children with special needs
   - Honors the belief that all children learn and develop at their own pace

3. Primary Care
   - Encourages the formation of secure attachments between infants, toddlers, families and consistent caregivers/home visitors
   - Encourages the formation of healthy peer relationships as children can build connections that are sustained over time
   - Family needs, values, beliefs, culture and language(s) can come to be better understood and reflected in the program

Early Head Start believes in early identification and intervention when a concern arises. We complete screenings, assessments and observations for all Early Head Start children.

Helping Infants and Toddlers to Understand Limits and Boundaries
Learning about limits and boundaries is a part of the daily routine in EHS. Children develop awareness of others and responsibility for their actions over time. Utilizing positive, gentle guidance techniques and modeling, EHS staff help children begin to feel empathy for others and gain self-control. To meet a variety of developmental needs, staff relies on room arrangement, balanced and stimulating programming, and easy access to a variety of materials and equipment, and age appropriate adult intervention to support children in being successful in a group setting.
Staff strives to:

- Keep children safe in their surroundings
- Keep children safe in their interactions with others
- Help children learn limits and boundaries within their world.

Children are encouraged to make appropriate personal choices, which is the beginning of their sense of personal responsibility.
Positive Guidance
Discipline is not punishment. Early Head Start staff uses positive methods of discipline, or limit setting, which encourages self-control, self-direction, self-esteem and cooperation.

To do this, the following guidelines are utilized:
- We create environments that are safe and appropriate to explore
- We set consistent limits that are age-appropriate
- We redirect inappropriate play and interactions
- We tell children what TO do rather than what NOT to do
- We give children choices whenever possible
- We set rules for safety and health reasons only
- We strive to be fair in all situations
- We help facilitate and encourage children to resolve conflicts for themselves
- We step in and take control of any situation where other children or adults are being hurt, when children are hurting themselves, or when property is being destroyed

Physical punishment is never used as a form of discipline in our program.

Transitions
Six months prior to the child’s 3rd birthday, the staff begins planning with the family for the child’s transition into appropriate preschool or childcare programming and the family’s transition to other supportive services in the community. This is a process that involves the family, home visitor, teacher and any other community resource supporting the family.

FOOD & NUTRITION
For center-based children (less than 12 months), formula and baby food is provided by EHS. Formula and baby food is provided for home based children during the group socialization activities.

For center-based children 12 months and over, EHS serves food of sufficient quantity and quality for young children. The free meals served are based on the minimum requirements of Head Start and the Child and Adult Care Food Program (CACFP).

- Each child will receive a nutritious breakfast, lunch and snack.
- Children are encouraged to try new foods, serve themselves, and clean their own area after meals.
- Every effort is made to provide for children who have prescriptive food needs.
- Staff and volunteers eat with the children.
- The food served will provide at least 1/3 of the minimum daily requirements.
- Hot foods are kept hot (140 degrees or above) and cold foods kept cold (40 degrees or below) before serving.
- Adults wash hands thoroughly and use gloves when handling food.
- Bleach water is made fresh daily for sanitizing tables and surfaces. The spray bottles are prepared using 1/4 teaspoon bleach to 12 ounces of water.
- Staff clean and sanitize the refrigerator at least once a week.
**Food Allergies:**
According to CACFP regulations, unless a doctor’s statement is on file regarding food allergies, no item may be withheld or listed as an allergy for a child. Food issues should be noted on the Head Start Health History Form and communicated to the teacher. The child’s physician should confirm diagnosed food allergies on the Physical Exam Form. Food service issues must be communicated to and coordinated with the parent, classroom staff, Health/Nutrition services and the food service provider.

**ALL EARLY HEAD START CLASSROOMS ARE NUT and CHOCOLATE FREE!**

Children whose doctor has documented a specific food allergy will have food substitutions made as noted by the doctor. Allergies are documented on the child’s file and in a location that alerts staff as they prepare to serve snacks or meals.

**Infant/Child and Adult Care Food Program:**

EHS center-based program is a participant in the Child and Adult Care Food Program (CACFP), a United States Department of Agriculture (USDA) program. The CACFP provides cash reimbursement to child care centers for nutritious meals and helps children develop healthy eating habits. The CACFP is administered by the Michigan Department of Education.

Through the Child and Adult Care Food Program you can be assured that your child is getting balanced, nutritious meals and developing healthy lifelong eating habits. Proper nutrition during the early years ensures fewer physical and educational problems later in life. Meals and snacks must meet the USDA meal pattern requirements listed below.

