# Qualla Boundary Head Start & Early Head Start







# Dora Reed & Big Cove Children's Center

# Family Handbook 2023-2024

#### **INFORMATION**

| My Child's Head Start Center:          |
|--|
|  |
| Telephone #:                           |
|  |
| My Child's Teacher:                    |
|  |
| My Child's Teacher:                    |
|  |
| My Child's Teacher:                    |
|  |
| My Child's Center Director:            |
|  |
| My Child's Bus Driver:                 |
|  |
| My Child's Family Support Coordinator: |

#### **EMERGENCY NUMBERS**

| My Child's Doctor:                      |
|---|
|   |
| Telephone #:                            |
|   |
| My Child's Dentist:                     |
|   |
| Telephone #:                            |
|   |
| Dispatch #: 828.497.4131                |
|   |
| Local Police #:                         |
|   |
| Fire Department #:                      |
|   |
| Poison Control Center #: 1.800.222.1222 |

# \*\*\*PLEASE CALL THE CENTER WHEN YOUR CHILD WILL BE ABSENT. CONSISTENT ATTENDANCE IS VERY IMPORTANT FOR YOUR CHILD'S LEARNING AND SKILL BUILDING. \*\*\*

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# School Calendar 2023-2024

#### July 2023

- 3-5 Closed: Holiday Independence Day
- 20 Last Day of 2022-2023 school year
- 21 Pre-Service Training
- 24-31 Pre-Service Training

#### August 2023

- 1-4 Pre-Service Training
- 2 Open House: 4-6pm
- 7 First Day of School
- 17 Parent Meeting 5:00pm
- 22 Parent/Grandparent Activity 5:00pm
- 24 Closed: Holiday Elder's Day
- 29 Fatherhood Activity 5:00pm
- 31 Parent Training 5:00pm

#### September 2023

- 1 Close Early at 12:45pm: Holiday Labor Day
- 4 Closed: Holiday Labor Day
- 7 Parent Meeting 5:00pm
- 14 Parent Training 5:00pm
- 12 Parent/Grandparent Activity 5:00pm
- 19 Fatherhood Activity 5:00pm
- 29 Closed: In-Service Training

#### October 2023

- 3 Close Early @ 12:45pm: Parade Day
- 4 Closed: Heritage Day
- 10 Parent Meeting 5:00pm
- 17 Parent/Grandparent Activity 5:00pm
- 24 Fatherhood Activity 5:00pm
- 26 Parent Training 5:00pm
- 26 Halloween Trick or Treat Day\*
- 27 Closed: In-Service Training

#### November 2023

- 10 Closed: Holiday Veteran's Day
- 14 Dora Reed Thanksgiving Lunch
- 14 Parent/Grandparent/Fatherhood Activity 5:00pm
- 15 Big Cove Thanksgiving Lunch
- 16 Parent Meeting 5:00pm
- 22 Closed: Holiday Thanksgiving
- 23 Closed: Holiday Thanksgiving Day

| 24 | Closed: Holiday - | - Tsali Day |
|----|-------------------|-------------|
| 20 | Demant Training   | 5.00        |

30 Parent Training – 5:00pm

# December 2023

- 7 Parent/Grandparent/Fatherhood Activity & Parent Training 5:00pm
- 14 Parent Meeting 5:00pm
- 20 Closed: Employee Christmas Breakfast
- 21-22 Closed: Administrative Leave
- 25-27 Closed: Holiday Christmas
- 28-29 Closed: Administrative Leave

# <u>January 2024</u>

- 11 Parent/Grandparent/Fatherhood Activity & Parent Training 5:00pm
- 15 Closed: Holiday Martin Luther King Day
- 18 Parent Meeting 5:00pm
- 26 Closed: In-Service Training

# February 2024

| 8 | Parent/Grandparent/Fatherhood Activity & Parent Training – 5:00pm |
|---|---|
|   |   |

- 15 Parent Meeting 5:00pm
- 19 Closed: Holiday President's Day
- 23 Closed: In-Service Training

# <u>March 202</u>4

- 7 Parent Meeting 5:00pm
- 19 Parent/Grandparent/Fatherhood Activity & Parent Training– 5:00pm
- 28 Closed: In-Service Training
- 29 Closed: Holiday Good Friday

# <mark>April 2024</mark>

- 1 Closed: Holiday Easter Holiday
- 4 Parent Meeting 5:00pm
- 11 Parent Training 5:00pm
- 16 Parent/Grandparent Activity 5:00pm
- TBAQBHS & EHS Spring Break
- 23 Fatherhood Activity 5:00pm

# <u>May 2024</u>

- 9 Parent Meeting 5:00pm
- 14 Parent/Grandparent Activity 5:00pm
- 16Parent Training 5:00pm
- 21 Fatherhood Activity 5:00pm
- 27 Closed: Holiday Memorial Day
- 31 Closed: In-Service Training

# June 2024

| TBA | Parent Training – 5:00pm                       |
|-----|--|
| 20  | Parent/Grandparent/Fatherhood Activity- 5:00pm |
| TBA | Head Start Year End Ceremonies                 |

# <mark>July 2024</mark>

| TBA – possible holiday closure           |
|--|
| Closed: Holiday – Independence Day       |
| TBA – possible holiday closure           |
| Parent Meeting – 5:00pm                  |
| Parent/Grandparent/Fatherhood Activity   |
| Parent Training – 5:00pm                 |
| Last Day of school year                  |
| Pre-Service Training – Mental Health Day |
| Pre-Service Training                     |
|  |

#### August 2024

| TBA | Pre-Service   |
|-----|---|
| TBA | Open House – Dora Reed & Big Cove Children's Center |
| TBA | First Day of 2024-25                                |

Mark your calendar - This list of holidays and center closings will allow you, the parent, to make necessary arrangements as we close for holidays, in-service training, etc. Note: Closings may vary depending on trainings, changes in scheduling, and administrative leave.

#### HISTORY OF QUALLA BOUNDARY HEAD START

The Qualla Boundary Head Start program began its implementation in 1966. The Head Start program is one of the few surviving early education programs implemented in the 60's "War on Poverty." Head Start's basic goal is to aid low-income families in becoming major figures in the social and economic systems of our society. This goal is accomplished by working with families to raise their self-esteem, aiding goal setting, improving health and welfare, and helping them learn life skills to reach their fullest potential.

The Child Development facet of the Dora Reed QBHS/EHS program began with the opening of the Youngdeer Child Development for children ages 2 to 5 years. The Youngdeer Center served children and families as private payers and was subsidized by the state of North Carolina.

Child Development services were provided at the Dora Reed Children's Center for 20 children. The slots were provided to private paying and subsidized children. Also, the Child Development program committed to using the Head Start Performance Standards as the standard for service provision.

The First Start Nursery Infant/Toddler Center began in 1986 and provided services to 53 children aged 0 to 3. These were private paying and subsidized children using the Early Head Start Performance Standards as the standard for service provision.

Funding was available in February 2000 to start the construction of a new Infant/Toddler facility to adjoin the Dora Reed Children's Center. The 10-classroom facility was completed in January of 2001. The babies that attended First Start Nursery made a smooth transition into the new facility. During this time, plans were underway to apply for Early Head Start funding. Early Head Start was awarded in the summer of 2001 and planning was implemented to begin services in the fall of 2001. Early Head Start services have been provided to 48 infants, 10 pregnant women, and 12 Home-based families.

Today, the two programs are operating under three separate licensures, i.e. Big Cove Children's Center (serves 29 children), Dora Reed Children's Center (serves 128 children) and Early Head Start (serves 102 children). The Big Cove Center operates under the Head Start program, but has its own license separate from the Dora Reed Children's Center because it is in a separate location. There are no childcare fees for EHS or HS - it's FREE!!!

We encourage attachment and continuity for our children by having teachers and students transition through our program together. Our early education program continues to search for new innovative ideas for improving the care and success of our students that they enter Pre-Kindergarten or elementary school with a love of learning and a firm foundation which will serve them throughout their schooling and life.

#### CULTURAL STATEMENT

According to the Multicultural Principles for Head Start Programs, "knowledge of culture and home languages is essential to providing effective Head Start services. Head Start has a long history of serving linguistically diverse populations. It is important to individualize services so that every child and family feels respected and valued and can grow in accepting and appreciating differences. Children acquire cultural knowledge as they develop language, learn concepts, and experience the ways they are cared for by their parents and family members. Children also acquire cultural knowledge from their communities and Head Start experiences."

Head Start's policy on tribal language preservation & revitalization: 1302.36-A program that serves American Indian and Alaska Native children may integrate efforts to preserve, revitalize, restore, or maintain the tribal language for these children into program services. Research about the influences of culturally based education on the academic performance of Native American children shows that interweaving cultural topics with daily activities strengthens their identity and leads to better outcomes for all students. Research also shows that cultural contexts affect young children's cognitive, social and emotional development as well as their approaches to learning.

There are several important points to know about culture in the classroom:

- Culturally based education recognizes the language, experiences, values and knowledge of children, their families and their communities.
- Culture is real and important. For Head Start programs, it is necessary to respect and incorporate families' cultures into the systems and services provided.
- Culture is the context in which children develop and learn. Children's learning is enhanced when their culture is respected and reflected in all aspects of the program.
- By providing children with the opportunity to learn the language of their family's culture, you are helping children to develop a cultural identity and connection to their family roots.

Incorporating culture into the classroom involves including elements of children's home culture into the daily curriculum. It can include counting in the language spoken by children's families in addition to counting in English; choosing themes that reflect the local environment; building on children's prior experiences; and encouraging community members to take an active part in supporting children's learning.

The literacy center contains hundreds of books geared toward your little one. There are board books for infants and toddlers and larger books for preschool age children. The purpose of the literacy center is to cultivate a love of books and reading between caregiver and child. In doing so, the child develops a reading habit that will hopefully continue through their life. Studies show developing healthy reading habits has a positive impact on brain development and academic success.

One such way to help foster a love for reading is the book club. You keep track of the books that you read with your child and turn the reading log into the Literacy/Multi-Cultural Coordinator. Every book counts, even the ones you read over and over. Children that read at least 50 books (and every 100 books after) will have their picture put on the book club wall outside the Literacy Center and will receive a certificate, goody bag, and the opportunity to pick out a book to keep.

#### PHILOSOPHY

QBHS/EHS believes that all children share basic needs and have a right to have those needs met. We believe that each child is unique and that we as a program need to use their unique characteristics to tailor experiences and learning opportunities to meet their unique needs and goals. Moreover, each individual has a unique value and a basic need to be respected, to be recognized, and to be needed. We further believe that children benefit most from comprehensive programs that provide a broad range of services and the child's entire family, as well as the community must be involved. Our program will maximize the strengths and unique culture of each child and his/her family, in an effort to help him/her develop into socially, competent, productive member of society. We believe that our Cherokee culture and language is rich and important to our children and future generations so we will strive to preserve it, strengthen it and teach it within the curriculum chosen for implementation of our program.



# **GUIDING PRINCIPLES**

for our program...

- To create an awareness in the community that we are a leader in Early Childhood Development and Education.
- To be viewed as an integral part of our community.
- To be a trusted and valued community resource and an important enhancement to the community.
- To continue to bring awareness about the program's impact on families through academic, economic, and social progress.
- To be a process of serving others
- To be reflective and inclusive of the diversity of the communities.
- To maintain a safe and healthy environment.
- To hire and maintain qualified teaching staff that care for and love the children
- To strive to engage parents at every level of the Head Start/Early Head Start program.

#### for our children...

- To foster an environment which encourages creative problem solving, individuality, and responsibility.
- To lay the foundation for a love of lifelong learning.
- To guide children in the decision-making process
- To nurture the whole child socially, emotionally, physically, and cognitively.
- To provide for children's individual needs and interests.
- To enrich the lives of children by providing excellence in educational opportunities to promote lifelong success and enhance each child's strengths.
- To encourage self-confidence, self-expression, self-discipline, and curiosity.
- To maintain and improve the child's health.
- To provide awareness of various cultures and respect each child's uniqueness.
- To be an active advocate on the child's behalf.

#### for our families...

- To empower families and reinforce learning in the home because the parent is the child's first teacher.
- To be responsive to the needs of our families as they prepare for purposeful and productive lives.
- To partner with families in establishing and attaining their individual goals.
- To respect the individual beliefs of each family.

for our communities...

- To lay the foundation for community pride, involvement, and service
- To ensure the community understands the early childhood development profession
- To educate the community on the needs of very young children age 0-5 years.
- To work cooperatively with other community resources to build and strengthen services for very young children.

for our staff...

- To be valued by our peers in the community.
- To seek higher education in the form of an Associate's, Bachelor's and/or Master's degree
- To seek and celebrate staff excellence.
- To promote an environment in which teamwork is integral.
- To develop and foster pride in our program and our grantee.
- To continue to provide a variety of opportunities for planed and individualized professional development.
- To expect the highest ethical, moral, and professional standards at entry level.
- To nurture each individual staff member's whole self (physical, emotional, and mental wellness) in a way that exceeds expectation.
- To abide by the Tribal Personnel Policies and procedures.



# PROGRAM GOALS

# Establishing Measures for Objectives/Activities

| Goal 1                         | Goal 2                         | Goal 3                      |
|--------------------------------|--------------------------------|-----------------------------|
| Provide supportive services to | Build School Readiness so that | Improving Health & Wellness |
| improve quality of life for    | children enter kindergarten    | for children, families, and |
| children and families          | prepared                       | staff                       |

| Objective 1 for Goal 1   | Objective 1 for Goal 2   | Objective 1 for Goal 3  |
|--|--|---|
| Providing supportive resources<br>and services for substance<br>abuse families | Continue to utilize Creative<br>Curriculum for intentional<br>teaching | Actively track BMI for children to ensure health is improving |

| Associated Measures   | Associated Measures  | Associated Measures  |
|---|--|--|
| Number of families who are<br>dealing with substance abuse<br>and family crisis identified<br>within the PIR                      | % of lesson plans requiring<br>follow-up based on<br>comparison of fall and winter<br>assessments for 27<br>classrooms | % of children with high BMI for<br>HS & EHS  |
| % of families identified who<br>have received information or<br>resources for assistance with<br>substance abuse or family crisis | % of teachers forming lesson<br>plans from assessment data<br>results for 27 classrooms                                | 100% of menus reviewed and<br>approved by Nutritionist<br>(Portion sides pros and cons?) |
|   |  | 100% of classrooms working<br>with local partnerships on<br>gardening                    |

| Objective 2 for Goal 1       | Objective 2 for Goal 2        | Objective 2 for Goal 3         |
|------------------------------|-------------------------------|--------------------------------|
| Ensure that Grandparents     | Continue to utilize and train | Working with Diabetic          |
| have the resources necessary | on TS Gold to ensure          | families and staff (Partnering |
| for raising grandchildren    | teaching to fidelity          | with Cherokee Choices)         |

| Associated Measures          | Associated Measures             | Associated Measures            |
|------------------------------|---------------------------------|--------------------------------|
| Number of identified         | 100% of classrooms              | Tracking identified family and |
| grandparents within the      | completing quality lesson       | staff information and          |
| program                      | plans through TS Gold           | supportive services utilized   |
| 100% of identified           | 100% of classrooms utilizing TS | Incorporate utilizing local    |
| grandparents receiving needs | Gold to record quality          | support services into family   |
| survey                       | observations                    | goals and track progress       |

| FCP tracking developing and<br>tracking family goals with 100%<br>of identified grandparents | Number of trainings that staff<br>have gone to for active<br>supervision through sign in<br>sheets and satisfaction<br>surveys from teaching staff | Monitor transportation surveys<br>and provide transportation<br>assistance for identified<br>families to utilize local support<br>services |
|--|--|--|
|--|--|--|

| Objective 3 for Goal 1  | Objective 3 for Goal 2  | Objective 3 for Goal 3  |
|---|---|---|
| Mental Health services and tools for parents, families, and staff | Coordination with local<br>preschool and kindergarten<br>programs | Implement healthy activities<br>(I am moving, I am learning,<br>and gardening/food tasting) |

| Associated Measures                         | Associated Measures   | Associated Measures  |
|---|---|--|
| Number of staff and families<br>identified  | Number of local preschool<br>and kindergarten programs<br>assessment data has been<br>shared with | 100% of classrooms utilizing I<br>am moving; I am learning<br>curriculum                                     |
| % of identified staff and families referred | % of four year old's meeting<br>or exceeding developmental<br>expectations in TS Gold             | 100% of classrooms working<br>with local partnerships on<br>gardening at the center in all<br>12 garden beds |
|   |   | 100% of classrooms<br>incorporating food tasting<br>into lesson plans and<br>classroom activities            |

**Program Goals** are a culmination of community assessment, parent surveys, Tribal Council and annual report, Program Information Report where all of the resources come together to help guide the 5-year grant application. The information above is the broad over-arching goals for the 2020-2024. These goals will help us in requesting services form providers, assist families with identified needs, specific trainings to inform staff of progress and identified needs and over all provide the best classroom instruction and teaching so all children are ready for a successful transition to kindergarten.

#### WHAT IS HEAD START? WHAT IS EARLY HEAD START?

Head Start and Early Head Start are federally funded, community-based programs for families. These programs are available for children (birth through age 5.) Families are selected according to federal income and program guidelines.

Head Start/Early Head Start participates in a partnership with family, the community, and the child in order to enhance the social, emotional, cognitive and physical development of the child. This partnership is designed to ensure that the program and family goals are implemented to promote future success in school.

Children and families who attend Head Start/Early Head Start participate in family-centered services, which include a variety of educational and social activities. Medical and dental screenings are provided for children. Children receive healthy meals and snacks and enjoy indoor and outdoor activities in a safe environment. These services facilitate child overall health and development, support parental goals and promote family self-sufficiency.

The Head Start/Early Head Start Programs help all children succeed. The program recognizes that the parent is the child's first and most important teacher. Head Start/Early Head Start values your family involvement in program activities and agrees to work with families as a partner in your child's development. The program needs your participation in every aspect of your child's care and development.



# THANK YOU FOR ENROLLING YOUR CHILD IN HEAD START/EARLY HEAD START!

#### **ARRIVAL & PICK UP**

Our policy requires that children be at the center and in the classroom by 8:15am and picked up promptly by no later than 4:45pm. This enables children and families to build good routines and help prepare for kindergarten.

- □ If you are unable to arrive to the center by 8:15am, you will be required to call the center by 8:00am.
- □ Tardy children will be accepted until 8:45am, however tardiness will be limited to three times a month and only if a phone call was received by 8:00am.
- □ If you arrive after 8:15am, you will be stopped at the front desk and the receptionist will contact the teacher to see if you have called in. If you have not called in or if you have exceeded the monthly limit, your child will not be permitted to stay that day.
- □ Documentation will be kept at the front desk as well as in the classroom to track the number of times you have been tardy.
- □ If your child has a medical appointment, please notify your teacher in advance. The child may return to school with a doctor's statement and no later than 11:15am on the appointment day.
- □ For a child to be counted present for the day, the child must be present from the 8:15am (cut-off time) until 12:00pm.\*We recommend for families to schedule all appointments in the afternoon so children can benefit from our services. \*
- □ In the event that the program is on a two-hour delay, the program doors will be open to children and families starting at 9:30am until 10:30am. The morning cut-off will be at 10:30am.
- □ Our program closes at 4:45pm each day. Please pick your child up promptly from care. If your family is running late, please reach out to our front desk as soon as you know you are running behind.

#### QUALLA BOUNDARY HEAD START & EARLY HEAD START PARENT CODE OF CONDUCT

It is Qualla Boundary Head Start and Early Head Start policy that the business of the company be conducted according to the highest ethical standards. We require parents/legal guardians/caretakers of enrolled children to behave in a manner consistent with decency, courtesy, and respect.

In support of this policy, a set of ethics and standards of conduct are essential for Qualla Boundary Head Start and Early Head Start to prosper and receive the desired trust and respect of children and families, employees, and the community. The underlying principles of these standards are based on courtesy, moral standards, and the law.

All staff, volunteers, and parents must abide by the following established standards of conduct. These standards include, but are not limited to:

- 1. Physical or abusive verbal punishment of your child is not allowed on QBHS/EHS property, on field trips, or at activities being held by the QBHS/EHS. While verbal reprimand may be appropriate, it is not appropriate for parents to verbally abuse their child. Verbal abuse is described as using words to harm an individual. An example would be considered name calling. Parents are always welcome to discuss a behavior issue with the teacher and to seek advice and guidance regarding appropriate and effective disciplinary procedures.
- 2. The QBHS/EHS parents, visitors, and volunteers are prohibited from posting other children's pictures on their social media site or QBHS/EHS social media sites. This includes, Face Book, Instagram, Twitter, emails... Parents, visitors, volunteers, and staff are prohibited from speaking negatively, making inappropriate comments, and making derogatory remarks regarding staff, other parents, the program, and children at all times. Social media sites are not a source for venting, working out disputes, voicing concerns or opinions, or commenting in a negative manner about our program, staff, other parents, facilities, and children.
- 3. No parent or adult may address, for correction or discipline purposes, a child that is not their own. No parent or other adult may physically punish another parent's child. If a parent should witness another parent's child behaving in an inappropriate manner or is concerned about behavior reported to them by their own child, then the parent should direct their concern to the classroom teacher and/or Early Education Director.
- 4. Threats of any kind will not be tolerated. All threats will be reported to the appropriate authorities and will be prosecuted to the full extent of the law. While apologies for such behavior are appreciated, the agency will not assume the risk of a second chance. Parents must be responsible for and in control of their behavior at all times.
- 5. While it is understood that parents will not always agree with employees of QBHS/EHS or other parents, it is expected that all disagreements be handled in a calm and respectful manner away from the children. Confrontational interactions with employees, other parents, or associates of QBHS/EHS are strictly prohibited.
- 6. No parent or adult is permitted to curse or use other inappropriate language on agency property at any time, whether in the presence of a child or not. At NO time shall inappropriate language be directed toward members of the staff or a child.

- 7. At any time, a parent, visitor, or volunteer has a complaint or concern it will be brought to the Education Manager's attention immediately. You can address these complaints verbally or in writing. If the Education Manager is not available, you can speak to the next person in charge according to the chain of command (manager on duty.)
- 8. For the health of all QBHS/EHS employees, children, and associates, smoking is prohibited on agency property. Parents, staff, volunteers, and visitors are prohibited from smoking and vaping in the building, on the grounds, in the parking lot, on field trips, or at activities of QBHS/EHS.
- 9. To ensure the safety and health of all children, all safety rules, including but not limited to the following will be enforced:
  - a. According to the law, all children will be placed in appropriate vehicle restraints at all times. For more information concerning the Car Seat Clinic, contact Tsalagi Public Health at 828-359-6240.
  - b. Parents must supply current emergency contact information to QBHS/EHS staff at all times. It is the parent's responsibility to keep this information accurate, including changes in names, addresses, and phone numbers for themselves and emergency contacts. Parents must meet with QBHS/EHS staff regularly to update this information.
  - c. Parents will not leave any child (under the age of 18) unattended, no matter what the circumstances, in a motor vehicle on QBHS/EHS property.
  - d. Parents will not be allowed to feed, change, or rock a child that is not their own.
  - e. Parents will be responsible for and will remain in control of all their children while on QBHS/EHS property, on a field trip, or attending a QBHS/EHS function/activity.
  - f. Parents will not cause damage or harm to QBHS/EHS property or facilities at any time.
  - g. Children are not allowed to roam the building alone. They must be accompanied by an adult at all times. This includes the end of the day, after your child is signed out.

Failure to comply with the policies may lead program administration to approach the parent/guardians involved. The following attempts will be made to correct the situation. Administration will determine which of the following attempts will be made considering the severity of the situation.

- 1. Verbal warning
- 2. Written Warning
- 3. Meeting with the Director and Management
- 4. Reports made to Tribal Family Safety Program or County DSS agencies
- 5. Law Enforcement may be called to remove the involved parties from the property.

#### **ADDRESSING PARENT CONCERNS & COMPLAINTS**

As a parent, it is important for you to advocate for your child. If you come across a situation in which you feel that your child needs your voice, please address your concern with your child's teacher. If you find that your concerns are not addressed by your child's teacher, then kindly speak with the teacher's supervisor.



Cynthia 'Cindi' Guilford Head Start Supervisor (W) 828.359.2212 (C) 828.788.0317



Felicia Sequoyah Big Cove Supervisor (W) 828.359.3305



Tina Saunooke Early Education Director (W) 828.369.6593 (C) 828.736.6789



Chelsea Solis Head Start Supervisor (W) 828.359.3001 (C) 828.507.7302



Education Manager (W) 828.359.2211



Lacey Smith Early Head Start Supervisor (W) 828.359.2216 (C) 828.226.2262



Stephanie Wiggins Early Head Start Supervisor (W) 828.359.2216 (C) 828.226.2262

After speaking with the Head Start or Early Head Start Supervisor, please follow the chain of command and speak with the Education Manager and then the Early Education Director.

If after speaking with leadership at Qualla Boundary Head Start & Early Head Start you feel that your concerns have not been fully addressed, you are welcome to reach out to Tribal Regulatory and Compliance at 828-359-6180 or an anonymous report can be made at 800-455-9014

#### PARENT RESPONSIBILITIES

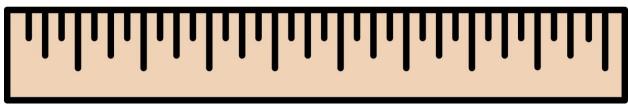
Parents have primary responsibility for their child; as the child's legal guardians, they are required to care for and supervise him/her. This includes abiding by rules and requirements of this program. The Qualla Boundary Head Start/Early Head Start staff assumes a secondary role in the life and education of the child. We accept the responsibility delegated to us by the child's parents to care for the child, feed the child, and teach the child for a portion of the day and are accountable to parents for carrying out those responsibilities.

The following are general program rules that are the responsibility of the parent:

- 1. Send your child to school daily. Please see QBHS/EHS Attendance Policy on page 21.
- 2. Notify your Family Support Coordinator and child's teacher if your child will be absent, for any reason.
- 3. Read and follow all bus policies if Head Start provides your child transportation.
- 4. Obtain all health exams and needed records for your child and turn them into the QBHS/EHS Health Manager.
- 5. Work in partnership with Early Head Start/Head Start staff to strengthen your family and prepare your child for school.
- 6. Read and respond to all written notices, bulletins, and newsletters sent home. Check your child's cubby and social media outlets daily for information concerning upcoming events.
- 7. Tell us about your likes, dislikes, concerns, and ideas about our program. Suggestion boxes can be found in the lobbies of Dora Reed and the Big Cove Children's Center.
- 8. Know and respond to the individual needs of your child.
- 9. Take an active interest and talk daily with your child about their Early Head Start/Head Start experience.
- 10. Walk your child to and from the bus if bus services are provided to your child.
- 11. Walk your child to and from the classroom when dropping off and picking up. Children are not to be left alone in the hallways after signing them out of the classroom for the day.
- 12. Whenever there is a change in address, phone, emergency contacts, health providers, health conditions, work/school schedule, family situation, or other pertinent information, we ask that this be submitted, in writing as soon as the change occurs.
- 13. In addition to these responsibilities, families will also be required to adhere to the QBHS & EHS Parent Code of Conduct.

# **ENROLLMENT RESPONSIBILITIES**

Qualla Boundary Head Start/Early Head Start program goals are to assure that each child is in optimal health, that preventative health measures are taken, and that follow-up treatment and services are obtained for any health condition detected. Parents have responsibilities in relation to the health of the children in the program.



#### Parents, it is your responsibility to:

# □ Before Child's First Day of School:

- Complete physical exam: all children must have a physical on file and it cannot be more than 6 months prior to the date of enrollment. Each year an updated annual physical will need to be provided.
- Health Screening: Blood lead test with result at or after 24 months of age.
- Up-to-date Immunization Record

# □ Within 90 days of Enrollment:

• Hemoglobin blood test with results

#### □ Yearly Requirements:

• An updated physical exam.

#### **Early Head Start Requirements:**

• For children under 2 years, physicals and immunization records will be required more frequently.

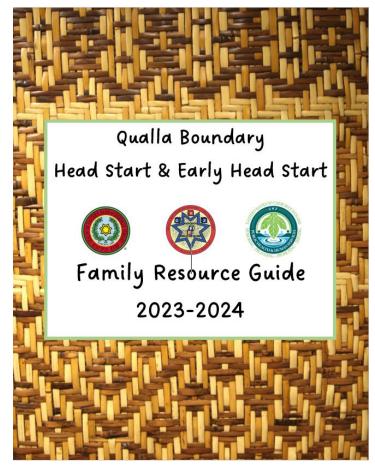
# □ Yearly Enrollment Updates Each School Year Child Attends QBHS/EHS:

- New Application (if transitioning from Early Head Start to Head Start)
- Permission Forms
- Income Verification (if transitioning from Early Head Start to Head Start)
- Annual Physical (if due)
- Emergency Forms
- Child and Adult Care Food Program (CACFP) enrollment forms.

# PARENT'S RIGHTS

Listed below are the rights of each family/parent/legal guardian enrolled into the QBHS/EHS program upheld by each Qualla Boundary Head Start/Early Head Start staff member and Parent Committee member.

- 1. To be welcomed in the center or classroom during all program hours and be treated with respect and dignity.
- 2. To be informed regularly about their child's progress in Head Start or Early Head Start.
- 3. To choose whether to take part in Qualla Boundary Head Start/Early Head Start program activities.
- 4. To participate as a member of the Parent Committee or Policy Council.
- 5. To help plan parent activities to enhance parents' daily living.
- 6. To be informed about operation of the program through Policy Council representatives.
- 7. To receive information regarding community resources, center activities, and program planning.



# QUALLA BOUNDARY HEAD START & EARLY HEAD START ATTENDANCE POLICY



Qualla Boundary Head Start and Early Head Start will encourage and support family efforts in developing positive and effective habits for daily attendance. Development of these habits begins with young children attending QBHS/EHS daily and supports transition into school with the same sound attendance habits.

For the school year, QBHS & EHS will be implementing an

attendance policy which involves an Attendance Development Plan. The Attendance Development Plan will encourage and support families to meet the 85% attendance requirement set forth by the Office of Head Start. \**For a child to be counted present for the day, the child must be present from the 8:15am (cut-off time) until 12:00pm.*\*

Therefore, daily attendance efforts of QBHS/EHS families and their children will be encouraged and supported by QBHS/EHS through the following attendance policy:

- If a child is absent, the child's family should expect a call from their Family Support Coordinator concerning their absence. Note that all absences are unexcused. Federal guidelines recommend that Head Start programs maintain an eighty-five percent (85%) attendance rate. To meet the recommended rate, QBHS/EHS must work with families to maintain high attendance.
- 2. If your child does not meet the monthly 85% Attendance Policy, your family will receive an attendance letter outlining all dates the child was absent from the program. Families will receive a copy of the letter in the child's cubby and a mailed copy will be sent to the home address. If your child receives three (3) attendance letters over the course of the 2022-23 school year, your family will be placed on an Attendance Development Plan.
- 3. The Attendance Development Plan will be introduced to the family by their Family Support Coordinator (FCP). The Attendance Development Plan will monitor the child's attendance for thirty school days to encourage daily attendance. While on the Attendance Development Plan, the child must attend QBHS & EHS for 85% of the month. If a family successfully maintains 85% attendance or more, during the 30-day monitoring period, the child and family will be removed from the Attendance Development Plan.
- 4. If the family does not meet the 85% Attendance Policy while on the Attendance Development Plan, all documentation and contacts will be passed on to the Family Services Manager and the Early Education Director to evaluate the child and family's need for services. Once the documentation has been evaluated, a decision will be made regarding the need for services.

If a family does not follow-through or communicate while on the Attendance Development Plan, the child could possibly be dismissed from QBHS & EHS.

#### QUALLA BOUNDARY HEAD START & EARLY HEAD START ATTENDANCE DEVELOPMENT PLAN EXAMPLE

Qualla Boundary Head Start & Early Head Start Attendance Development Plan 2023-2024

Qualla Boundary Head Start & Early Head Start strives to ensure regular attendance throughout the school year. Your child's consistent attendance in our Early Head Start/Head Start Program supports their early learning and prepares them for Kindergarten. Head Start requires each child to maintain a minimum monthly attendance of 85%. Your child's growth and development are maximized through the QBHS/EHS program if they attend regularly through the building of relationships with peers and staff, and through social and learning situations. The purpose of the Attendance Development Plan is to support and improve your child's attendance at QBHS & EHS.

Attendance Development Plan Establishment Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Family Support Coordinator Signature: \_

| Child's Name/Parent's Name: | FCP:                                      | Date:           |
|-----------------------------|---|-----------------|
|                             |   |                 |
| Family Strengths:           |   |                 |
| Family Goal                 | Action Plan                               | Timeline        |
| <u>Family Goal</u>          | Action Fian                               | <u>1 imenne</u> |
|                             | Successfully meet the 85% attendance rate | 30 days         |
| Follow-Up                   |   |                 |
| Week 1:                     |   |                 |
|                             |   |                 |
|                             |   |                 |
| Week 2:                     |   |                 |
|                             |   |                 |
|                             |   |                 |
| Week 3:                     |   |                 |
|                             |   |                 |
|                             |   |                 |
| Week 4:                     |   |                 |
|                             |   |                 |
|                             |   |                 |
| Week 5:                     |   |                 |
|                             |   |                 |
|                             |   |                 |
|                             |   |                 |
| Week 6:                     |   |                 |
|                             |   |                 |
| Thirty Day Outcome:         |   |                 |
| And Succession              |   |                 |
|                             |   |                 |

| Attendance Development Plan Conclusion Date: |       |
|--|-------|
| Parent/Guardian Signature:                   | Date: |
| Family Support Coordinator Signature:        | Date: |
| Family Services Manager Signature:           | Date: |
| Early Education Director Signature:          | Date: |

# QUALLA BOUNDARY HEAD START & EARLY HEAD START BEHAVIOR MANAGEMENT SUPPORT/DISCIPLINE

# **Policy:**

All children will be provided support for positive behavior that is conducive to the development of social competence in the individual and an atmosphere that provides safety to all children and staff in an environment where opportunities for learning are optimized. This policy provides guidance for all QBHS&EHS staff and LEAs in the requirement for support of positive behavior and the definition of acceptable discipline methods.

# **Procedure:**

- 1. Staff will directly teach classroom rules, expectations, and behavioral requirements to children.
  - a. Staff will discuss adult expectations in an age-appropriate manner and have a daily schedule to ensure that children are aware of what is expected of them.
  - b. Staff will ensure all children have been taught acceptable means of meeting adult requirements for their behavior.
  - c. Rulemaking and teaching will be positive and rationally explained to children.
- 2. As early in the school year as possible, and on a regular basis, staff will document challenging behavior by children and their responses to adults.
  - a. Behavior Matrices will be used for this purpose.
  - b. As soon as patterns of challenging behaviors emerge, staff will seek the advice and assistance of their immediate Supervisor and/or the Developmental Specialist.
- 3. Staff and supervisors will develop plans for assisting children in finding acceptable ways of meeting their needs.
  - a. Plans will include a determination of the need for referral to an appropriate professional for assessment, with consent.
  - b. The Developmental Specialist will be notified before any referral is made.
  - c. Plans will address the behaviors without humiliating or punishing the child.
  - d. Plans will identify the role of each staff member, and LEA, in the implementation of plans so that an orchestrated and coordinated approach to providing positive support to appropriate behaviors can be achieved.
  - e. Staff will discuss and plan for inappropriate behaviors presented by identified children in advance.
    - i. For children whose behaviors present minor problems, information plans may be made that staff will implement on a regular and consistent basis to assist the child in meeting expectations.

# 4. Guidance:

- a. All QBHS & EHS staff will adhere to the philosophy of positive behavior support.
  - i. Build Positive relationships with children, families, and colleagues

- 1. Be consistent with children and notice when they are following expectations.
- 2. Communicate with children at eye level.
- 3. Verbally interact with children and notice when they are following expectations.
- 4. Participate in children's play when appropriate.
- 5. Show respect and consideration to all.
- 6. Examine own attitudes towards challenging behavior.
- ii. Establish Classroom Preventative Practices
  - 1. Arrange traffic patterns in classroom so there are no wide open spaces.
  - 2. Clearly define boundaries in learning centers.
  - 3. Establish and enforce clear rules, limits, and consequences.
  - 4. Provide a variety of materials in all learning environments.
  - 5. Consider children's interests when deciding what to put in learning centers.
  - 6. Make changes and additions to learning centers on a regular basis.
  - 7. Provide a well-balanced schedule of large and small group activities.
  - 8. Implement the schedule consistently.
  - 9. Teach children about the schedule and explain changes when necessary.
  - 10. Ensure transitions are smooth, by providing warnings, expectations, and context for minimal waiting time between activities.
- iii. Utilize Social Emotional Teaching Strategies
  - 1. Interact with children to develop their self-esteem.
  - 2. Demonstrate active listening with children.
  - 3. Show empathy and acceptance of children's feelings.
  - 4. Show sensitivity to individual children's needs.
  - 5. Encourage autonomy.
  - 6. Capitalize on the presence of typically developing peers.
  - 7. Use prompting and reinforcement of interactions effectively.
  - 8. Provide instruction to aid in the development of social skills.
  - 9. Promote identification and labeling of emotions in self and others.
  - 10. Explore the nature of feelings and the appropriate ways they can be expressed.
  - 11. Model appropriate expressions and labeling of own emotions and self- regulation through the course of the day.
  - 12. Create a planned approach for problem solving processes within the classroom.
  - 13. Promote individualized emotional regulation to enhance positive social interactions within the classroom.