**BREAKFAST**  
- Milk  
- Fruit or Vegetable or Juice  
- Grain/Bread

**LUNCH and SUPPER**  
(Serve 2 from the 4 food groups below)  
- Milk  
- 2 Fruit/Vegetable servings  
- Grain/Bread  
- Meat or Meat Alternate

**SNACK**  
- Milk  
- Fruit or Vegetable or Juice  
- Grain/Bread  
- Meat or Meat Alternate

**Children less than 12 months:** The infant meal pattern varies according to the infant’s age. If your child is less than one-year old, please request the infant meal pattern requirements from your caregiver.

If you have any questions about the Child and Adult Care Food Program, please contact your EHS staff.

**Breastfeeding:**
Early Head Start supports mothers who choose to breast feed by:
- Designating a quiet, comfortable, and private place where mother may nurse their infants;  
- Providing mother with necessary fluids and nutritious snacks;  
- Conveying a positive attitude toward breast feeding through orientation, educational programs, and culturally appropriate materials for mothers;
• Properly storing and handling breast milk and infant formula to prevent spoilage, to minimize bacterial growth, and to ensure that each infant receives his or her own mother’s milk or correct brand of formula.
• Staff and parents work together to ensure that all containers of breast milk and formula are dated, clearly labeled with the child’s name, and used only for the intended child
• Unused breast milk and formula will be given to parents to take home or are discarded
• Bottles and breast milk will never be warmed in the microwave, only in a bottle warmer or in a container of warm water.

If you have any questions about the Child and Adult Care Food Program, please contact:

Macomb Community Action—Head Start 0-5
21885 Dunham Road, Suite 10
Clinton Township, MI 48036
(586) 469-5215

Or

Child and Adult Care Food Program
Michigan Department of Education
P.O. Box 30008
Lansing, MI 48909
(517) 373-7391

HEALTH SERVICES

EHS provides individualized health services for all children:
• Infant/toddler preventative measures and dental treatment
• Swabbing gums
• Use of pacifier
• Prevention of early childhood cavities (baby bottle tooth decay).
• Tooth brush protocols (age appropriate).

EHS responds to children’s health needs:
• Health and Developmental screenings according to the EPSDT regulations
• Ongoing observations
• Medical and dental evaluations and treatments according to the EPSDT regulations
• Insights from parents

EHS has collaborative relationships with health care providers:
• Pediatricians
• Dentists
• Obstetricians
• Early on
• Programs for teenage mothers
• Programs for homeless mothers
Health Requirements

Immunizations:
At the time of initial attendance, one of the following shall be obtained and kept on file and accessible in the center:
1. A certificate of immunization showing a minimum of 1 dose of each immunizing agent specified by the Department of Community Health.
2. A copy of a waiver addressed to the Department of Community Health and signed by the parent stating immunizations are not administered due to religious, medical or other reasons.

<table>
<thead>
<tr>
<th>Vaccine**+↓</th>
<th>Age →</th>
<th>Birth through 1 month</th>
<th>2 months through 3 months</th>
<th>4 months through 5 months</th>
<th>6 months through 14 months</th>
<th>15 months through 23 months</th>
<th>24 months through 4 years</th>
<th>5 years</th>
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<tbody>
<tr>
<td>Diphtheria, Tetanus, Pertussis</td>
<td>None</td>
<td>1 dose DTaP</td>
<td>2 doses DTaP</td>
<td>3 doses DTaP</td>
<td>4 doses DTaP</td>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pneumococcal Conjugate (Required After January 1, 2007)</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td>4 doses OR age appropriate complete series</td>
<td>1 dose on or after 24 mo OR age appropriate complete series</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>H. influenzae type b (Hib)</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>1 dose on or after 15 mo OR age appropriate complete series</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Polio</td>
<td>None</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles, Mumps, Rubella</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 dose on or after 12 mo.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>None†</td>
<td>1 dose</td>
<td>2 doses</td>
<td>3 doses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varicella</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>1 dose on or after 12 mo. OR current lab immunity OR reliable history of disease</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Current laboratory evidence is acceptable instead of immunization with that antigen. ↑ Hib requirements is suspended for the 2008-2009 reporting year. † Hepatitis B may be administered as early as birth. This table represents the minimum required immunizations for childcare centers. For more information, please refer to www.michigan.gov/imunization **All doses of vaccines must be given with appropriate spacing between doses and at appropriate ages to be considered valid.