# 5. Common Rules:

# **CONNECT BEFORE YOU CORRECT!**

- Reach out to the parents to see if there are stressors outside the centers that could be causing a change in the child's behavior.
- Please inform the Family Support staff for that child of the behavior change.
- a. Staff should observe situations that are known to trigger inappropriate behavior and try to diffuse these situations before they occur.
- b. Requests to children will be stated in a "POSITIVE" way. Example: "I like how you are using your walking feet".
- c. Provide quality time for a child who may need extra attention by reading a book or working one-on-one.
- d. Praise and encourage good behavior instead of focusing on unacceptable behavior.
- e. Expectations for a child's behavior should be appropriate for the developmental level of that child.
- f. Redirection is the first method to be used when an eruption begins.
- g. Only constructive, age-appropriate methods of discipline should be used to help children develop self-control and assume responsibility for their own actions.
- h. Children should not be shamed, ridiculed, or spoken to harshly, abusively or with profanity. No discipline technique that is humiliating, threatening, or frightening to children should be used.
- i. Children should not permitted to intimidate or harm others, themselves, or property. If a child becomes out of control and combative, lead them from the area.
- j. If he/she does not want to leave the area, then remove the other children from the room to a safe area such as the playground or other designated area.\*

\*If a child shows signs of distress and begins violent behavior i.e.: throwing objects, threatening peers and teachers, the other children will be removed from the area to a safe place such as a playground if weather allows, if the weather does not allow, the children will be taken to the Literacy center or another designated area. (Refer to challenging behavior policy)

Documentation of the events in the classroom must be completed for each incident, using the Behavior Incident Form.

Documentation should include staff interactions, peer interactions, intervention/strategies taken during the inappropriate behavior and after the behavior. Ongoing records can be helpful to the center staff and parents in accessing behavior and developing a plan to modify behavior. All documentation will be fact based, not opinions.

When presenting the behavior report to the parent or guardian, for discussion, the teacher or teacher assistant should ask the parent when and if they would like to be contacted about behaviors in the classroom. I.e., call every time a report is written, call at naptime, or no call regarding behavior reports. This will be documented on a parent contact and shared with the supervisor and family support for that family. Also share contact preferences with the teachers/assistants in their pod.

Communication of concerns should be ongoing. Take time to brainstorm about actions that might be taken to solve the discipline problem. Focus on positives and take steps to involve the parent in the proposed solutions. After careful evaluation of the environment, developmentally appropriate activities, schedule, supplies, supervision, staff interaction and peer interaction and if the child continues to exhibit inappropriate behavior, contact the supervisor, Developmental Specialist, Health Manager, Education Manager or Director.

Every child will be served that meets his/her individual needs. The health and safety of all children and staff is our top priority while children are at the center.



# QUALLA BOUNDARY HEAD START & EARLY HEAD START CHALLENGING BEHAVIORS

#### **Department: Mental Health**

#### Section: Classroom Procedures

#### **Subject: Challenging Behaviors**

#### P.S. 1302.17:

When a child exhibits persistent and serious challenging behaviors, QBHS/EHS will explore all possible steps and document all steps taken to address such problems and facilitate the child's safe participation in the program.

Such steps must include, at a minimum:

- Engaging a mental health consultant.
- Considering the appropriateness of providing appropriate services and supports under section 504 of the Rehabilitation Act to ensure that the child who satisfies the definition of disability in 29 U.S.C. §705(9)(b) of the Rehabilitation Act is not excluded from the program on the basis of disability.
- Consulting with the parents and the child's teacher.
- If the child has an individualized family service plan (IFSP) or individualized education program (IEP), the program must consult with the agency responsible for the IFSP or IEP to ensure the child receives the needed support services.
- If the child does not have an IFSP or IEP, the program must collaborate, with parental consent, with the local agency responsible for implementing IDEA to determine the child's eligibility for services.
- If, after QBHS/EHS has explored all possible steps and documented all steps taken as described above, a program, in consultation with the parents, the child's teacher, the agency responsible for implementing IDEA (CDSA/HOPE center), and the mental health consultant, determines that the child's continued enrollment presents a continued serious safety threat to the child or other enrolled children or staff and determines the program is not the most appropriate placement for the child, QBHS/EHS must work with such entities to directly facilitate the transition of the child to a more appropriate placement.

#### **Procedure:**

#### When a child shows signs of distress or continued challenging behaviors:

- Notify your supervisor, Education Manager, Developmental Specialist, Health Manager and Director.
- Above stated parties will review video footage and share back with teaching staff any necessary means to transitions, interactions in large or small groups etc.
- Parents will be made aware of the child's behavior and/or distress immediately.

- A behavior incident form will be completed for each incident.
- The form will be presented to the parent/guardian for review and a signature.
- The supervisor, teacher and Developmental Specialist and Education Manager will meet to discuss child's distress and possible causes and interventions.
- The teacher(s)/Supervisor will document interventions used to aid in decreasing challenging behaviors.

• If the behaviors have not improved after classroom interventions within 3-5 days a meeting with parents will be scheduled to discuss next steps, such as behavior plan, and or a referral to mental health provider or other interventions.

If the parent/guardian does not wish to participate or assist with interventions for their child, a modified schedule will be implemented.

- 1. The modified schedule will be individualized as to what the child needs for two weeks.
- 2. After two weeks, a meeting with the parent/guardian will be scheduled to discuss the need for the modified schedule (if appropriate).
- 3. If there is no progress after a two-week period, the parent will be required to seek a mental/behavioral health provider for the child, if applicable.
- 4. Parents will also be required to complete any steps outlined in the behavior plan. Such as seeking an evaluation by the Hope Center or CDSA or a Psychological examination or a visit to the Pediatrician.
- 5. This will require documentation that an appointment has been scheduled and attended.
- 6. The Director has the right to reinstate or terminate the modified schedule as needed.
- 7. If a child has shown violent behavior\* to self or others, he or she will be sent home and not able to return to school until the parent/guardian meets with the teacher, Supervisor, Developmental Specialist, Education Manager, FCP and Director.
- 8. After the meeting, the Director will advise when the child may return to school and if a behavioral plan or modified schedule (or both) will be implemented.
- 9. A modified schedule may involve adjusting arrival or departure times or the amount of time the child is at the center. In addition, teaching staff will continue to share positive parenting information, and positive interventions that may aid in decreasing negative behavior.
- 10. The schedule will be in effect for two weeks. A meeting will be held, and the progress of the child's behavior will be reviewed.
- 11. If the child has made progress, returning to regular schedule will be decided by the Director.
- 12. If the child has not made progress and continues to show signs of distress, the parent/guardian may be required to stay with the child for the child to participate in the school day or the parent may choose for the child to be served remotely. This may be implemented for the remainder of the school year.

\*Violent behavior is defined as: includes any physical assault, with or without weapons; behavior that a reasonable person would interpret as being potentially violent [e.g., throwing things, pounding on a desk or door, or destroying property], or specific threats to inflict physical harm [e.g., a threat to shoot a named individual].

#### QUALLA BOUNDARY HEAD START & EARLY HEAD START DISCIPLINE POLICY

Teachers will employ the following positive behavioral strategies: building a positive relationship with each child, using classroom preventative practices, teaching social skills and emotional literacy, individualizing behavior interventions, teaching children replacement skills, participating in/with specialized services for children with severe, persistent behavior challenges, including dangerous behavior with potential injury to themselves or others.

Our center will incorporate the following practices/techniques:

1. Upon hiring and at annual pre-service training, staff will be required to read and sign a copy of the program's discipline policy which will clearly state the guidelines and rules to discipline. This signed statement will be maintained in the staffs' files in the office of the Human Resource/Administrative Assistant. The following guidelines will be used:

#### We do:

- 1. Praise, reward, and encourage the children.
- 2. Reason with and set limits for the children.
- 3. Model appropriate behavior for the children.
- 4. Modify the classroom environment to attempt to prevent problems before they occur.
- 5. Listen to the children.
- 6. Provide alternatives for inappropriate behavior to the children.
- 7. Provide the children with natural and logical consequences of their behavior.
- 8. Treat the children as people and respect their needs, desires, and feelings.
- 9. Ignore minor misbehavior.
- 10. Explain things on their level.
- 11. Use redirection in place of "time out".
- 12. Stay consistent in our behavior management program.
- 13. Use a respectful tone of voice at all times with children.

#### We do not:

- 1. Spank, shake, bite, pinch, push, pull, slap, or otherwise physically punish the children.
- 2. Make fun of, yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse the children.
- 3. Shame or punish the children when bathroom accidents occur.
- 4. Deny food or rest as punishment.
- 5. Relate discipline to eating, resting, or sleeping.
- 6. Leave the children alone, unattended or without supervision.
- 7. Place the children in locked rooms, closets, or boxes as punishment.
- 8. Allow discipline of children by children.
- 9. Criticize, make fun of, or otherwise belittle children's parents, families, or ethnic groups.
- 10. Threaten children or restrict their movement.

2. Teaching staff will set up and arrange classrooms to meet the developmental needs of the children in their care and to maximize supervision and prevention of potential conflicts. E.g., duplicate toys for toddlers, large enough spaces for several preschool-age children to build, low furniture to ensure visual supervision of the entire classroom.

3. Rather than focus solely on reducing the challenging behavior, teachers also focus on teaching the child social and emotional regulation skills. Teachers use environmental modifications, activity modification, adult or peer support, and other teaching strategies to support the child's appropriate behavior.

4. Teaching staff will utilize a variety of sources and techniques to establish positive relationships that lead to the development of trust and mutual respect of the children in their care.

5.Positive preventative guidance techniques are built into the curriculum and provide the basis for prevention and management of classroom behaviors. All classrooms will post classroom rules. Preschool classrooms will include children in the development of the rules. Rules will be clearly stated and shall support independence by children through use of photos, pictures, etc.

6. Teachers observe children who have challenging behavior. They identify events, activities, interactions, and other contextual factors that predict and may contribute to the child's use of challenging behavior and offer redirection from that behavior to potentially eliminate problems before they arise.

7. When a child acts in a way that is not appropriate and/or harmful to him/herself and others around them, staff shall respond to that child in a way that:

- a. Provides for the safety of the child.
- b. Provides for the safety of others in the classroom.
- c. Is calm.
- d. Is respectful to the child.
- e. Provides the child with information on acceptable behavior.

# QUALLA BOUNDARY HEAD START & EARLY HEAD START **BEHAVIOR INCIDENT REPORT FORM EXAMPLE**

Behavior Incident Report Circle One: HS / EHS

|   |                  |  | erachtenepore              |   |                       |
|---|------------------|--|----------------------------|---|-----------------------|
| Classroom Number:   | Child Name:      |  | Staff Name                 | Date:   | Time:                 |
| Behavior Description:   |                  |  |                            |   |                       |
|   |                  |  |                            |   |                       |
|   |                  |  |                            |   |                       |
|   |                  |  |                            |   |                       |
| Problem Behavior (check most  | intrusive)       |  |                            |   |                       |
| Physical aggresion  |                  | Non-complia<br>Social With                           | ance<br>drawal/ Isolation  | Repetitive belt<br>Repetitive self                        | navior                |
| <ul> <li>Disruption/ Tantrums</li> <li>Inconsolable crying</li> </ul>         |                  | Running aw   |                            | <ul> <li>Hurting self</li> <li>Trouble falling</li> </ul> | 1 asleep              |
| Verbal Aggression   |                  |  | estroying objects or items | D Other:  |                       |
| Inappropiate language   |                  | Unsafe behavior                                      | aviors                     |   |                       |
| Activity (check all that apply)   |                  |  |                            | 2   |                       |
| Arrival   |                  | Outdoor pla  |                            | Departure   |                       |
| <ul> <li>Circle/ Large group activit</li> <li>Small group activity</li> </ul> | У                | <ul> <li>Special acti</li> <li>Field trip</li> </ul> | vity                       | <ul> <li>Therapy</li> <li>Quiet Time/Nap</li> </ul>       |                       |
| Center/ Indoor Play   |                  | B Self-care/ B                                       | athroom                    | Transportation  |                       |
| Diapering   |                  | Transition   |                            | Individual activit  | *                     |
| Meals   |                  | Clean-up   |                            | Other:  |                       |
| Others Involved (check all that   | apply)           |  |                            |   |                       |
| Teacher   |                  | Family Me  | mber                       | <ul> <li>Transportation</li> <li>Kitchen Staff</li> </ul> |                       |
| <ul> <li>Assistant Teacher</li> <li>Peers</li> </ul>                          |                  |  | dministrative Staff        | <ul> <li>None</li> </ul>                                  |                       |
| <ul> <li>Peers</li> <li>Therapist</li> </ul>                                  |                  | Classroom  | n volunteer                | Dother:   |                       |
| Possible Motivation (check all  | that apply)      |  |                            |   |                       |
| Obtain desired item   |                  | Gain adul  | t attention/comfort        | Avoid sensor  | 2/                    |
| <ul> <li>Obtain desired activity</li> </ul>                                   |                  | Avoid adu  |                            | Don't know  | У                     |
| Gain peer attention   |                  | Avoid task<br>Obtain se                              |                            | Other:  |                       |
| Avoid peers   |                  | D Obtain se  | nsory                      |   |                       |
| Response (check all that apply  | )                |  |                            |   |                       |
| Verbal reminder   |                  |  | ysical comfort             | Teacher conta   |                       |
| <ul> <li>Redirect to different a</li> <li>Move within group</li> </ul>        | ctivity/toy      |  | Practice expected behavior | Physical Guida<br>Debugical hold/                         | ance<br>Restrain *    |
| <ul> <li>Remove from area</li> </ul>  |                  | Time with a  | a teacher                  | Physical hold/<br>a child should only be restrated        | ned to prevent injury |
| Remove Item   |                  |  | ·                          | Other:  |                       |
| Administrative Follow-Up (che   | eck all that app | ly)  |                            |   |                       |
| Not Applicable  |                  | Temporar   | y removal from classroom   | Dismissal from  |                       |
| Talk with child   |                  | Sent hom   | e for reminder of day      | Modified Sch  | edule                 |
| <ul> <li>Contact family</li> <li>Family meeting</li> </ul>                    |                  | Sent hom   | e for 1 or more days       |   |                       |
| a ronny moonly  |                  |  |                            |   |                       |
| Comments:   |                  |  |                            |   |                       |
|   |                  |  |                            |   |                       |
|   |                  |  |                            |   |                       |
|   | IEP in pla       | ce   | receiving ment             | al health services  |                       |
| Parent/Guardian Signature   |                  |  |                            | Da  | te                    |

#### PARENT INVOLVEMENT

You are your child's first and most important teacher. Qualla Boundary Head Start/Early Head Start recognizes the parent-child bond as the child's most significant relationship. Your child learns from what you say, what you do, and what you believe and value. The relationship between staff and family is based on respect for the child and family's home culture. The program provides several experiences and opportunities for family participation. QBHS/EHS strongly encourages parent involvement in center activities, meetings, and community events.

- □ Family Goals and Family Outcomes: Each family will work with their FCP to develop a Family Partnership Agreement and to complete the Family Outcomes Assessment. The family goals will identify your family's needs, interest, strengths, and goals. The Family Outcomes Assessment will be completed three times during the school year. This assessment will also assist in identifying needs and strengths of your family. Your family will receive support throughout the year to meet these needs and goals.
- □ **Parent Leadership:** Parents of Qualla Boundary Head Start/Early Head Start children are encouraged to give input into the program through their participation in their Parent Committee and Policy Council.
- □ Child's Education: Qualla Boundary Head Start/Early Head Start invites the family to be involved with their child's education by participating in curriculum development, accomplishing take home activity plans, observing your child's classroom, and volunteering in the classroom to work with all the children. Input from parents is utilized while implementing lesson plans and individualizing for your child and learning about Child Outcomes that are developmentally appropriate for your son/daughter's age.
- □ Child's Health Care: All family members are encouraged to participate in the care of their child by attending medical/dental sessions and learning the basics of raising a healthy child. Through home visits with staff, families also participate in the prevention and detection of physical, emotional, and developmental concerns.