When the child has been in attendance for 4 months, an updated certificate showing completion of all additional immunization requirements as specified by the Department of Community Health shall be on file unless there is a signed statement by a licensed physician or his or her designee stating immunizations are in progress.

Physical Exam:
Before the child starts in the classroom, there must be a current physical on file. One of the following shall be obtained and kept on file and accessible:
1. For infants and young toddlers: A physical evaluation performed within the preceding 3 months, signed by a licensed physician or his or her designee. Restrictions shall be noted.
2. For older toddlers and pre-school age: A physical evaluation performed within the preceding year signed by a licensed physician or his or her designee. Any restrictions shall be noted.
**Dental Exam:**
Dental Examination – Performed by a physician or dental professional within with in the EPSDT requirements. Follow-up treatment is to be completed in a timely manner. (Required by Head Start)

**Illness Prevention:**
Many *communicable diseases* can be prevented through appropriate hygiene and sanitation practices. Illness may be spread by way of:
- Human waste, such as urine and feces
- Body fluids, such as saliva, nasal discharge, eye discharge, open skin sores, and blood
- Direct skin-to-skin contact
- Touching a contaminated object
- The air, in droplets that result from sneezes and coughs

**Hand Washing Procedure:**
Hand washing is the single most important way to control and prevent the spread of germs. Staff will apply and teach your child the following hand washing technique:
- Have a clean single service towel available
- Turn on the water to a comfortable temperature
- Moisten hands with water and apply soap
- Rub hands together vigorously until a soapy lather appears and continue for at least 20 seconds.
- Rub areas between fingers, around nail beds, under fingernails, jewelry, and back of hands.
- Rinse hands under running water until they are free of soap and dirt. Leave the water running while drying hands.
- Dry hands with a clean, disposable paper or single-use cloth towel. If taps do not shut off automatically, turn taps off with the disposable paper or single-use towel.
- Dispose of the single service towel in a lined trash container.

**Cleaning and Disinfecting:**
Disinfection kills almost all bacteria, fungi, viruses and parasites. It reduces the number of microorganisms, making equipment and surfaces safer for use. All staff follows a cleaning and disinfecting schedule. The following are the steps used in the cleaning and disinfecting process:
- Wash the surface or article vigorously with warm water and detergent.
- Rinse the surface with clean water.
- Submerge, wipe or spray the surface or the article with a sanitizing solution.
- Let the article or surface air dry.

**Controlling infection using universal precautions:**
Because symptoms of all illnesses are not always immediately visible, we must treat all blood, body fluids, and secretions as potentially infectious. Spills of urine, stool, vomit, blood, saliva, human milk, nasal discharge, eye discharge, and injury or tissue discharge (e.g., from a cut or sore) should always be treated as “potentially” infectious. Gloves and other protections are always used in this case.
**Child Illness:**
If your child is sick (fever, vomiting, diarrhea), please call your child’s teacher or home visitor with advance notice to cancel. If your child is sick (fever, vomiting, diarrhea), do not send him/her to school. If your child becomes sick during school, you will be called to pick him/her up. If you cannot be reached, we will use the Child Information Sheet to contact an alternate person. No child is denied admission nor excluded for a long-term period based solely on health-care needs or medication requirements. To insure that the health and safety of a child is not at risk, and to assure that the health and safety of those who may come into contact with said children, the following procedures are practiced:

- **RASH OF UNDETERMINED ORIGIN:**
  Children may return when rash is no longer present or with a note from a doctor which states that the rash is not communicable.

- **VOMITING, DIARRHEA, FEVER, ETC.:**
  - Fever – A child has a temperature of 100 degrees F taken by mouth or 99 degrees F taken under the arm. The child should not return until 24 hours of no fever, without using fever reducing medications.
  - Diarrhea – If a child has two loose or watery stools, even if there are no signs of illness. The child should have no loose or watery stools for 24 hours prior to returning to care.
    Exception: This may occasionally be caused by new foods a child has eaten, but teachers will call the parent to find out if this is the likely cause.
  - Vomiting – If the child is vomiting. Exception: Some babies may burp/spit up following a feeding – this is not vomiting.

- **COMMUNICABLE DISEASES:**
  Refer to Macomb County Health Department’s Communicable Disease Reference Chart, located in the classroom, for information about specific diseases and treatment. Notification will be sent to parents on the day of occurrence listing the name of the disease to which their child may be exposed, and the symptoms of the disease.