# FAMILY OUTCOMES ASSESSMENT EXAMPLE

#### Qualla Boundary Head Start & Early Head Start

#### Family Outcomes Assessment

Participant Name: \_\_\_\_\_

Date Initiated: \_\_\_\_\_

ChildPlus ID: Caseworker:

Scoring Legend: Please circle the statement that best fits your familys situation.

| •                 | Scoring Legend: Please circle the statement that best fits your familys situation.                      |  |  |  |  |
|-------------------|---|--|--|--|--|
|                   | essment Question  |  |  |  |  |
| Family Well Being |   |  |  |  |  |
| Saf               |   |  |  |  |  |
|                   | <ol> <li>Family does not feel safe in their home. Need or has a protection order.</li> </ol>            |  |  |  |  |
|                   | <ol><li>Family has some concerns for safety.</li></ol>  |  |  |  |  |
|                   | <ol><li>Family is in no danger and are safe in their home.</li></ol>                                    |  |  |  |  |
| Hea               | lth   |  |  |  |  |
|                   | <ol> <li>Family/child need medical/dental services.</li> </ol>  |  |  |  |  |
|                   | <ol><li>Family//child is receiving services.</li></ol>  |  |  |  |  |
|                   | <ol><li>Family/child medical dental needs are met.</li></ol>  |  |  |  |  |
| Me                | ntal Health/Substance Abuse   |  |  |  |  |
|                   | <ol> <li>Family/child need services.</li> </ol>   |  |  |  |  |
|                   | <ol> <li>Family/child are receiving services.</li> </ol>  |  |  |  |  |
|                   | <ol><li>Family/child have no need for services.</li></ol>   |  |  |  |  |
| Tra               | nsportation   |  |  |  |  |
|                   | 1. Family has no transportation.  |  |  |  |  |
|                   | <ol> <li>Family has limited access to transportation.</li> </ol>  |  |  |  |  |
|                   | <ol> <li>Family has adequate transportation, including driver's license and car insurance.</li> </ol>   |  |  |  |  |
|                   | ising   |  |  |  |  |
|                   | -   |  |  |  |  |
|                   | <ol> <li>Family is homeless – transient, shelter, living in car, living with family/friends.</li> </ol> |  |  |  |  |
|                   | <ol><li>Family has temporary living arrangement but seeking permanent housing.</li></ol>                |  |  |  |  |
|                   | <ol><li>Family has adequate permanent housing.</li></ol>  |  |  |  |  |
| Sub               | stance Use  |  |  |  |  |
|                   | <ol> <li>Family has concerns of substance use.</li> </ol>   |  |  |  |  |
|                   | <ol><li>Family is receiving services for substance use.</li></ol>                                       |  |  |  |  |
|                   | 3. Family has no concerns   |  |  |  |  |
| Pos               | itive Parent Child Relationship   |  |  |  |  |
| Nu                | turing Relationships  |  |  |  |  |
|                   | 1. Parent needs discipline routine and child development  |  |  |  |  |
|                   | <ol><li>Parent is seeking services for discipline and/or child development</li></ol>                    |  |  |  |  |
|                   | <ol><li>Parent has formed positive discipline and child development skills.</li></ol>                   |  |  |  |  |
| _                 | nily as Lifelong Educators  |  |  |  |  |
|                   | ool Readiness – Family  |  |  |  |  |
|                   | <ol> <li>Family has concerns about age-appropriate child development.</li> </ol>                        |  |  |  |  |
| 1                 | 2. Family is advocating for child by seeking services (IFSP (Individualized Family Service Plan)/IEP    |  |  |  |  |
|                   | (Individualized Education Plan) or Referrals).  |  |  |  |  |
|                   | <ol> <li>Family has no concerns about age-appropriate child development.</li> </ol>                     |  |  |  |  |

# FAMILY OUTCOMES ASSESSMENT EXAMPLE (second page)

#### Family Outcomes Assessment

Participant Name: \_\_\_\_

Child Plus ID: \_\_\_\_

#### Scoring Legend: Please circle the statement that best fits your familys situation.

| Assessment Questions  |
|---|
| School Readiness-Child  |
| <ol> <li>Child has been referred for developmental concerns or is currently in services (IFSP/IEP,</li> </ol> |
| behaviors, speech)  |
| <ol><li>Child is making progress towards displaying appropriate development.</li></ol>                        |
| <ol><li>Child displays age-appropriate development.</li></ol>   |
| <u>Families as Learners</u>   |
| Education, Training, and Life Goals   |
| <ol> <li>Family does not have HS diploma/GED or has not set a career/life goal.</li> </ol>                    |
| <ol><li>Family is working toward education or has a life/career goal.</li></ol>                               |
| <ol><li>Family is okay with current situation.</li></ol>  |
| Family Engagement in Transitions  |
| Transitions   |
| <ol> <li>Family has concerns about transition into new environment.</li> </ol>                                |
| <ol><li>Family is working towards smooth transitions.</li></ol>   |
| <ol><li>Family has no concerns with transitions.</li></ol>  |
| Family Connections to Peers and Community   |
| Families and Communities  |
| <ol> <li>Family has knowledge of three or less community resources.</li> </ol>                                |
| <ol><li>Family has knowledge of four to five community resources.</li></ol>                                   |
| <ol><li>Family has knowledge of more than five community resources.</li></ol>                                 |
| Families as Advocates and Leaders   |
| Leadership and Advocacy   |
| <ol> <li>Family is not engaged in Head Start/Community Activities.</li> </ol>                                 |
| <ol><li>Family participates occasionally in Head Start/Community Activities.</li></ol>                        |
| 3. Family is actively engaged in Head Start/Community Activities. (Policy Council, Parent/Child               |
| activities, or community organizations.)  |

Assessment Notes:

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## FAMILY PARTNERSHIP AGREEMENT EXAMPLE

#### **Family Goal Plan**

| Family Name:               | Child's Name:   | Enrollment Date   |
|----------------------------|---|---|
|                            | ments that a family wishes to carry out dur<br>n. It is advisable to include all family membe | ing a specific timeframe. The family may include<br>ers in the goals. |
| Date Goals Established: _  |   |   |
| Why is this important to r | me?   |   |
| What strengths and resou   | urces do I have available to help me with th  | ese goals?  |

What could get in the way of me achieving these goals?

|         | Include Steps to Take: | Target Date: | Date<br>Accomplished: |
|---------|------------------------|--------------|-----------------------|
| Goal 1: |                        |              |                       |
| Goal 2: |                        |              |                       |
| Goal 3: |                        |              |                       |
| Goal 4: |                        |              |                       |

| Parent Signature |  | Date: |
|------------------|--|-------|
|------------------|--|-------|

Parents, please do not write below this line. This is for your Family Support Coordinator to complete.

Materials given to parents: \_\_\_\_

PFCE – Family Engagement Framework Outcomes: Family Well Being Parent-Child Relationships

□ Families as Lifelong Educators □ Families as Learners □ Family Engagement in Transitions

Family Connections to Peer and Community
 Families as Advocates and Leaders

Family Partnership Agreement Follow-up Dates:

| August   | September | October | November | December | January |
|----------|-----------|---------|----------|----------|---------|
| February | March     | April   | May      | June     | July    |

Write goal updates on the back of this page and enter into ChildPlus.

| Staf | ff S | ignature: | <br>Date: |  |
|------|------|-----------|-----------|--|
|      |      |           |           |  |

## QUALLA BOUNDARY HEAD START AND EARLY HEAD START INCLEMENT WEATHER POLICY Hotline #: (828) 359-7047



QBHS/EHS will comply with the following Inclement Weather Policy and will remain open during inclement weather unless otherwise ordered to be closed by the Principal Chief. Parents are advised to call the Hotline for an inclement weather update. The Hotline update is normally posted at 6:30 a.m.

# IN THE EVENT OF SNOW/ INCLEMENT WEATHER, THE FOLLOWING STEPS WILL BE TAKEN:

ONLY THE CHIEF CAN AUTHORIZE ADMINISTRATIVE LEAVE FOR SNOW AND/OR ANY OTHER REASON.

When Cherokee Central Schools are operating on a schedule B or Closed, Dora Reed will operate as follows, unless otherwise directed by the Chief:

## ALL STAFF WILL REPORT TO WORK BY 9:15

THE CENTER WILL ACCEPT CHILDREN STARTING AT 9:30 TO 10:30. THERE WILL BE NO MORNING OR AFTERNOON BUS RUN. THERE WILL BE NO LATE CALL-IN'S AFTER 10:30AM

When the Tribe is operating on a schedule B, Dora Reed will operate as follows, unless otherwise directed by the Chief:

## ALL STAFF WILL REPORT TO WORK BY 9:15

THE CENTER WILL ACCEPT CHILDREN STARTING AT 9:30 TO 10:30. THERE WILL BE NO MORNING OR AFTERNOON BUS RUN.

# When the Tribe is operating on a schedule B then the Dora Reed and Big Cove Children's Centers will operate as follows, unless otherwise directed by the Chief:

If during a snow event, the Cherokee Central School System cancels classes and the school buses run, our school buses should operate similar schedules. This applies only to children who are bused to and from childcare. The center will remain open until the Chief grants administrative leave. Employees are responsible for making necessary arrangements for their children. Staff need to work with their supervisors for unusual circumstances.

Note: Please be aware if you report to work after the 1 hour start time, you will take annual leave or leave without pay if you have not communicated with your supervisor. Your end of the day schedule will remain as usual (if you are scheduled to leave at 3:30, you will do so). Staff not reporting to work will take annual leave. Employees are expected to inform their immediate supervisors if they cannot report to work due to unsafe conditions. When annual leave has been exhausted, employees will be placed on leave without pay.

## **RELEASE OF CHILDREN**

QBHS & EHS will ensure that children in our care are only released to those people authorized by the custodial parent/guardian in writing, and where the health and safety of the child is not placed in jeopardy.

- □ Any staff member who is unfamiliar with a person who is picking up the child is mandated to request photo identification to match it with the name listed on the emergency contact.
- □ If the parent wishes for someone who is not on the emergency contact to pick up a child from the center, they must provide a written note or email to their Family Support Coordinator. The family will then physically update their child's emergency contact form when they are able to reflect those changes. Staff will inform the parent that the person picking up the child will need to provide photo identification and will be stopped at the front desk. No verbal consent will be accepted to authorize a person not on the emergency contact to pick up the child.
- □ All current court documents must be on file. We are legally bound to follow the court documents on file.
- □ Emergency contact forms will be updated every three (3) months at minimum or whenever there is a change in information (phone numbers, etc.).
- □ Head Start staff will inspect backpacks to ensure the children's safety. No backpacks are allowed in Early Head Start. Please do not put medication or other items that are labeled "Keep out of reach of children" in backpacks.
  - □ Please do not send food or candy to school with your child. All children are served breakfast, lunch, and snack each day.
  - □ It is difficult for the staff to keep track of personal toys; therefore, we ask that you leave toys at home.
  - □ Please label you child's coats, hats, etc. This will help the staff to identify them easily. We cannot be responsible for lost items if they are not labeled.
  - □ We only provide babysitting for children enrolled at the center for parent meetings for the children enrolled in the program.
  - □ Staff are allowed to have cell phones in the building but should not have them out in a classroom. In the event of emergencies or if Administrative Leave is granted, staff will send out text messages to parents. All calls must come through the front office at 828-359-6592 or 359-6590 and if your child attends Big Cove, 828-359-3034.

## DROPPING CHILDREN OFF AND PICKING CHILDREN UP

- □ Parents must accompany children into the building upon arrival to the classroom. If you have multiple children and are needing assistance with dropping your children off or pick up, please give us a call at 828-359-6590. We will be happy to help!
  - Let a teacher know they have arrived and sign in
- □ Parents must also come into the building to pick up their children
  - $\circ$  Let the teacher know they are leaving and sign out
- □ When a child is signed out or picked up by the parent or guardian, the parent/guardian becomes responsible for the child even while on the premises. Please have control of your children in the building and in the parking lot for their safety and the safety of others.
- □ No one under the age of 18 will be allowed to pick up a child unless that person is the parent of the child and under 18.
- □ The child must be signed in/out using the parent/guardian's legal name on the sign in/out sheet for record keeping and safety regulations.
- □ We ask that our families pick up their child by 4:45pm. If your family is running late, please give the front office a call as soon as possible so we can make arrangements for your child until you arrive.

QBHS/EHS parents cannot leave children unsupervised in vehicles on these premises. Please be mindful of this when dropping off/picking up children at the center. Children are not to be left in the lobby or allowed to roam the hallways while a parent or guardian picks up a younger child from the center.

# **PEDESTRIAN SAFETY**



## TIP ONE: TRAVELING SAFELY IN A VEHICLE

- Every child needs a child safety seat, booster seat, or safety belt!
- Children 12 and under should ride properly restrained in back.
- EVERYONE in vehicle, regardless of age should have a seat belt on.

## TIP TWO: PLAY IT SAFE; WALKING SAFELY

• Supervise, Supervise, Supervise

• Parents and caregivers must watch toddlers and preschoolers closely when they are near

parked or moving vehicles.

• Hold your child's hand and always keep them near, when you walk together along the street.

## TIP THREE: GET THEM IN THE HABIT

- When walking, talk to your child about street safety.
- Show your child how to stop at the edge of the street and look for cars.

## TIP FOUR: SET AN EXAMPLE

• Young children learn by watching adults. Show them safe ways to cross streets.

# TIP FIVE: FIND SAFE PLACES TO STAY

• Keep children away from traffic. Fenced yards, parks, or playgrounds are good places for your child to ride and lay. When riding a bicycle or tricycle – THE SAFEST WAY TO RIDE IS WITH A HELMET.

## TIP SIX: SCHOOL BUSES ARE THE SAFEST WAY TO GET TO SCHOOL

Teach your child to get on and off the bus safely:

- Teach your child about the area on all sides of the bus known as the "Danger Zone."
- When getting on the bus stay away from the danger zone and wait for the driver's signal. Board the bus one at a time.
- BE ON TIME FOR THE BUS
- When getting off the bus, look before stepping off the bus to be sure no cars are passing on the shoulder (side of the road). Move away from the bus.
- Before crossing the street, take five giant steps out from the front of the bus, or until the driver's face can be seen. Wait for the driver to signal that it's safe to cross.

## TIP SEVEN: SAFETY STEPS YOU CAN TAKE WITH YOUR CHILD

- Supervise children to make sure they get to the stop on time, wait far away from the road.
- Teach your child to ask the driver or bus monitor for help if he/she drops something near the bus.
- Have your child use a backpack or book bag to keep loose items together.
- Make sure clothing and backpacks have no loose drawstrings or long straps, to get caught in the handrail or bus door.

# **CHILDREN'S CLOTHING**

Children are engaged in a variety of activities and experiences during the day, so children need to have an extra change of clothes and shoes daily in case they get dirty during the day. Please bring changes of clothes for your child and place them in their cubby for easy access. If your child comes home with a plastic bag of soiled clothes, please send in another change of clothes for the next day.

Please note that QBHS & EHS is not responsible for providing extra clothing for the children.

Please keep in mind the following when dressing your child for the day:

- □ Weather: please dress children in weather appropriate clothing. (Hats, coats and gloves for winter weather; jacket for rainy weather; bathing suit and water shoes for water play; shoes for outdoor play (these need to be ones which will stay on the child's feet, NO flip flops.) Children must have shoes on when they arrive for the day. Bare feet are unsafe and unacceptable.
- □ Messy/Fun Play: sometimes activities can get messy and might stain or ruin clothing so please send children in play clothing.
- □ **Potting Training:** remember to send multiple changes of clothes and an extra set of shoes if your child is in the beginning stages of potty training. While buckles, buttons, snaps, and ties are all good things to encourage your child's mastery of fine motor skills, they can hinder a child who is still struggling to master potty training. The easier the outfit comes off the better for the child in the beginning.
- □ Accidents: Please bring multiple sets of clothes daily in case of accidental spills, potty accidents, etc.



# **VOLUNTEER REQUIREMENTS**

If you wish to become a regular (frequent) volunteer, you will be required to have/do the following things:

- □ Be 13 years of age or older
- □ TB test
- Covid-19 Vaccine
- □ Background check
- □ Complete a Volunteer Application
- $\Box$  Go through an orientation
- $\Box$  Sign in and out at the receptionist's desk at each visit

You will be asked to use positive reinforcement with the children and to adhere to our discipline and behavior management policies. We cannot allow parents to use corporal punishment (spanking, etc.) on any child, even their own, while they volunteer.

\*As a volunteer, we kindly ask that you refrain from using your cellphone while on property. \*

The program has outlined the following as general requirements and responsibilities for all volunteers:

- □ Show emotional maturity when volunteering
- Demonstrate respect for children and adults
- □ Seek guidance from center staff
- □ Keep all information about children and families confidential



# PARENTS AS VOLUNTEERS

All parents/guardians of children enrolled at Dora Reed and Big Cove Children's Centers are encouraged to visit the center and volunteer as much as possible. The centers have an open-door policy, which enables parents/guardians to visit their children and volunteer in the center at any time.

Below are some examples of volunteer opportunities:

# □ In the Classroom

- Help teachers with children in the classroom during group time, center time, playground time, mealtime, etc. to carry out daily activities
- Present cultural activities to children
- Language volunteers to support our children who are dual language learners
- Assist teachers in the preparation of classroom materials. (i.e. clean toys, label items, organize classroom materials, prepare classroom displays for teachers.)
- Read stories to the children

# □ In the Office

- Assist with copying
- Assist with answering the phones
- Assist with filing
- Use computer for assigned tasks
- Assist with other duties as available

# □ In Maintenance

- Mowing and weed eating
- Maintain flower beds
- Assist with other duties as available

# □ In the Community

- Help recruit children for QBHS/EHS by telling others about our program
- Assist staff in posting flyers in the community
- $\circ$  Provide applications to parents of children aged 6 weeks 4 years of age

If you are interested in volunteering in one of these activities, please contact the outreach coordinator. QBHS/EHS and Big Cove have an open-door policy. You are welcome to visit our centers anytime.

Please sign in and sign out at the receptionist's desk and in the classroom.

# **VOLUNTEER IN-KIND**

According to the Head Start Act, QBHS/EHS is required annually to generate 20% of its funding from volunteer hours and donations. This is referred to as In-Kind. We rely on parents as well as community agencies to help us meet this federal grant requirement.

# **Donatable Items**

- Old newspapers and magazines
- Butter cups
- Dress up clothes for dramatic play areas
- Extra clothing in case of an "accident"

# Please contact the outreach coordinator before making donations.



# **DONATION DAY**

Every third Wednesday of the month, QBHS & EHS holds a Donation Day in which families can bring items from home that they are wishing to donate. On Donation Day, everyone can look around and take any donations that they may need for FREE!

# IF YOU PLAN TO DONATE, PLEASE TAKE NOTE:

- If you donate clothing, please wash and dry it prior to drop off day.
- If you donate clothing, please no stains, rips, or holes.
- Please sanitize items that cannot be washed.

|   | Examples of items to donate   | <u>?:</u>  |
|---|---|--|
| <ul> <li>Children's Clothing</li> <li>Adult Clothes</li> <li>Household Items</li> </ul> | <ul><li>Craft Supplies</li><li>Toys</li><li>Baby Supplies</li></ul> | <ul><li>Shoes</li><li>Handbags</li><li>School Supplies</li></ul> |

We ask that families drop off donations in the Multipurpose Room of DRC the day before the scheduled Donation Day. QBHS & EHS Staff work to display the donations the day prior to Donation Day so families have easy access and can take what they need on the day of the event.



# QUALLA BOUNDARY HEAD START/EARLY HEAD START COMMUNITY PANTRY

The QBHS & EHS Community Pantry was established outside of the Dora Reed Children's Center in March of 2023. This community resource houses non-perishable food items, hygiene items such as shampoo, toothbrushes and toothpaste, tampons and pads, and other necessities.

The QBHS & EHS Community Pantry is open and available to all who are in need of the items listed above. The Community Pantry will be open 24/7 to provide ease of access for all.