**Staff Responsibilities:**
- If your child comes to school with any of these symptoms, or develops them during the school day, you will be called to come and pick up your child.
- If we can’t reach you, we will call a person listed on the emergency card to pick up your child.
- If the staff cannot reach a parent or person listed on the emergency card, the child may be isolated and made as comfortable as possible until the end of the session.
- Classroom staff will complete the Illness form detailing the child’s symptoms, and the action that needs to be taken before the child returns.
- Typically the child may return to school after being free from symptoms for 24 hours or with written permission from a physician.
Parent Responsibilities:
- Keep your children well fed, well rested, and learn the signs of common illnesses.
- Inform the classroom teacher or home visitor when your child is ill, has a contagious illness, or is taking medication.
- Provide up-to-date emergency information to the classroom.
- Promptly pick up an ill child or provide a back-up plan if you cannot be reached.
- Consult with the child’s doctor about diagnosis and care.

Head Lice:
Children may be periodically checked for head lice and/or nits dependent upon presence of signs and symptoms of lice.
1. Observe for signs and symptoms of head lice.
   - Itching and scratching behind the ears, nape of neck and scalp.
   - Presence of live lice (crawling) on scalp, body or clothing.
   - Nits (lice eggs) on hair shafts with ¼ “of the scalp.
   - Child states feeling something tickling or moving through his/her hair.
2. Children identified with head lice do not need to be removed from a classroom immediately and will not be isolated from other children.
3. Parents of children found to have head lice or nits will be notified. Staff will provide printed information to you regarding treatment.
4. After treatment, the child’s hair will be checked by the center based teacher, while the parent waits. If nits are found by the teacher, the parent must continue to work on removing the nits. For home based, the home visitor will continue to support the parent with appropriate treatment options.
5. A child’s hair must be nit free to remain in school and to participate in group socializations.

Medication:
1. It is Early Head Start’s policy that NO medication will be given to your child by a home visitor.
2. It is Early Head Start’s policy that NO medication will be given to your child at school unless it is a doctor-prescribed medication, usually for a long-term problem.
3. A health action plan must be developed with Early Head Start staff and paperwork must be completed before any medication is allowed in the classroom. Parents are welcome to come to school to give medications to their child instead.
4. All medication shall be in its original container, stored according to instructions, and clearly labeled for a named child. Prescription medication shall have the pharmacy label indicating the physicians’ name, the child’s name, instructions, the name and strength of the medication, and shall be given according to those instructions.
5. All medication shall be kept out of the reach of children in a locked box, and shall be returned to the child’s parent or destroyed when the parent determines it is no longer needed or it has expired.

Minor Accident/Injury:
1. The classroom staff attends to injuries sustained and refers to First Aid Emergency Guide located on the HEALTH (emergency) posting board in the classroom.
2. Classroom staff complete the Accident/Incident/Illness/Injury Form for children.
3. Staff will contact the parent by phone on the day of the incident.

**Major Injury/Accident:**
The teacher or home visitor shall contact his/her Health Coordinator or Site Supervisor to discuss whether an Action Plan is warranted. In any case, a doctor must provide a ‘return to school’ note which lists any restrictions or precautions. Early Head Start makes every attempt to accommodate a child’s needs to allow return to EHS.

- Classroom staff does not move the child, attends to injuries sustained, and refers to First Aid Emergency Guide located on the health emergency posting board in the classroom.
- Contact the following: 911, parent or designated person, Site Supervisor, Early Head Start Office.
- In the case that a child is transported to the hospital by ambulance, a staff member with the Child Emergency Sheet must accompany the child.
- Classroom staff completes the Accident/Incident/Illness/Injury Form for children.
- Verbal report to Child Day Care Licensing within 24 hours about any incident resulting in emergency medical treatment at a health facility or hospital, or death. A copy of the report shall be kept on file at the center.

**Dental Emergency:**
1. The classroom staff attends to the specific dental needs of the child.
2. EHS staff contacts parent or designee.
3. Classroom staff completes the Accident/Incident/Illness/Injury Form for children.

**Individual Emergency Health Concerns:**
1. Any child with an allergy or medical concern of a severe nature will have all communications/information/action plans/medication sheets placed in a Red folder, kept in the designated file, clearly labeled with the child’s name and “Health Action Plan”.
2. Plans will be communicated with the classroom postings for Food Allergies or Health Action Plans and in the substitute's packet.

**Health Emergency Board Posting/Family Contact Information:**
1. A red Health Emergency board is posted in each classroom which contains: Procedures and plans of action for emergencies and Emergency telephone numbers, including Poison Control.
2. Child Emergency sheets are readily accessible in the classroom.