# PARENT COMMITTEE MEETINGS

A parent at Qualla Boundary Head Start/Early Head Start is defined as a child's mother or father, other family member who is a primary caregiver, foster parent, guardian, or the person with whom the child has been placed. Parent Committees meet once a month from August through July and are referred to as parent meetings. Parent Committees are established at the center level.

There will be a parent meeting held in August which will allow parents to elect officers for the upcoming school year and select their representative(s) to the Parent Committee and Policy Council. Officers include Chairperson, Vice-Chairperson, Secretary and Treasurer.

If voting yields low participation, another vote will be submitted by ballot until the positions are filled. The positions of office need to be filled by no later than early September. Once the positions are filled, orientation will follow.

The three main functions of the Parent Committees (meetings) are:

- 1. Participate in the governance of the QBHS/EHS classroom and program by:
  - a. Attending and supporting the Parent Committee meetings
  - b. Serving as elected member of the Parent Committee
  - c. Electing representative(s) to the Policy Council per the established guidelines
  - d. Upholding and updating Parent Committee Bylaws on an annual basis
- 2. Facilitate and oversee parent committee events and fundraisers.
- 3. Plan, conduct and participate in informal as well as formal programs and activities for parents and staff.

Babysitting for children enrolled in QBHS/EHS is available for Parent Meetings.



## PARENT COMMITTEE BYLAWS

I. Name of Organization: The name of this organization shall be Qualla Boundary Head Start Parent Committee.
II. Purpose: The purpose shall be to implement their ideas and suggestions and advise the staff of their Children's classroom activities and services. They will plan, organize, and participate in activities for parents and staff.
A. All ideas and suggestions will be submitted by the Policy Council for prior approval before implementation.
B. Advocate for Head Start through communication with other parents and community persons and organizations.

### III. Plan and implement fundraisers and expanders of funds raised.

A. All fundraisers and expanders will be submitted to the Policy Council for prior approval before implementation.

B. Money will always be counted under a camera and with two people from the Parent Committee present.

C. When the end of the year school trip is decided on the Parent Committee will pay for the enrolled children of the Qualla Boundary Head Start/Early Head Start and Big Cove Children's Center.

**IV.** We will elect and seat officers of the Parent Committee on Orientations night. At this point we will determine a date and time for the monthly meeting. Then they will conduct a monthly meeting to discuss the necessary goals that need to be achieved throughout the year.

A. All persons elected to the committee must be a family member. Staff members of QBHS/EHS or The Big Cove Children's Center are not permitted to hold a Treasurer position.

B. The parent Committee will be established at the center level.

#### a. Chairperson

1. Call the meeting to order and preside throughout the meeting.

- 2. Announce each item of business on the agenda in the proper order.
- 3. Recognize members seeking the floor to purpose motions and to debate.
- 4. Remain fair and impartial during the business proceedings.
- 5. State each motion pending clearly.
- 6. Put the questions to a vote after enough debate.
- 7. Announce the results of the vote and the action as a result of the vote.
- 8. Vacate the chair to speak in debate on a motion.

9. Expedite the business meeting using general consent.

10. Assist the members in parliamentary procedure when necessary.

11. Make decisions on points of order and appeals.

12. Declare a motion out of order as "dilatory" when made to obstruct or delay the business proceeding.

#### b. Vice-Chairman

1. Substitute for Chairman when he/she is absent or vacates the chair.

2. Serve on committees or coordinate activities.

3. Generally assist the Chairman, as directed.

4. A Vice-Chairman never changes or modifies rules made by the Chairman when he is acting for a long period of time in the place of the Chairman.

5. A Vice-Chairman cannot fill vacancies where the by-laws state that such vacancies shall be filled by the Chairman.

6. A Vice-Chairman automatically becomes Chairman when the Chairman resigns or dies. If for some reason the Vice-Chairman does not wish to assume this office; he must resign the office of the Vice-Chairman.

#### c. Secretary/Treasurer

- 1. Takes minutes at the Parent Committee and is responsible for mailing a copy to Parent/Volunteer Coordinator.
- 2. Works with Vice-Chairman in keeping central office informed on local activities of parents.
- 3. Works with Vice-Chairman in keeping parents informed as to meeting time and places.
- 4. Report what funds are available at the monthly Parent Committee meeting.
- 5. Treasurer is responsible for all money (cash and checks)
- 6. We will have cash and checks only. No debit cards will be ordered.

7. When the money is counted onsite only the Treasurer and one other person on the Parent Committee and/or Admin staff must be present.

8. Any time a check is needed for a transaction, the Treasurer will need to be present along with whomever the parent committee has voted to help the Treasurer.

9. Money leaving the building needs to be signed off on by both the Treasurer and person voted on to hold office.

10. Any fraudulent misuse of the Parent Committee funds will be prosecuted.

**d.** Any person not present for two consecutive meetings, without contacting with the committee as to a reasonable reason, can and will be replaced.

#### PARENT CODE OF CONDUCT WILL BE ENFORCED

# QUALLA BOUNDARY HEAD START & EARLY HEAD START POLICY COUNCIL

QBHS/EHS Policy Council is made up of parents and representatives of the community. Some community agencies that serve clients with needs similar to Head Start families have also selected a representative to serve on the Policy Council. Elected representatives serve a one-year term, from August to August and no member may serve more than 5 terms (decided by program). No QBHS/EHS or PHHS employees, or members of their immediate families, may serve on Policy Council.

Policy Council meetings are held monthly. Refreshments are provided at the meetings.

The direct functions of the Policy Council are:

- 1. Serve as a link to the Parent Committees, grantee governing body, public and private organizations, and the communities they serve.
- 2. Assist Parent Committees in communicating with parents enrolled in all program options to ensure they understand their rights, responsibilities, and opportunities in Head Start and to encourage participation in the program.
- 3. Assist Parent Committees in planning, coordinating, and organizing program activities for parents with staff assistance and ensuring that funds set aside from program budgets are used to support parent activities.
- 4. Assist in recruiting volunteer services from parents, community residents and community organizations and assist in the mobilization of community resources to meet identified needs.
- 5. Establish and maintain procedures for working with the grantee or delegate agency to resolve community complaints about the program.

# The Policy Council (PC) is a very busy group of dedicated people and are not responsible for monitoring day-to-day operations at the center.

We encourage parents to attend the monthly center parent meetings. Your Policy Council members will be on hand to report important Policy Council business to the group.

If you have any questions regarding what took place in the Policy Council meeting, please feel free to ask you Policy Council representative during the parent meetings.

\*\*A mandatory training is required and will be conducted during a parent meeting in August. \*\*

# FAMILY SERVICES

QBHS/EHS has Family Support Coordinators (FCP) on site. The support coordinators inform families of the resources that are available in our community and will assist them in accessing needed services. They provide support to families in dealing with everyday stress as well as emergency situations. Our goal is to build upon each family's individual strengths and to meet their identified needs.

Every family enrolled in QBHS/EHS is assigned a Family Support Coordinator who will:

- □ Support families in setting and reaching goals and overcoming challenges through the Family Partnership Agreement and Family Outcomes Assessment.
- □ Inform families of community resources and how to access them. Family Support issues an annual Family Resource Guide that outlines community resources.
- □ Encourage families to volunteer in the program.
- □ Assist families in crisis or emergency situations.
- □ Help families learn about nutrition, good health, appropriate childhood development & more.
- □ Inform families about parent involvement, volunteer, and employment opportunities at our center and community wide.
- □ Facilitate Donation Day monthly for the community.
- □ Facilitate activities for families monthly through social media outlets and on-site.
- $\Box$  Work with the family on attendance
- □ Provide resources for adult education
- □ Provide information about early childhood development by utilizing the Early Learning Outcomes Framework (ELOF) and the parenting curriculum, Parents as Teachers.

Candy Ross 359 -2203







Amanda Bradley 359-2204 Sarah Beck 359-3002







# CONFIDENTIALITY

Confidentiality is every Head Start and Early Head Start staff, parent, and volunteer's responsibility. All family information and children's files are kept strictly confidential. Only authorized Head Start personnel have access to files. QBHS/EHS is obligated to receive written consent from parents, prior to sharing information with anyone.

- □ Maintaining confidentiality/privacy of personal information shared with the QBHS/EHS program for the purpose of serving children is of utmost importance.
- □ All child/family files are kept in locked cabinets.
- □ If a child is injured or hurt on the property, QBHS & EHS has policies and procedures in place to protect the confidentiality of the parties involved.
- □ Due to the nature of the federal grant, files are available to the Grantee Agency, Qualla Boundary Head Start/Early Head Start staff, and the parents of the child's file.
- □ Parents/Guardians can view their child's file by asking the Early Education Director, FCP Manager, Education Curriculum Manager, or their child's teacher.



# COURT AND CUSTODY ORDERS

State law maintains that both parents have access to their child unless there are legal documents, which defines the restrictions. In situations involving child custody disputes or restraining orders, a copy of the court order will be given to the following people:

- 1. The Early Education Director
- 2. The Family Services Manager
- 3. The Education Manager
- 4. The Child's Family Support Coordinator
- 5. The Classroom Teacher
- 6. The Receptionist at the front desk
- 7. The Family Social Worker

The information will be kept in your child's file for quick reference. We cannot prohibit contact with either parent without current court orders. In the event of shared custody, both parents must provide emergency contact information to the center. It is the responsibility of the custodial parent/guardian to provide the center with <u>current copy</u> of the custody papers.

When legal custody papers are on file at the center, a non-custodial parent must have the permission of the custodial parent/guardian to pick up their child. QBHS/EHS staff are not to release any child to anyone who is not authorized to pick up the child by the custodial parent/guardian.

Any staff member who is unfamiliar with a person who is picking up the child, is mandated to request photo identification to match it with the name listed on the emergency contact information. If a non-custodial parent forcibly removes a child from the center, the staff will immediately inform the custodial parent/guardian and the police.

Please remember that children with custody documents will not be allowed to attend school until the teacher and center director understand the custody arrangement correctly from all parties.

Unless QBHS & EHS has court documentation stating otherwise, a child's biological parent, who is stated on the birth certificate, has full access to their child's records and to pick them up from the center regardless of what's stated on the emergency contact form.

QBHS & EHS will provide a meeting space for visitation between Family Safety and other local entities for children and families enrolled in the program.

## MANDATED REPORTING

North Carolina Law requires any person who may suspect that a child, an individual under the age of 18, is being subjected to abuse or neglect, report their concerns to the local department of social services (DSS). Reports of abuse and/or neglect are to be made when it's suspected that a child is being mistreated. Any individual or institution who is aware and fails to report concerns to the local DSS is guilty of a Class 1 misdemeanor in the state of NC.

## What is child neglect?

- Neglect is when proper care, supervision, or discipline from the child's parent, guardian, custodian, caretaker, is not being provided
- Neglect is when a child has been abandoned
- Neglect is when necessary medical care is not being provided to the child
- Neglect is when a child lives in an environment that is harmful or could cause injury

## What is child abuse?

- Abuse is when serious physical harm is inflicted on a child
- Abuse is when a child is put into an environment in which serious physical injury could occur
- Abuse is when a child is subjected to cruel procedures or devices to modify behavior
- Abuse is when a child is subjected to an individual or environment that could create emotional damage

# If you suspect a child is being mistreated, contact the local Department of Social Services.

| Family Safety - EBCI      |
|---------------------------|
| 828-359-1520              |
| 117 John Crowe Hill Drive |
| Cherokee, NC 28719        |

Jackson County DSS 828-586-5546 15 Griffin Street Sylva, NC 28779 Swain County DSS

828- 488-6921 80 Academy Street Bryson City, NC 28713

N.C. Duty to report abuse, neglect, dependency, or death due to maltreatment. G.S 7B-301. 2016

Moore, J. NC Laws Mandatory Reporting Laws. UNC School of Government. www.ncpublichealth.com. 2018

## **EXCLUSION AND RE-ADMISSION**

- 1. The following illnesses will require exclusion from the program, the parent/caregiver must pick up the child immediately:
  - a. Fever: Temperature of 101 degrees Fahrenheit or higher by tympanic (ear). If a child has a fever of 101 or above, the child will be sent home for 24 hours or until the temperature is normal without the use of fever reducing medications.
  - b. Signs of possible severe illness: Including, but not limited to lethargy, irritability, persistent crying, or difficulty breathing. Children may return once medical evaluation allows inclusion.
  - c. Diarrhea: any child who has had two loose or watery stools or one loose stool and other symptoms or a change in behavior. Child may not return until diarrhea free for 24 hours.
    - 1. Child's medication will determine status of exclusion or going home.
  - d. Vomiting: Any child who has vomited and has other symptoms or a change in behavior. Child may not return until he or she has not vomited for 24 hours.
  - e. Mouth Sores: With drooling, unless a health care provider has determined the condition to be non-communicable and the child is not in danger or dehydration.
  - f. Rash: If a child has a rash accompanied by a fever or the rash is spreading rapidly. The child cannot return until a health care provider states that the rash is non-communicable.
  - g. Ringworm: The child will be sent home and cannot return until they have received treatment for at least 24 hours.
    - 1. Scalp ringworm involves treatment with oral medications and may take 2-5 days to become non-contagious.
  - h. Infestation: (Scabies, head lice, bedbugs... etc.) The child must be treated with a recognized treatment. The child cannot return until after treatment and the child is bug free. Scabies requires 24 hours of treatment before the child can return. Please inform your child's teacher if your child has been diagnosed
    - 1. Head Lice. Children will be checked by 2 QBHS/EHS staff members to make sure the child is nit/lice free.
    - 2. Child's hair must be loose/down (i.e. not in a ponytail), dry and the child must cooperate with the staff performing the check.
    - 3. Parent must be present during the re-admittance check.
  - i. Varicella (Chickenpox): Child will be sent home at the onset of rash or fever. Child will not be allowed to return until 6 days after the onset of rash or until all lesions have dried up.
  - j. Pertussis (Whooping Cough): Child is diagnosed with pertussis or has suspected symptoms. Child cannot return to the program until 5 days after he or she has completed the appropriate antibiotic treatment or until a medical evaluation allows inclusion.
  - k. Mumps: Child will be sent home at onset of fever and will not be allowed to return until 9 days after the onset of swelling.

- 1. Measles: The child will be sent home. The PHHS epidemiologist will provide guidance about exclusion and disinfection.
- m. Sore Throat accompanied by fever: child will be sent home and the child cannot return for 24 hours after treatment begins and the child's temperature is normal for 24 hours.
- n. Severe Coughing causing the child to become red or blue in the face or making whooping sound: Child will be sent home until a medical evaluation allows inclusion.
- o. Difficult or rapid breathing: Child will be sent home until a medication evaluation allows inclusion
- p. Impetigo: Child will be sent home and can return after 24 hours of antibiotic treatment
- q. Purulent Conjunctivitis (Pink Eye): Child as pink eye or red conjunctivitis with white or yellow discharge. Child cannot return to program until 24 hours of antibiotic treatment or medical diagnosis rule out bacterial infection.
- r. Open Sores: Open sores that are actively draining and cannot be contained: The child will be sent home and cannot return to program until 24 hours of antibiotic treatment and sores draining can be contained.
- s. Persistent Anal Itching: Child will be sent home and will not be able to return until a medical evaluation allows inclusion.
- t. Any infectious illness defined in the North Carolina Health Communicable Disease Ch



# LICE POLICY

In accordance with the American Academy of Pediatrics, and the recommendation from the Office of Head Start, QBHS/EHS will temporarily exclude children in the presence of active lice infestations only. Active infestations can be defined as the presence of **live** lice or presence of **new** nits found within <sup>1</sup>/<sub>4</sub> inch of the scalp. Nits that are found more than <sup>1</sup>/<sub>4</sub> inch from the base of the hair shaft are almost always non-viable (hatched or dead).

# **Procedure:**

# If a case of head lice is suspected the following will occur:

1. A QBHS/EHS staff member should check child for head lice. If live lice or new nits not previously detected are seen, the staff member should then ask another staff member to verify presence of **live** lice and/or **new** nits. There should be documentation of the presence of **live** lice and/or **new** nits. (taped on paper, observed by supervisor, etc.)

2. Lice checks should always be performed in manner that does not embarrass or cause distress to the child or parent. If possible, checks should be done in an area away from other children and parents (i.e.: supervisor's office, bathroom, nurses office, etc.).

3. A staff member of QBHS/EHS should call the parent and notify them of the presence of head lice and the procedures to follow.

4. Immediate removal of the child with new or previously treated nits is unnecessary. If a child has lice, they have likely been infested for weeks and immediate removal of the child from the classroom could lead to embarrassment and ridicule. Children with <u>new nits only</u> can be sent home at the end of the day. However, new nits must be treated before the child can return to school.

5. If the child has <u>live</u> lice, they should be sent home until treated with a pediculicide (lice shampoo). QBHS/EHS will assist parents (if necessary) in providing resources for treatment, including lice shampoo, combs, and educational materials.

# Sanitation:

1. Any personal items in the classroom the child may have had contact with such as hats, brushes, blankets, or cot sheets, will need to be laundered/sanitized.

# 2. Cleaning:

- Vacuum all floors, and upholstered furniture. Rugs should be shampooed.
- Play clothing, linens, smocks, and cloth toys/stuffed animals worn

or handled by an infested individual should be washed in water hotter than 130°F, or machine dried at the highest heat setting for at least 30 minutes.

- Shared headgear, helmets, and/or headphones should be cleaned and disinfected with Lysol or rubbing alcohol before being issued to other students.
- Items that cannot be laundered or sanitized may be sealed in a plastic bag for 14 days at room temperature or 24 hours in below freezing temperatures.

These tasks need to be completed on the same day lice is detected in order to be effective.

# **Readmittance:**

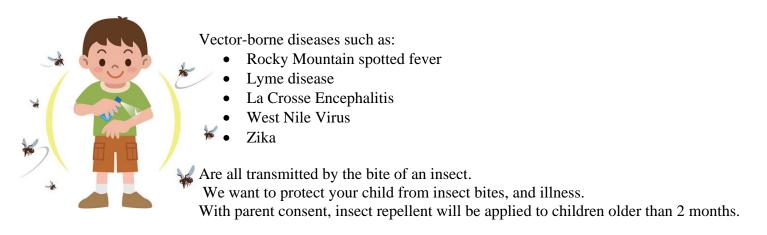
1. Upon arrival, the child should be checked by (2) QBHS/EHS staff members, (while parent/guardian is present) for the presence of **live** lice. The child will be readmitted to school if no **live** lice are present, and they have been treated with pediculicide (lice shampoo).