**FAMILY AND SUPPORT SERVICES**

Early Head Start is committed to wellness - supporting a complete vision of health for children, families and staff. Support services are available to all program participants. Support services include the EHS Program Coordinator, Mental Health Specialist, Health Coordinator, Dietician, Education Specialist, and advocates.

We know that YOU are responsible for your children.
We know that YOU know your children better than anyone else.
Your child’s success in the EHS program will depend largely on YOU!
WE NEED YOU! With your involvement, you will help make your child’s experience the Early Head Start the best it can be! **Together we are better!**

**In-Kind Donations:**
We are able to offer this program because of the federal funding we receive each year. One of the requirements of receiving these funds is to generate what is called “In-Kind” match in the amount of 20% of the funding. If we do not account for the In-Kind match, we must return dollars to the government, and may receive less money to serve children and families the following year.

Parents can help raise the In-Kind match by volunteering in the program in a variety of ways. When a parent attends a Head Start event, spends time in the classroom, helps the program by doing projects at home, and/or helps on a field trip, a form is filled out and signed by the parent that allows us to count parent’s time as money toward our 20% In-Kind match. We know that parents are helping the program in many ways, and we need to make sure that EHS receives the credit for all of the volunteer work that is preformed. We appreciate your help and your time. **Please help us reach our In-Kind match by filling out and SIGNING the In-Kind sheets every time you volunteer!** Be sure to ask your home visitor or classroom teacher for the forms.

**Parent Involvement:**
Early Head Start encourages parents to participate in, and give input into the development of the program. Opportunities for parent involvement include, but are not limited to:

<table>
<thead>
<tr>
<th>Policy Council</th>
<th>What is it?</th>
<th>When does it take place?</th>
<th>How will I know what to do?</th>
<th>Why should I get involved?</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Policy Council is made up of representative parents from the classrooms, community representatives from outside agencies and former Head Start parents.</td>
<td>The Policy Council meets once a month during the school year.</td>
<td>A thorough training is provided in the fall. Head Start staff are available to offer assistance as needed.</td>
<td>You will have the opportunity to work with other parents and community representatives to provide input on Head Start activities and program planning.</td>
<td>Benefit your family. Learn about community resources. Work through difficult situations.</td>
</tr>
</tbody>
</table>

| Family Partnerships | Through your Family Partnership Agreement, we help you identify needs and interests, and support you in finding your own solutions. | The PPA is developed with your Family - Service -Coordinator (FSC) on an individual basis. | Your FSC will explain and discuss it with you. You will work with your Service Coordinator to obtain resources/referrals to support you in meeting your needs. | Benefit your family. Learn about community resources. Work through difficult situations. |

| Parent / Family Events | • Informational meetings. Examples: • Cultural Awareness • Mommy & Me Event • Father/Male Role Model Event | Events happen at various times throughout the year: days, evenings, weekends, etc. | • Check the Parent Board in the classroom. • Flyers sent home in Thursday folders. • Class calendars/newsletters • Teaching staff | To gain important information & resources To get to know other Head Start families To spend quality time with your child. |

| Classroom Volunteer | • Helping out in different areas of the classroom. • Attend Parent Committee Meeting. Information meeting held monthly in classroom. | During your child’s classroom hours. Volunteers are welcome at any time. You may ride the bus with your child | Ask classroom Teaching Team. Follow daily classroom routine. Attend Parent Committee Meetings. Input is valued. | To support your child in their development. To encourage the importance of education. Support site/classroom. Insight to Policy Council. |
Parent Code of Conduct:
Parents will respect the dignity, worth, and uniqueness of each individual (child, parent, family member, and staff)

- Parents will sign and adhere to the Early Head Start Parent Agreement.
- Parents will refrain from physical/verbal punishment of their child or any other child.
- Parents will follow common safety practices.
- Smoking is not allowed.

Parent Communication:
Sometimes you may have suggestions or questions about the day-to-day operations of the program. You may have a concern or just want to compliment the performance of a staff member, parent committee, or the function of your Policy Council.

Please use the following procedures:

1. **Staff:** If your concern or suggestion involves a staff member, please talk with that person directly. If the concern is not resolved, you may discuss it with the individual's supervisor.

   **Program:** If your concern or suggestion is regarding programmatic procedures or policies, discuss it first at your monthly Parent Committee meeting. If the concern still exists, you may contact the appropriate program supervisor.