If non-compliance with recommended treatment is suspected QBHS/EHS, may require parent to provide "proof" of treatment i.e.: bringing in shampoo bottles, note from medical provider, etc.

2. Children with nits more than a <sup>1</sup>/<sub>4</sub> inch from the scalp or nits that have been previously treated in the last 10 days should **not** be excluded. Parents should be advised to remove the dead nits. Children should **not** be retreated with pediculicide until 7-10 days from initial treatment. If after two treatments live lice remain, parents should consult with their health care provider regarding treatment options.

3. All students in the classroom **should not** be checked unless unusual circumstances warrant it, or they are exhibiting symptoms of lice (i.e.: scratching). Current evidence does not support this practice and doing so can cause more harm than good given the psychological impact lice may have on a child.

# USE OF BUG SPRAY AND SUNSCREEN



The repellent we use will only contain a maximum of 30% DEET.

To prevent over exposure to harmful UV rays, Sunblock with a SPF of 30 or greater will be applied to children over 6 months of age with parents' permission.

## **MEDICATION/ACTION PLANS**

- 1. The only medications that will be administered by Qualla Boundary Head Start/Early Head Start are emergency medications that cannot be given at home.
- 2. Upon entry into the program the Health Manager with assistance from the child's Family Support Coordinator will ensure children with allergies and/ or asthma have a medical action plan on file before the child starts.
- 3. The Health Manager will review the documentation with the family and child's Family Support Coordinator to ensure all documents are correctly filled out.
- 4. The Health Manager will inform the child's teacher about the child's allergies/asthma before the child's start date and provide them with a copy of the medical action plan.
- 5. The teacher will review the Medical Action plan with the parent and ensure there is separate medication administration form for EACH medication listed on the medical action plan. The medication administration form provides specifies the conditions for the administration of medication and the parent's consent for medication.
  - a. The exact name of the medication listed on the medical action plan must be on the medication that is given to the classroom.
- 6. The Health Manager or local childcare consultant will provide the center with medication administration training annually during pre-service and or in-service.
- 7. Only trained staff members will administer emergency medication and will be responsible for keeping documentation of the date, amount, route, and time the emergency medication was given on the Permission to Administer Medication Form.
- 8. Medication administration permission forms need to be updated every six (6) months; action plans are good for one (1) year.
- 9. Once an emergency medication expires the teacher will send home the medications with the child when the parent picks the child up and will have them sign the medication administration form starting that the medication was sent home with the child.

## ALLERGENS AND ALLERGIC REACTIONS

- 1. The parent will indicate on the child's application for enrollment when a child has an allergy.
- 2. A Doctor's note and Medical Action Plan will be required before a child attends. A child will not be allowed to attend without a Medical Action Plan.
- 3. The Health Manager will coordinate training for all staff regarding specific allergens in the center annually, or as needed. The staff will be provided the following trainings:
  - a. The staff will be provided guidance on how to deal with situations when a reaction occurs (i.e. How to use an Epi-Pen, how to use inhalers, what to do with bee stings, or how to handle food and/or environmental allergies).
  - b. The Health Manager will provide training to all staff and implement a standard storage location for emergency medications.
    - i. Emergency Medications are to be placed in the green emergency bags and are to be hung on the side of the first aid kits and taken with the child when the child leaves the room.
- 4. New Hire Orientation will consist of regulations on medication administration and the maintaining of written documentation.
- 5. The Health Manager will conduct monthly classroom checks to ensure rescue medications are stored properly in an unlocked cabinet. If a concern is identified during the monthly check, the following will occur:
  - a. A staff contact sheet will be written and the staff will be required to sign acknowledging the correction to be made. The Health Manager will provide the teachers supervisor with the findings. The Health Manager will follow-up the next day to ensure the correction has been made.
- 6. The Health Manager will provide all staff, classrooms and kitchen with allergy lists at the beginning of each month and as changes occur. As changes occur, the Health Manager will immediately update the staff where the children are assigned, the kitchen, and all Managers. All changes will require a doctor's statement.
- 7. Each classroom that has a child with food allergies will have a **RED** stop sign posted outside the classroom door to alert any staff member who may be required to substitute in a classroom.
- 8. All Allergy lists are located on the inside of the wall cabinet of all classrooms. A Food and Medication Allergy label is posted on the outside of the cabinet door to identify allergy lists and Medical Action Plans.

- 9. All Rescue Medications will be stored in a clear plastic bag labeled with the child's name.
- 10. Medical Action Plans and Medication Administration Forms will remain with emergency medications in a clear Ziploc bag labeled with the child's name.
- 11. The Sheet Protector containing the Medical Action Plan and Medication Administration Form will have a picture of the child on the front along with their name.
  - a. The Teacher will take the Emergency Medications and Medical Action Plans with them whenever they leave the classroom.

# ANAPHYLAXIS

Anaphylaxis (severe allergic reaction that is life threatening):

- 1. A staff member will call EMS if the child has been exposed to a food, insect sting, medication, or other substance that has triggered a severe reaction in the past.
- 2. A staff member will call EMS if they observe symptoms of a serious reaction (anaphylaxis), such as:
  - a. Rash of hives on the body
  - b. Itching, including the mouth
  - c. Swelling of the face lips, tongue, or throat
  - d. Swelling of the body part where the sting or bite occurred (more than minor swelling)
  - e. Difficulty swallowing or speaking
  - f. Dizziness, unexplained confusion, fainting, or loss of consciousness
  - g. Breathing Problems (shortness of breath, wheezing or coughing)
  - h. Abdominal pain, nausea, vomiting or other sudden illness
- 3. Be prepared to administer rescue breathing if necessary while waiting on EMS personnel to arrive. Refer to CPR training.
- 4. A child who has had a previous severe reaction may have a doctor prescribed auto injector of epinephrine (such as Epi-Pen Jr or Twinject). Injectable epinephrine should be administered only if prescribed for that child by a physician, and the situation is life threatening.
  - a. The following procedure will be followed when administering an Epi-Pen:
    - 1. Epinephrine should not be used unless prescribed by the child's physician.
    - 2. If prescribed, the Epi-pen (auto injector) must be kept near the child at all times.
    - 3. Store the Epi-Pen at room temperature in a safe, dry place. Check expiration date frequently.
    - 4. Caregivers must be trained by medical personnel in the correct use of the Epi-Pen
  - b. Mild allergic reactions may include redness of skin, itching, stuffy or runny nose, sneezing, and itchy or watery eyes.
    - B. If possible, remove the allergy or irritant
      - 1. If the trigger is environmental (such as a perfume or smoke) remove the child from the area.
      - 2. If the reaction is caused by skin contact with a substance, wash the child's skin with warm, soapy water.
      - 3. Observe the child for symptoms of serious allergic reaction.
      - 4. Refer to the child's medical record for information about previous allergic reactions.

- 5. If the child has a prescribed health care plan, follow those instructions.
  - a. Call EMS if the child has been exposed to a food, insect sting, medication, or other substance that has triggered a severe reaction in the past.
  - b. A child who has had a previous severe reaction may have a doctor-prescribed Epi-Pen. (See anaphylaxis section for information on injectable epinephrine).
  - c. Contact the child's parent and recommend medical attention.
  - d. Parents should notify the child's doctor of any reaction, especially a reaction to medication. The next exposure to the substance might result in a more severe reaction.
  - e. Continue to observe the child for symptoms of serious allergic reaction, including breathing problems or shock.
- 5. In the case of an allergic reaction, the following medication administration may be followed in accordance with the child's individual Medical Action Plan.

\*\* Each classroom is supplied with a Quick Guide for Medical Emergencies in Early Childhood Settings. The Quick Guide will serve as a quick reference if an emergency/incident occurs while children are involved in an activity. \*\*

## **NUTRITION**

The Program provides food necessary for a well-balanced diet. Breakfast, lunch, and snack is served to each child daily. Please do not bring outside food or drinks into the classroom for your child as this causes a disruption. Menus are posted in each classroom. Staff members eat meals with the children to promote conversation and to teach them to enjoy a wide variety of nutritious foods. Parents are invited to eat lunch with their child.

Any special diet needs such as overweight, underweight, or food allergies will be addressed by the child's physician, staff, and parent(s) and will be accommodated as needed. The Meal Modification Form and Food Allergy Action Plan will be completed by a physician for children with food allergies.

Our menu is reviewed and approved by a local dietician. We ask that no outside food is brought in unless approved by your child's physician.

For more information on the Child and Adult Care Food Program (CACFP), please visit: <u>https://www.fns.usda.gov/cacfp</u>



# PROGRAM MEALTIME APPROACH



1. Children are to be given increasing opportunities to assist in food table preparation. Place settings should be complete with an adult assisting the table setters.

2. Adults are to be evenly distributed among the children to allow for maximum supervision and assistance as needed, at least one adult per table when adult/child ratio permits.

- 3. Adults need to provide appropriate modeling for children. Avoid doing things you are asking the children not to do. Example: reaching, talking between tables, interrupting, etc.
- 4. Food is served individually.
- 5. Encourage good table manners. For example, "Please pass the vegetables." Encourage children to use their napkin.
- 6. Children are not forced to eat. They are encouraged to try the food being served. Most often the less said about uneaten food, the more it will be eaten. No food or beverage is to be used as a reward or as a punishment.
- 7. While "seconds" are allowable we suggest the children try a variety of foods instead of only one certain item.
- 8. Milk is available throughout each meal, but not to the exclusion of food.
- 9. Adults can do much to promote pleasant table conversation. This can be an easy opportunity for nutrition education, concept building, and development of essential social skills. During mealtime show your enthusiasm for healthy foods, spend time in positive conversation and make mealtime relaxed. Children will learn self-help skills as well as new vocabulary, taking turns, and sharing.

# SCREENINGS

Head Start/Early Head Start offers the following screenings:

- ✓ Vision
- ✓ Hearing
- ✓ Developmental
- ✓ Dental
- ✓ Growth-Height & Weight
- ✓ Mental Wellness
- ✓ Nutrition



### **SPECIAL NEEDS**

Young children vary in their skills, knowledge, backgrounds, and abilities. Effective teaching requires individualized teaching and changes to learn for all children to access, participate, and thrive in early learning settings. Individualizing for children who need more support, helps ensure effective teaching for children with disabilities and other special needs across all Head Start Early Learning Outcomes Framework domains. Using children's Individualized Family Service Plan (IFSP) and Individualized Education Plan (IEP) goals is part of effective teaching, individualizing, and creating inclusive environments to support children's positive outcomes.



#### **EDUCATIONAL SERVICES**

QBHS & EHS utilizes The Creative Curriculum. Our program strives to increase every child's knowledge of the Cherokee culture by introducing the language, including cultural foods on the menu and inviting Cherokee elders and craftsmen to the classrooms to share their skills with the children. Children participate in indoor and outdoor play, music, art, language, literacy, math, science, social/emotional, nutrition, physical health and pedestrian safety activities. They are encouraged to express their feelings, to develop good feelings about themselves and to get along with others.

- □ Each child receives a developmental screening and assessment at the beginning of their enrollment. This screening allows the teachers to design the curriculum to meet the individual needs of each student and the classroom as a whole.
- □ The screening results are shared with the parent at home visits and parent teacher conferences throughout the year.
- □ A developmental assessment is conducted at the end of each year to show parents and staff the progress that has been made by each child.
- □ A variety of learning experiences are planned to foster intellectual, social and emotional growth and to promote child outcomes.

For more information regarding Creative Curriculum, please visit this website: <u>https://teachingstrategies.com/solutions/teach/preschool/</u>

# **BOOK CLUB**



Reading to your child is one of the most important things you can do as a parent. The simple and enjoyable act of sharing books helps your child learn early literacy skills such as developing a bigger vocabulary and storytelling.

Reading together every day helps your child to develop healthy reading habits and strengthens the bond between you

and your child. Your example helps show your child that reading is important, pleasurable, and valued.

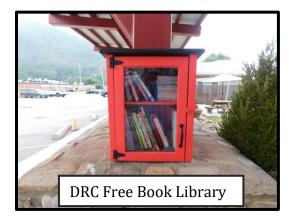
If you read one book a day for one year, you will have read 365 books. If you read one book per day for three years, you will have read 1,095 books.

# Join the Book Club!

The book club program is a fun and free way to help your child on the path toward learning to read! Just follow these steps:

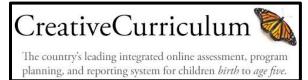
<u>Reading Log</u>: write down each book that you read with your child along with the date. Every book counts, even the ones you read over and over and over.

<u>Milestones</u>: Each time you read 100 books (and the first 50), bring your reading log to the literacy center to receive a certificate, goody bag and book! Your child will receive a star on the book club wall and will continue to move up for each 100 books read. You can aim for 1,000 books before kindergarten!





# THE CREATIVE CURRICULUM



Our program utilizes The Creative Curriculum for Preschool, a comprehensive, research-based curriculum, which features explorative and discovery as a way of learning, enabling children to develop confidence, creativity, and lifelong critical-thinking skills. We have chosen this curriculum because it focuses on the skills and knowledge that are most important for helping your child to be successful in school. Throughout the year, The Creative Curriculum for Preschool will help us plan learning experiences that are just right for your child, so that he or she can make progress at his or her own pace.

So, how does The Creative Curriculum for Preschool support your child's learning? It is based on 38 objectives for development and learning that focuses on all the areas that are most important for school success: social-emotional, cognitive, math, literacy, physical, language, social studies, science and technology, and the arts. These objectives are built into every activity and happens in the classroom, which means that all day long, the teacher is helping your child build skills and knowledge in these important areas.

In The Creative Curriculum for Preschool, learning happens through studies. Studies which span several weeks, are in-depth, project-based investigations of topics that are part of your child's everyday life. They feature topics like trees, building, clothes, and balls. In a study, children raise questions about the topics and find answers by exploring, experimenting, and investigating in a hands-on way through activities that take place in the classroom and outdoors. Through studies, your child will learn important math, literacy, science, and other skills.

The Creative Curriculum for Preschool also has support, built into every experience, for children who are English-language learners and children who have special needs. This helps to ensure that every child can participate in classroom activities and can be successful. There are also opportunities for families to become involved in what is happening in the classroom. Your child's teacher will let you know about the different ways you can be part of these learning experiences. We hope that you'll participate whenever possible and help to build the important connection between home and school.

We look forward to sharing more information with you as the year continues. We're sure that with the help of The Creative Curriculum for Preschool, this is going to be a great year even though we may be doing things a little differently.

The Education Team of Qualla Boundary Head Start & Early Head Start

# **DEVELOPMENTAL ASSESSMENTS**

Qualla Boundary Head Start & Early Head Start teaching staff are required to complete observations and assessments to track individual children's developmental progress and school readiness. The assessment tool used is a research-based tool called Teaching Strategies Gold (TS Gold) and coincides with Creative Curriculum. Assessments will be completed three times a year following the dates set in the educational calendar and reviewed with parents. The Data Specialist will generate the following outcome data for each assessment:

- a. Graph for families of child's progress.
- b. Individual child outcomes based on the widely held developmental expectations within TS Gold.
- c. Classroom outcomes based on the widely held developmental expectations within TS Gold.
- d. Program wide outcomes based on the widely held developmental expectations within TS Gold.

Data outcomes for the classroom and center will be posted throughout the center and in each classroom for staff and parents to view.

# **TS Gold Data Check Points**

Check Point 1: 11/30/2023

Check Point 2: 2/29/2024

Check Point 3: 5/31/2024

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|  | 31. Explores change related to familiar people or places   |
|  | 32. Demonstrates simple geographic knowledge   |
|  | THE ARTS   |
|  | 23 Evolutional acts  |
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|  | 34. Explores musical concepts and expression   |
|  | 35. Explores dance and movement concepts   |
|  | 36. Explores drama through actions and language  |
|  | ENGLISH LANGUAGE ACQUISITION   |
|  | 37. Demonstrates progress in listening to and understanding  |
|  |  |
|  | 38. Demonstrates progress in speaking English  |
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# CHILD ASSESSMENT/DEVELOPMENTAL CHECKPOINTS

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#### HEAD START TO PRE-K AND KINDERGARTEN



Every effort will be made to provide parents and children a smooth transition from Early Head Start to Head Start and from Head Start to Pre-K/Kindergarten. The Transition Coordinator, Center Supervisors/Lead Teachers, Teachers, and Family Support Coordinators will work with children and families in preparing the child to enter Head Start, Pre-K, or Kindergarten.

The teachers will help facilitate that transition by preparing your child throughout the year for the move. Children transitioning from Early Head Start to Head Start will begin visiting Head Start classrooms six months prior to turning three years old to familiarize them with the new classroom routines/setting and to meet the teachers. Activities in the classroom will include reading books on transition, role-playing, and discussions about the transition. Parents are encouraged to visit the Head Start classrooms with their child.

Parents will be provided with information to prepare them to exercise their rights and responsibilities concerning the education of their children in the school setting to promote the continued involvement of Head Start parents in their child's education. We will host a Kindergarten night where parents will have the opportunity to meet local Kindergarten teachers to ask questions and receive information.

A survey will be sent out to all parents of children transitioning into kindergarten to learn which local school the child will be attending. Kindergarten tours are scheduled for local Kindergarten classrooms, including Smoky Mountain, Swain East, and Cherokee Elementary schools. They will be transported by a Head Start bus to the school of the parent's choice. Parents are encouraged to meet their child at the school.

Letters/flyers will be sent home by the Transition Coordinator informing parents of registration dates, documents needed for Head Start, Pre-K or Kindergarten registration and any additional information that is needed by Head Start or the local school system.

Transition Packets will be distributed at the end of the school year. This packet will provide information that will assist in making the transition process for you and your child as smooth as possible.

We look forward to assisting your family in ensuring a helpful transition.

For more information regarding the transition process, please reach out to your Family Support Coordinator or visit <u>https://eclkc.ohs.acf.hhs.gov/transitions</u>.

#### SCHOOL READINESS

QBHS/EHS strives to prepare the children in our care for a life-long love of learning. We work collaboratively with local elementary schools to form partnerships so that we can provide your children with the skills necessary to be successful when they make the transition to Pre-K and or Kindergarten. We have developed School Readiness Goals that align our curriculum, state and federal guidelines, known as Early Learning Outcomes Framework (ELOF). All lessons and activities are based on these goals and so all children can engage in activities that will help them develop the necessary skills needed for kindergarten and beyond.