Child Custody Conflicts:
Unless otherwise authorized by law, any individual or agency requesting information other than parents/legal guardians, staff members, or legally authorized representatives must have a consent form signed by the parent/legal guardian or a written order from a court of jurisdiction.

Child Abuse or Neglect Reporting:
Program staff are mandated to report all suspected cases of child abuse and/or neglect to the appropriate authority as required by law (Act No. 238, Public Acts of 1975, as amended, Sections 722.621—722.636, Michigan Compiled Laws). It is an act that requires the reporting of child abuse and neglect “to safeguard and enhance the welfare of children and preserve family life” and “to provide for the protection of children who are abused or neglected.”

Emergency Crisis Assistance:
If you find yourself in need of IMMEDIATE assistance (such as food, housing, clothing), contact your Family Service Coordinator, Family Advocate or your child’s teacher. The Early Head Start staff can provide information on where you may be able to obtain help.

Other Services Provided by Macomb Community Action

Macomb County Head Start 0-5 is a division of Macomb Community Action. Macomb Community Action is a Community Action Agency dedicated to diminishing the causes and effects of poverty. All of the agency’s services are designed to help limited-income families and individuals achieve self-sufficiency or self-reliance. You and your family may be eligible to participate in the following services offered by Macomb Community Action.
**Emergency Assistance through Community Action Centers:**
There are three Community Action Centers serving Macomb County. Limited-income county residents are able to receive assistance or referrals for emergency situations including utility payments, housing assistance, and other supports. The centers also provide free tax preparation and registration for other Macomb Community Action programs. For more information, call your Community Action Center.

South Action Center, Warren: (586) 759-9150
(Serves Center Line, Eastpointe, Roseville, Warren)

Central Action Center, Mount Clemens: (586) 469-6964
(Serves Chesterfield Twp. [south of 23 Mile Road], Clinton Twp., Fraser, Harrison Twp., Macomb Twp. [south of 23 Mile Road], Mount Clemens, New Baltimore [south of 23 Mile Road], Shelby Twp. [south of 23 Mile Road], St. Clair Shores, Sterling Heights, Utica)

North Action Center, New Haven: (586) 749-5146
(Serves Armada, Bruce Twp., Chesterfield Twp. [north of 23 Mile Road], Lenox Twp., Memphis, New Baltimore [north of 23 Mile Road], New Haven, Ray, Richmond, Romeo, Shelby Twp. [north of 23 Mile Road], Washington Twp.)

**Adult Day Service:**
Provides daytime assistance for aging adults in need of structured activities, exercise and supervision. For more information, call Macomb Community Action’s Office of Senior Services at (586) 469-5228.

**Home Preservation & Energy (Weatherization):**
Macomb County residents who own or rent their homes may be eligible to receive energy saving measures through this program. For more information, call Macomb Community Action Home Preservation/Energy at (586) 469-6329.

**Individual Development Account (IDA) Program:**
The IDA program helps families save toward their first home. Families enrolled in the program make monthly contributions to a special savings account and those contributions are matched by Macomb Community Action. The combined savings are used for the down payment and closing costs on a home. For more information, call the IDA Case Manager at (586) 469-7378.

**Macomb Food Program:**
Macomb County residents in need of emergency food should call 2-1-1 (or 1-800-552-1183) to receive a referral to a food pantry located in their area. For more information about the program, call the Macomb Community Action Macomb Food Program at (586) 469-6004.

**Resource Advocacy:**
Part of a county-wide team which provides consultation for seniors to assess needs, recommend services and assist with:
- Tax credits
- Medicaid Application Process
- Community resources
- Medicare Part D enrollment
For more information, contact Macomb Community Action’s Office of Senior Services at (586) 469-5228.
**Senior Nutrition Program:**
Macomb County residents age 60 years and older may be able to receive home delivered meals through the Meals on Wheels program or enjoy lunch, informational speakers, and games with their peers through the Dining Senior Style program. For more information, please call Macomb Community Action’s Office of Senior Services at (586) 469-5228.

**Chore Service & Home Injury Control:**
Eligible Macomb County residents age 60 years and over may be able to receive assistance with grass cutting, snow removal and other minor home maintenance needs. Also, senior citizens may be eligible for installation of home safety devices such as bathtub grab bars, bathtub chairs and handrails designed to reduce injuries in the home. For more information, please call Macomb Community Action’s Office of Senior Services at (586) 469-5228.

**Transportation Services:**
Limited-income county residents may be eligible for rides to medical appointments must be made in advance. For more information, please contact Macomb Community Action’s Transportation Program at (586) 469-5225.