Some of the skills children will learn while at QBHS/EHS include:

- □ Beginning literacy skills; letter names and sounds, beginning sight word recognition and print awareness concepts
- □ Self-Regulation skills; being able to follow rules, communicating with adults and peers
- □ Self-Help skills; taking care of personal belongings, toileting independently,
- □ Self-Expression; sharing feelings, needs, or problems with peers and adults
- □ Basic problem-solving skills; how to handle conflict, working with at least one other peer
- □ How to get along and interact with adults and peers; communication and problem solving
- □ Physical development skills; running, jumping, balance, holding a pencil, using scissors
- □ Beginning mathematic skills; organizing, sorting, counting, number recognition, and patterns
- □ Awareness of self and others; understanding space and how others might be feeling or what they might need
- □ Language skills: receptive (understanding words) and expressive (beginning able to use words to express feelings or needs)
- Beginning science concepts; classifying, sorting, cause and effect

#### SCHOOL READINESS GOALS

School Readiness Goals are targeted in response to QBHSEHS Teaching Strategies Gold scores.

# APPROACHES TO LEARNING

- Children will be able to manage feelings and emotions which will lead to positive actions and words.
- Child will be able to complete assigned tasks.
- Children will be able to manipulate objects in increasingly complex ways.
- Children will be able to express their thoughts, feelings, and ideas.

#### SOCIAL & EMOTIONAL DEVELOPMENT

- Child will be able to develop positive relationships and interactions.
- Child will be able to identify and express emotions in a variety of ways.
- Child will be able to ask for help as needed.
- Child will be able to develop a sense of belonging within family, community, and culture.

# LANGUAGE AND LITERACY

- Children will be able to engage in conversation using non-verbal and simple sentences to communicate.
- Children's verbal communication skills will increase over time.
- Children will be able to acquire new words and their meanings\*\*\*
- Children will be able to identify words and letters.
- Children will engage with books\*
- Children will be able to re-tell a familiar story.

#### **COGNITION**

- Children will be able to group objects together by characteristics.
- Children will be able to recognize numbers and count in sequence.
- Children will be able to notice how things work.
- Children will be able to engage in imaginative play.

#### PERCEPTUAL, MOTOR AND PHYSICAL DEVELOPMENT

- Children will use their senses to actively explore their environment.
- Children will be able to coordinate hand and eye movements to complete tasks.
- Children will display safe habits with support from adults.
- Children will become increasingly self-sufficient.

# **CLASSROOM INFORMATION**

QBHS/EHS educational programs are designed to meet each child's individual needs and to reflect the cultural heritage of the community being served.

Each classroom consists of qualified teachers to work with you and your child. One teacher and one teacher assistant are assigned to each Head Start Room and two teachers are assigned to each Early Head Start Room.

QBHS/EHS uses The Creative Curriculum for both Head Start and Early Head Start programs and this curriculum is consistent with Early Head Start/Head Start Performance Standards. It is based on sound child development and principles about how children grow and learn.

Classrooms will be grouped according to age as much as possible and ratios will be maintained at all times. Each classroom will have a set maximum number of children according to age of the children.

- □ Classrooms for children 0-12 months will have no more than 8 children
- □ Classrooms for children 12-24 months will have no more than 8 children
- Classrooms for children 24-36 months will have no more than 8 children
- □ Classrooms for children 3 years will have no more than 16 children
- □ Classrooms with children 4-5 will have no more than 16 children



#### QUALLA BOUNDARY HEAD START AND EARLY HEAD START INFANT SAFE SLEEP POLICY

Sudden Infant Death Syndrome (SIDS) is the unexpected death of a seemingly healthy baby for who no cause of death can be determined based on an autopsy, an investigation of the place where the baby died, and a review of the baby's medical history.

Child Care Law requires that childcare providers caring for children 12 months of age or younger implement a safe sleep policy, share this information with parents, and participate in training.

This facility believes all families have a right to safe and healthy childcare and will practice the following safe sleep policy:

#### Safe Sleep Practices

- 1. All staff working in the infant room or childcare staff who may potentially work in the infant room will receive training on infant Safe Sleep and SIDS risk reduction.
- 2. Infants will always be placed on their backs to sleep, unless there is a signed sleep position medical waiver on file which will be posted for quick reference near the infant's crib, playpen, or bassinet.
- 3. The American Academy of Pediatrics recommends that babies are placed on their back to sleep, but when babies can easily turn over from the back to the stomach, they can adopt whatever position they prefer for sleep.
- 4. Caregiver will visually check sleeping infants daily every 15 minutes. The sleep information will be recorded on a Sleep Chart, which will be posted in the classroom. Completed sleep charts will be kept in the child's file.
- 5. Staff will check to see if the infant's skin color is normal, watch the rise and fall of the chest to observe breathing and look to see if the infant is sleeping soundly. We will check the infant for signs of overheating which include flushed skin color, body temperature by touch, and restlessness.
- 6. Steps will be taken to keep babies from getting too warm or overheating by regulating the room temperature, avoiding excess bedding, and not overdressing or overwrapping the baby.
- 7. Room temperature will be kept between 68-72 degrees F. A thermometer will always be kept in the room.
- 8. Infants' heads will not be covered with blankets or bedding. Infant cribs will not be covered with blankets or bedding.

9. No loose bedding, pillows, bumper pads, etc. will be used in cribs. We will tuck any infant blankets in at the foot of the crib and along the sides of the crib mattress.

#### Safe Sleep Environment

- 1. Toys and stuffed animals will be removed from the crib when the infant is sleeping. Pacifiers (without tether) will be allowed in the infants' cribs while they are asleep.
- 2. A safety-approved crib with a firm mattress and tight-fitting sheet will be used.
- 3. Only one infant will be in a crib at a time, unless we are evacuating infants in an emergency.
- 4. No smoking is permitted in the building, only in designated smoking areas outside the building.
- 5. All parents/guardians of infants cared for will receive a written copy of the Infant/Toddler Safe Sleep Policy before enrollment.
- 6. To promote health development, awake infants will be given supervised 'tummy time' for exercise and play.

NOTE: All parent/guardians of infants cared for in this facility will receive a written copy of our Infant/Toddler Safe Sleep Policy and information about SIDS risk reduction before enrollment.

# QUALLA BOUNDARY HEAD START AND EARLY HEAD START PREVENTION OF SHAKEN BABY SYNDROME AND ABUSIVE HEAD TRAUMA

Policy: QBHS/EHS believe that preventing, recognizing, responding to, and reporting shaken baby syndrome and abusive head trauma (SBS/AHT) is an important function of keeping children safe, protecting their healthy development, providing quality childcare, and educating families.SBS/AHT is the name given to a form of physical child abuse that occurs when an infant or small child is violently shaken and/or there is trauma to the head. Shaking may last only a few seconds but can result in severe injury or even death.

#### **Procedure:**

1. All program staff will receive annual training on the Prevention of Shaken Baby Syndrome and Abusive Head Trauma.

2. Any new employee will receive training within 60 days of employment.

3. Documentation of this training will be kept and recorded via training sign-in sheets and Child Plus.

While at QBHS/EHS children are observed for signs of abusive head trauma including irritability and/or high-pitched crying, difficulty staying awake/lethargy or loss of consciousness, difficulty breathing, inability to lift the head, seizures, lack of appetite, vomiting, bruises, poor feeding/sucking, no smiling or vocalization, inability of the eyes to track and/or decreased muscle tone. Bruises may be found on the upper arms, rib cage, or head resulting from gripping or from hitting the head.

If SBS/ABT is suspected, staff will:

o Call 911 immediately upon suspecting SBS/AHT and inform their direct supervisor, who will inform the Education Manager, Health Manager and the Director of Early Education.

o Notify the parents/guardians.

o If the child has stopped breathing, trained staff will begin CPR.

Instances of suspected child maltreatment in childcare will be reported to Family Safety or DSS.

#### **QBHS/EHS** staff will never engage in the following:

- a. shaking or jerking a child
- b. tossing a child into the air or into a crib, chair, or car seat
- c. pushing a child into walls, doors, or furniture
- d. behave in a manner that could injure a child
- e. threaten children or restrict their movement

# **DAILY HEALTH CHECK**

- □ QBHS/EHS staff shall conduct a daily health check of children before parent leaves in a manner that is comfortable to the child to determine the health of the child and any recent illness or injuries to the child.
- □ Staff will ensure that the child is awake prior to the parent leaving.
  - The child must be able to stay awake and participate in all classroom activities. If the child is unable to stay awake to participate in all classroom activities, then the parents will be called to pick their child up.
- □ Children will receive a visual check by the classroom teacher for the following:
  - General appearance (bruises, scrapes etc.)
  - Obvious signs of illness
  - Complaint of illness
  - Hair (clean, free of lice)
  - Eyes (red, matted, draining)
  - Runny nose or severe cough



#### HOME VISITS AND PARENT TEACHER CONFERENCES

In order to meet Head Start/Early Head Start Performance Standards, each child will have no less than two (2) home visits and two (2) parent-teacher conferences per year conducted by the classroom teacher.

- □ Two (2) staff, the child and the parent and/or guardian must be present during the home visit.
- □ Home visits must be completed in the child's home. If there are two homes with parents, then the parents and staff can decide which home to meet at. If the parents cannot agree upon a home, then two home visits are necessary.
- □ Parents must sign up for home visits with the teacher using the Home Visit Log.
- □ During the home visit, parents are encouraged to ask questions and discuss their expectation of the QBHS/EHS program. The parents will be asked to give their input in what they think the teachers can do to help their child grow and learn.
- □ Parents will sign up for a conference time with the classroom teacher and the teacher will send a reminder card one week before the meeting date.
- □ Parent-teacher conferences allow the parents/guardians to see what the child's classroom learning environment is like, the teacher to share the child's portfolio samples (January only), parents to become familiar with the program (August only), to give the teachers and parents/guardians a chance to meet on a one-to-one level, to discuss mutual efforts in supporting the child's growth and development, and to have parents/guardians give input in assessing their child's development.
- $\Box$  A copy of the home visit documentation will be provided to the FCP staff.





# QUALLA BOUNDARY HEAD START AND EARLY HEAD START DAILY SCHEDULE

# Head Start

| 7:00 - 8:15 | Classrooms start accepting children                 |
|-------------|---|
| 8:00        | Time to call in by if you are running late          |
| 8:15        | All children must be in attendance for the day      |
| 8:30        | Breakfast Served                                    |
| 8:45        | Cut off time for children that are late             |
| 9:00        | Classroom Day begins (outside, literacy, free play) |
| 11:15       | Cut off time for children with a doctor's note      |
| 11:30-12:15 | Lunch   |
| 12:15-2:15  | Nap Time  |
| 2:00        | Snack for bus riders                                |
| 2:15-2:30   | Bus run starts                                      |
| 2:30        | Snack   |
| 2:45-4:30   | Outside, free play, centers                         |
| 4:30-4:45   | Afternoon Snack, Free play, centers, outside        |
|             |   |

# Early Head Start

| 7:00       | Classrooms start accepting children               |
|------------|---|
| 8:00       | Time to call in if you are running late           |
| 8:15       | All children must be in attendance for the day    |
| 8:30       | Breakfast Served                                  |
| 8:45       | Cut off time for children that are late           |
| 9:00       | Classroom Day begins-outside, literacy, free play |
| 11:15      | Cut off time for children with a doctor's note    |
| 11:00      | Lunch   |
| 11:45-1:45 | Naptime   |
| 2:00       | Snack   |
| 2:30       | Outside, free play, center activities             |
| 4:30       | Afternoon snack                                   |
| 4:45       | Pick-up   |



#### FIELD TRIPS AND OUTSIDE CENTER WALKS

Field trips and excursions away from the center will be educational and age appropriate. This is a time for children to grow, explore, and gain knowledge through community activities. Careful planning reduces harm or injury to the children and liability to the program as a whole.

All children participating in planned walks or field trips will be required to have a signed permission slip for each excursion that occurs. Each excursion or field trip must be reflected in the daily lesson plans.

#### Procedure:

- 1. Before children are transported a signed permission form from the parent must be filled out for each child on each field trip or excursion. This should also include when and where the child is being transported and the expected time of departure and arrival. One copy of the permission form will be kept at the center and one copy of the permission form will go to the parent.
- 2. The field trip or excursion must be documented in the daily lesson plan and a request made in writing and approved before the trip is planned.
- 3. Support staff and volunteers must be listed when your field trip/excursion request is made.
- 4. No one under the age of three will be transported on field trips
- 5. Children will not be released to anyone not on the emergency contact sheet and without the written permission of the parent.
- 6. Staff member must a field trip attendance sheet with all children listed with permission to attend field trip or excursion.
- 7. A list of all children being transported on the field trip or on the excursion must be available at the center.
- 8. Each child must be properly restrained with an individual seat belt or appropriate restraint device either in the vehicle or stroller.
- 9. Emergency contacts and allergy lists must always be carried.
- 10. When children are transported, staff must have a functioning cellular telephone or other two-way communication for use in emergency.
- 11. Stroller buggies should be inspected each day and kept in good repair.
- 12. Children are to be kept hydrated and sun protection, bug spray used when needed.
- 13. Children should have labels or some type of identity on them that alerts staff that they are part of the group.

#### **BUS RIDER CRITERIA ELIGIBILITY**

All children enrolled in the Head Start Program are eligible for transportation services. School bus safety requirements as of January 20, 2004, state that safety seat restraints are required to be installed and used in all Head Start buses. This requirement reduces the seating capacity for all buses. Therefore, the following criteria will be used to determine the bus rider list:

- □ All children must be three years of age to be eligible for transportation services.
- □ Priority goes to children with special needs and children who are income eligible.
- □ Families meeting low-income guidelines with no transportation.
- □ Families meeting low-income guidelines with transportation.
- □ Families that are "over income" will be offered a seat on a first come first served basis.
- □ Services will not be offered if the qualifying child has a sibling on the Infant/Toddler wing until that sibling is eligible for transportation services.
- □ Children who may need limited bus service will be accepted only after all children who need full time service have been offered a seat.
- □ Children who require limited bus service must ride consistently, i.e., a child signed up to ride 2 days out of the week will be expected to ride both days.
- □ If the need arises and another child needs full time bus service, parents may be asked to forego their slot on the bus to accommodate the full-time need.



## **BUS RIDER RULES**

- Each child that is eligible to ride the bus is required to follow bus safety rules. Rules are as follows:
- A survey will be sent out at the beginning each school year to determine a list of bus riders. The survey must be filled out to be placed on the list.
- All bus riders must that meet criteria will be determined on a first come first serve basis with the exception of children with special needs meeting income eligibility. A waiting list will be established when the seating capacity of the bus has been filled.
- Pedestrian safety is offered each year to all parents, staff and children.
- All children receiving bus service must ride the bus consistently. Failure to do this
  will result in your child being removed from bus service and placed back on the
  waiting list.
- If your child does not ride the bus for three days, the bus will not return to pick the child up until contact is made with the parent/guardian.
- If the child does not ride the bus for one week and the parent has not contacted the center, the child will be dropped from the bus.
- Your child can be assigned to one bus only. Changes to another bus can be made if there is no one on the waiting list and seats are available on that bus. The change will be for the duration of the school year.
- Parents that have a custody order in place will need to decide who needs the bus service.
- If your child refuses to cooperate with the monitor and bus driver, the parent/guardian will be asked to transport their child to school on that day.
- No food, drink, sippy cups etc. allowed on the bus.

Parents will be asked to sign a copy of the following:

- Parent Code of Conduct
- Transportation Survey
- All changed for daily transportation must be called in to the center by 1:00.
- Alternate routes and modes of transportation will change if inclement weather conditions warrant such a change.

# QUALLA BOUNDARY HEAD START AND EARLY HEAD START BUS RIDER - BEHAVIOR BUS POLICY

Bus monitors and bus drivers will implement action steps to work with the children and families when a child is repeatedly exhibiting behavior that is potentially harmful to the child, other children and/or staff. All parents/guardians of children who will be riding the bus, must sign the Challenging Behavior Bus Policy.

Severe behavior is defined as, but is not limited to the following examples:

- Excessive swearing (repeatedly swearing, other children are beginning to copy, and use swear words)
- Physical aggression (hitting, biting, kicking, etc.)
- Tantrums (not following bus safety rules, refusal to cooperate in the bus preloading or unloading, and general program rules)

#### **Procedure:**

- **Step 1:** The parent will be asked to sign a bus incident form describing what happened on the bus or during the pre-loading or unloading.
- **Step 2:** After three incidents, the parent will be asked to transport the child to school when the child is exhibiting severe behaviors on the bus.
- **Step 3:** If the behavior continues to be documented the parents will be asked to come in for a meeting to develop a behavior plan. Parents will be asked to abide by the steps outlined in the plan.
- **Step 4:** If the behavior plan does not work, then transportation services will be terminated.

#### **FLOODS**

In the event of a potential flash flood, EBCI Emergency Management Team will send information to the office of Qualla Boundary Head Start/Early Head Start.

When a flash flood "watch" has been issued, the transportation coordinator will stay tuned to a local radio, Internet, NOAA radio, or TV station and remain alert to rapidly changing weather conditions. This is especially important for a flash flood, which can happen so quickly that you may not receive more than one warning. If it is suspected that a flash flood has already begun, then evacuation will begin immediately.

- All Qualla Boundary Head Start/Early Head Start staff will receive annual orientation concerning what a flash flood "Watch" and flash flood "Warning" means
- □ In the event of a flood, children will be removed from the area as quickly as possible by staff, to a site where flood waters do not reach.
- □ Classroom teachers will maintain an up-to-date classroom list and daily attendance logs that will be in place convenient to the exit door.
- □ Children will be checked using the daily attendance record list as quickly as possible upon reaching safety. Should it be determined that a child is missing, it will be reported immediately to Director, Operations Manager, or the Transportation/Facilities Coordinator who will notify rescue workers.
- □ In addition, the Operations Manager or Transportation/Facilities Coordinator will locate the cellular telephone and bring it from the building.
- □ Once the children and staff are safe, the Classroom Supervisors will begin to contact parents or guardians to inform them of the situation and to notify them of the location where they may pick up their children.
- □ Records and valuable equipment will be moved to higher floors.
- □ Chemicals will be stored where floodwaters cannot reach them and cause contamination.
- □ If time permits, unplug all electrical appliances.
- $\Box$  Lock all doors.
- □ All loose outdoor articles are to be brought in or tied down.

□ The QBHS/EHS Early Education Director or Operations Manager will notify the PHHS Health Operations Director. The PHHS Health Operations Director will arrange for volunteer staff as deemed necessary.

#### FLOOD EVACUATION PROCEDURE

#### **Evacuation of children is as follows:**

- □ Children enrolled at the Dora Reed Children's Center will be transported to the Yellowhill Baptist Church.
- □ Children enrolled at Big Cove Head Start center will be transported to Galimore or other selected sites as quickly as possible.

The following numbers will be available for parents/guardians to call for evacuation site locations:

# (828) 736-6789 – TINA SAUNOOKE, EARLY EDUCATION DIRECTOR

# (828) 736-7356 – ERNESTINE DRIVER, OPERATIONS MANAGER



# THUNDERSTORMS



All QBHS & EHS staff will receive training to learn to recognize the meaning between what severe thunderstorm "watch" and "warning" mean and that thunderstorms can produce cloud-to-ground lightening.

#### **THUNDERSTORM WATCH:**

- a. Advise all staff of the weather conditions up to six hours before
- b. Modify outdoor activities to ensure that relatively quick access to shelter is available
- c. Know how to tell that lightening is nearby.

#### THUNDERSTORM WARNING: 0-1 Hour before

- a. Stay inside Terminate all outside activity and seek shelter
- b. Stay away from water, faucets, sinks, and windows
- c. Do not use the telephone
- d. Do not use the electrical appliances
- The Transportation/ Facilities Coordinator will make a determination as to whether parents are advised of hazardous road conditions or when hazardous lightening may exist. When such conditions exist, children will remain in the building until the hazard has passed.
- 2. In the event of a severe or potentially severe thunderstorm, an emergency pack will be maintained at all times by the Transportation/Facilities Coordinator. This pack will include a portable radio, which is in good working order at all times, flashlights with fresh batteries, and emergency supplies.

## TORNADOS

All Dora Reed and Big Cove Children's Center staff will receive training to learn to recognize the meaning between what Tornado "watch" and "warning" mean.

#### **TORNADO WARNING:**

In the event of a tornado warning:

- 1. The Dora Reed and Big Cove Children's Center Program will remain open during a tornado warning unless otherwise ordered to be closed by the Principal Chief.
- 2. The Transportation/Facilities Coordinator will monitor the local TV, internet, NOAA radio, or weather station when a tornado "watch" or "warning has been issued.
- 3. In the event that a tornado warning has been issued in the community surrounding the Dora Reed and Big Cove Children's Center, the staff will take the necessary precautions by taking the children into the hallway away from the windows.
- 4. Staff will take the class rosters and emergency contacts with them to the hallway. No one will be allowed to return to the classroom until clearance has been determined.
- 5. The classes will remain in the hallway until instructed by the Operations Manager and/or Early Education Director.

At that point, the staff will return all children to the classroom. A head count before moving to a safe place, after arriving at a safe, and after leaving the designated area.

#### **TORNADO WATCH:**

In the event of a tornado watch:

- 1. The Transportation/Facilities Coordinator will monitor the local TV, internet, NOAA radio, or weather station when a tornado "watch" or "warning has been issued.
- 2. When a warning is issued, the Transportation/Facilities Coordinator will announce that staff and children at Dora Reed Children's Center to do the following:
  - a. Move into the central halls.
  - b. Will remain in the central halls until the danger has passed.
  - c. Staff and children at Big Cove Children's Center will move to the hallway located next to the staff break room and Supervisors office. Staff and children will remain there until the danger has passed.

# Should structural damage to the building occur, the emergency evacuation procedures will be implemented as follows:

- 1. Classroom teachers will maintain an up-to-date classroom list and daily attendance logs that will be in place convenient to the exit door. Children will be checked using the daily attendance record list as quickly as possible upon reaching safety.
- 2. Should it be determined that a child is missing, it will be reported immediately to Director, Operations Manager, or the Transportation/Facilities Coordinator who will notify rescue workers.
- 3. In addition, the Operations Manager or Transportation/Facilities Coordinator will locate the cellular telephone and bring it from the building.
- 4. Once the children and staff are safe, the Classroom Supervisors will begin to contact parents or guardians to inform them of the situation and to notify them of the location where they may pick up their children.
- 5. The Early Education Director or Operations Manager will notify the Community and Education Director. The Director will arrange for volunteer staff as deemed necessary.

# QUALLA BOUNDARY HEAD START AND EARLY HEAD START EVACUATIONS

# **Dora Reed Center:**

Central Facility children and staff will be taken to Tsali Manor in all emergencies except severe weather or floods. In the event of severe weather of flooding, children will be taken to the Yellowhill Annex Building located at the Yellowhill Baptist Church.

- 1. The classroom teacher/assistant will take classroom out of the building.
- 2. Before leaving the facility the classroom teacher/teacher assistant will check and count each child using the attendance list to compare.
- 3. The Education Manager will maintain cellular telephones and the telephone operator will take the telephone with him/her as she leaves the building.
- 4. Immediately upon arrival at Yellowhill Church, the Education Manager will ensure that all parents are contacted to inform them of the situation and to let them know where they may pick up their children.
- 5. The QBHS/EHS Early Education Director will immediately notify the PHHS Health Operations Director. The PHHS Health Operations Director will arrange for volunteer staff as deemed necessary.
- 6. Emergency supply needs will be identified immediately, and the supplies will be delivered as soon as possible.

# **Big Cove Children's Center:**

Big Cove Children's Center staff and children will exit the building and walk to the far corner of parking lot closest to the fire department. The center will assemble at this location to await transportation. The classroom teacher or teacher assistant will check each child as compared to the attendance list.

Immediately upon arrival at Big Cove Rec Center, the Education Manager will ensure that all parents are contacted to inform them of the situation and to let them know where they may pick up their child. Should the need arise, children and staff will be transported to Tsali Manor. The Emergency management response system will also be utilized.

- 1. The Early Education Director will immediately notify the PHHS Operations Director. The PHHS Operations Director will arrange for volunteer as deemed necessary.
- 2. Emergency supply needs will be identified immediately, and the supplies will be delivered as soon as possible.

#### **Evacuation Duties as Follows:**

- 1. The classroom teacher/teacher assistant will take classroom lists out of the building
- 2. Before leaving the facility the classroom teacher/teacher assistant will check and count each child using the attendance list to compare.
- 3. The Education Manager will maintain cellular telephones and the telephone operator will take the telephone with him/her as she leaves the building.
- 4. Immediately upon arrival at Tsali Manor, the Education Manager will ensure that all parents are contacted to inform them of the situation and to let them know where they may pick up their children.
- 5. The Early Education Director will immediately notify the PHHS Operations Director. The PHHS Operations Director will arrange for volunteer staff as deemed necessary.
- 6. Emergency supply needs will be identified immediately, and the supplies will be delivered as soon as possible.

# FIRE DRILLS AND FIRE SAFETY

# **Procedure:**

- Two fire drills are conducted the first two weeks of school. Thereafter, fire drills are conducted one time per month. One fire drill must be conducted during nap time per year.
- All children at the center, including infants and toddlers will participate in the fire drills.
- The Fire Drill will be documented for availability upon request from the Fire Marshal, OHS, or PHHS Compliance office.
- Each drill must be treated by staff as an active emergency.
- All staff are to exit the building in a timely orderly fashion.
- Staff are to count and maintain control of the children always during the drill.
- Staff upon hearing the fire alarm, will immediately begin exiting the building and not stop to dress or put shoes on children. (Children should have shoes on at all times)
   Support staff will gather needed items such as blankets, shoes, etc.
- Staff and children go to their designated area on the playgrounds/parking lot and teachers and supervisors will immediately do a head count of the children in their care.
- Support staff are assigned classrooms and will go to the designated classroom immediately, walk thru the classroom to ensure all children/staff have exited the room, turn off the lights and join the designated classroom outside.
- Supervisors must have a working radio on them.
- The Facilities Maintenance Coordinator, Maintenance Worker, will be responsible for checking the building and will radio a message of 'All Clear'.
- Staff will return to their classroom, recount the children and ensure all children are present. Children and staff may return to the playground, after all children, are accounted for and the drill occurred during the classroom's scheduled playground time.

# Fire Evacuation 1302.47 Procedure:

Dora Reed Children's Center

- 1. The Dora Reed Children's Center (Preschool) will evacuate to the far edge of the playground on the north side of the building. Head Start Rooms 105 and 107 will evacuate behind the bus parking lot in the grassy area.
- 2. The Dora Reed Children's Center (Infant/Toddler) will evacuate to the far edge of the sidewalk on the south side of the parking lot next to the Fire Station.
- 3. Infants will be evacuated by evacuation crib out to the designated evacuation area.

Big Cove Children's Center

- 1. All Emergency exits will be clearly labeled with large EXIT signs.
- 2. The fire evacuation plan for the center will be posted near each exit and will include the routes of evacuation from rooms and the location of the assembly point outside of the building.
- 3. The Big Cove Children's Center staff and children will exit the building and walk to the far corner of parking lot closest to the fire department.
- 4. Infants will be evacuated by evacuation crib out to the designated evacuation area.

#### EARLY DISMISSAL

- 1. In the event of early dismissal by the Principal Chief, QBHS/ EHS staff will notify parents and make arrangements for children to be picked up early or transported to the regular pickup route (transported means regular bus riders only).
- 2. If, during a snow event, the Cherokee School Systems cancels classes and the school buses run, our school buses should operate similar schedules. This applies only to children who are bused to and from childcare. The center will remain open until the Chief grants administrative leave.
- 3. Employees are responsible for making necessary arrangements for their children. Supervisors will work with staff with exceptional circumstances.
- 4. In a situation where QBHS & EHS does not have power and/or water for 2 hours, the centers will close to children and staff.

# IF ADMINISTRATIVE LEAVE IS NOT GRANTED BY THE PRINCIPAL CHIEF, DORA REED AND BIG COVE CHILDREN'S CENTER WILL REMAIN OPEN.



#### **BUILDING SECURITY**

Qualla Boundary Head Start/Early Head Start takes every precaution necessary to ensure the safety of children, parents, and staff. Each center utilizes Security Access System (buzzer system) and video surveillance system. All classrooms are equipped with video surveillance cameras. Parents/Guardians do not have access to security footage unless they acquire a subpoena from the Cherokee Court system. EBCI Information Technology (I.T) is responsible for ongoing maintenance and oversight of the surveillance system.

Portable cameras and iPads are used by teachers and supervisory staff for coaching and supervision purposes. The purpose of the surveillance is for your child's safety, as well as our staffs. We want to provide the best methods in childcare and children's learning environments.

Doors remain locked during the school day and visitors, including parents, will only have access to the building by being buzzed in. All visitors are required to sign in at the front entrance and obtain a visitor badge while on the premises. Visitors must be met by a staff member to accompany them through the building.



## QUALLA BOUNDARY HEAD START AND EARLY HEAD START SHELTER IN PLACE

#### **Department: Operations**

## Section: Safety and Injury Prevention Plan

## Subject: Shelter in Place (PS 1302.47)

# **Shelter in Place**

Policy: For our purposes, "Shelter in Place" is defined as follows: The process by which to gain swift and orderly control of hallways, entire campus, grounds, or specifically designated areas in the event a situation may cause harm to the occupants of Dora Reed and Big Cove Center

A "Shelter in Place" may be used for the following incidents.

- Fight/Violence, Emergencies at other local schools.
- Hazardous Material /Biological Hazard
- Facility Management Emergencies

# FIGHT/VIOLENCE, EMERGENCIES AT OTHER LOCAL SCHOOLS

- 1. An audible announcement over the phones and radios will be made by the Early Education Director, Operations Manager, or designee announcing a "Shelter in Place". This announcement will be followed with necessary instruction.
- 2. Staff will clear the hallways of students, staff, and visitors. Close doors and lock if directed to do so and continue teaching and daily operations
- 3. The Early Education Director or Manager in Charge will communicate with dispatch regarding clearance of the drill or emergency.
- 4. The "Shelter in Place" will be concluded by issuing an audible announcement over the phones and radios indicating the current "Shelter in Place" incident is concluded.

# HAZARDOUS MATERIAL/BIOLOGICAL HAZARD

- 1. An audible announcement over the phones and radios will be made by the Early Education Director, Operations Manager, or designee announcing a "Shelter in Place". This announcement will be followed with necessary instruction.
- 2. Staff will clear the hallways of students, staff and visitors. Close doors and lock if directed to do so and continue teaching and daily operations.
- 3. Depending on the type of emergency, Facilities Management may be instructed to turn off HV/AC, staff may be instructed to close all windows, lock doors, seal doors using duct tape or other material.
- 4. The "Shelter in Place" will be concluded by issuing an audible announcement over the phones and radios indicating the current "Shelter in Place" incident is concluded.

# FACILITIES MANAGEMENT EMERGENCY

- 1. An audible announcement over the phones and radios will be made by the Early Education Director, Operations Manager, or designee announcing a "Shelter in Place". This announcement will be followed with necessary instruction.
- 2. Staff will clear the hallways of students, staff and visitors. Close doors and lock if directed to do so and continue teaching and daily operations
- 3. Depending on the type of emergency, Facilities Management may turn off HV/AC, issue instructions to close all windows, lock doors, seal doors using duct tape or other material.
- 4. The "Shelter in Place" will be concluded by issuing an audible announcement over the phones and radios indicating the current "Shelter in Place" incident is concluded.

# AS ALWAYS, LISTEN FOR AUDIBLE INSTRUCTION WHEN A SHELTER IN PLACE IS INITIATED.

# QUALLA BOUNDARY HEAD START AND EARLY HEAD START ACTIVE SHOOTER

**Department: Operations** 

Section: Safety and Injury Prevention

Subject: Active Shooter PS 1302.4 (7) (i)

# **Policy:**

QBHS/EHS centers will prepare all staff for active shooter scenarios. Basic information for effective emergency action to ensure a comprehensive plan an active shooter situation. In emergency situations staff members will be prepared to act quickly to ensure the health and wellbeing of each child.

All QBHS/EHS employees will be knowledgeable and well-trained in the program's emergency procedures for an active shooter. All staff will receive annual emergency training procedures during pre-service and in-service trainings.

## **Procedure:**

In the event of entry of an active shooter into the building or premises, the center will go into lock down.

Note: The announcement may also come from the EBCI Emergency Management or Cherokee Police Department.

Guidelines for an active shooter will be as following:

1. The first initial announcement will be made to the Early Education Director and/or Operations Manager, and/or the Facilities Transportation Coordinator.

2. The front office phone operators will be informed that the center is in lockdown. The phone operator or other personnel that receives the notice for lock down will make a page or radio announcement by pressing the GROUP page button on the phone to access the intercom and say, **"The center is going into lock down. Please report to your classrooms."** (Staff and children will stay in their classrooms until informed that the lockdown has been lifted) BOTH CLASSROOM DOORS WILL STAY LOCKED AT THIS TIME.

Staff should take the children to their designated classroom safe area.

- 3. Staff should be ready to vacate and run if there is an opportunity.
- 4. All support staff should take cover and barricade doors.
- 5. Front desk receptionist will go to the Early Education Director's office.

6. If classrooms are outside: Head Start classrooms should not reenter the building and follow evacuation procedures.

#### QUALLA BOUNDARY HEAD START AND EARLY HEAD START UNAUTHORIZED PERSON ON THE PREMISES

In order to maintain the protection and safety of children and staff, the program will go by the following guidelines in the event of an unauthorized person on the premises:

- 1. There must be documentation at the program level and located in the child's file as to who is on the Emergency Information/Medical Attention Permission form. The above stated form is located at the front office with the Receptionist/secretary for reference if and when needed at the Dora Reed Center. The Big Cove Center keep their forms located in the children's files in the file room and a copy located the Receptionist desk.
- 2. Picture(s) of unauthorized visitors will be kept in a notebook in the front office at the centers. The notebook will be kept in the Center Supervisors office at Big Cove Head Start.
- 3. When an unauthorized person is in the parking lot, inform SRO and call the Cherokee Police department immediately at (828) 497-4131. The front desk staff will do a group page to access the intercom and say, **"It's classroom time."** Big Cove staff announces that it is classroom time. Program staff know to stay in their classroom with both doors locked until notified that it is safe.
- 4. In the event the person is inside the center they will be asked to leave. (Staff will call the police and ask for assistance.) The front desk staff will do a group page to access the intercom and say, "It's classroom time." Big Cove staff announce that "It's classroom time." and follow procedure.
- 5. If the person refuses to leave, staff should remain calm (help is on the way) and escort the person to the nearest office/conference room and ask them to wait until you can get assistance from the supervisor.
- 6. Let the police know that there is an unauthorized person on the premises and assistance is needed immediately.
- 7. Call or see the Director and inform him/her of the incident.
- 8. Write up the incident. A copy must be provided to PHHS Regulatory & Compliance and Risk Management.
- 9. The incident will be kept on file for the duration of seven (7) years.

It takes each and every one of us working together to ensure effective service delivery for the children and families we serve. Please do your part in helping to protect the children in our care by following the procedures above.

# QUALLA BOUNDARY HEAD START AND EARLY HEAD START LOCKDOWN PROCEDURES

In order to prevent entry of malicious persons into the building the center will go into lock down. Note: In the event it is a reservation crisis the announcement may come from EBCI Emergency Management Team and/or Cherokee Police Department.

Guidelines for lock down:

- 1. The first initial announcement will be made to the Early Education Director and/or Operations Manager, and/or Facilities Coordinator.
- 2. The front office phone operators will be informed that the center is in lockdown. The phone operator that receives the notice for lock down will make a group page announcement to access the intercom and say, "The Center is going into lock down. Please report to your classrooms." (Staff and children will stay in their room until informed that the lock down has been lifted.) BOTH CLASSROOM DOORS WILL STAY LOCKED AT THIS TIME.
- 3. Family Community Partnership Coordinators and Health Manager and Housekeepers will be posted at the inside of each exit doors. The Director or Operations Manager will go to the Command Center for the EBCI Emergency Management Team. The SRO will be on-site and in contact with dispatch.
- 4. Phone Operators will remain at the phone to relay instructions from the Early Education Director or Operations Manager. (Whomever is at the Command Center) Education Curriculum Manager and/or Facilities Coordinator will carry these out.
- 5. Kitchen staff will be available to distribute food and water, if they are on site (given the time of day).
- 6. Classroom Supervisors will do room checks for safety, needs and supplies etc.
- 7. Health Manager, Family Community Partnership Manager, HR Administrator and the Fiscal Manager will move throughout the building to assist wherever they are needed.
- 8. When it is deemed that it is safe to lift the lockdown, the phone operator that receives the announcement will page and say, "The lock down has been lifted and you may now resume regular schedule."

