

Kitsap Community Resources Early Learning and Family Services

Parent Handbook



Early Head Start, Head Start & Early Childhood Education Assistance Programs

(360) 473-2075

1201 Park Avenue, Bremerton WA

www.kcrearlylearning.org

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Dear Parents,

The staff and I wish to welcome your family to Kitsap Community Resources Early Learning & Family Services Programs.

This is just the beginning of a very exciting time for you and your child and we would like to be part of the team to help prepare your child to succeed at school, at home, and in the community.

We believe that you, the parent, are the most important influence in your child's education, development, and general well-being. We are here to support you and make available to you information, resources, and experiences that can make your important role as a parent a little easier. In January of 2007, The Parenting Place (TPP) and Women, Infants & Children (WIC) were added to the Head Start, Early Head Start, ECEA Programs creating the Early Learning and Family Services Division. The integration of the three programs into this division offers parents easier access to services and information.

The Parent Handbook is a guide to help you learn about our programs. As you know, it is not possible for a handbook to answer every question, but we hope the information contained in it is useful. Please read the handbook carefully and feel free to contact staff if you have any questions. Your feedback, ideas, and suggestions are important to us.

Thank you for choosing to enroll your child in the Kitsap Community Resources Head Start/Early Head Start/ECEA Programs.

Sincerely,

Connie Mueller

Early Learning & Family Services Director
(360) 473-2085

Mission Statement

The Kitsap Community Resources Head Start/Early Head Start ECEA Program's mission is to provide children and their families the resources to develop the skills and attitudes for success, growth, and empowerment to enhance the health and quality of their lives.

Non-Discrimination Statement

It is our policy not to discriminate on the basis of race, creed, ethnicity, national origin, marital status, gender, sexual orientation, class, age, religion, family status, political affiliation, disability or veteran status. A grievance procedure is available and inquiries may be addressed to:

KCR Early Learning & Family Services
Connie Mueller, Director
1201 Park Avenue
Bremerton, WA 98337

Kitsap Community Resources (KCR)

Kitsap Community Resources (KCR) is the grantee agency for the Head Start/Early Head Start/ECEA Program. KCR is a non-profit community action agency whose goal is to provide resources and create opportunities for low-income residents of Kitsap County and to promote self-sufficiency. KCR offers a variety of programs to assist families and individuals. In addition to Head Start/Early Head Start/ECEAP, KCR offers programs that assist with emergency and transitional housing, food supplements, energy assistance, weatherization, legal assistance referral, employment readiness, and parenting skills. Kitsap Community Resources is governed by a 27 person board (the KCR Board of Directors). The KCR Board of Directors is comprised of the KCR Executive Director, Local Business Owners, Local Politicians, Other Service Agency Members, Policy Council Representatives and Consumer Representatives.

KCR Smoking Policy

KCR prohibits smoking on all KCR-owned or leased properties. Washington State Law prohibits smoking in public places and places of employment. Smoking is prohibited within 25 feet of entrances, exits, windows that open, and ventilation intakes. In addition, Head Start requires that smokers must be out of view of all parents and children.

Confidentiality/Privacy

Confidentiality is an important part of the entire Head Start/Early Head Start/ECEA Program. Staff will not share information about a child or family with anyone outside of the program unless:

- the parent/guardian has signed a consent to release information
- the program is mandated by law

It is also important that parents/guardians respect the confidentiality of others when sharing information about the program. We ask that parents/guardians share their concerns about their child or the program with staff and not discuss other families with anyone.

Exterior Doors Locked During School Hours

We are implementing the following at all our sites for security purposes.

- Keep all exterior doors locked at all times, including times when children are outside playing
- Door can be left unlocked when food is being transported to and from kitchen and classroom
- Doors may be left unlocked during drop off and pick up for approximately 15 minutes
- Parent/Guardian should inform teachers of early pick-up
- Parent/Guardian picking up children unannounced should try calling the classroom in advance of their arrival

Lockdown Procedure

A lockdown, permitting no entry or departure from the facility, may be initiated by KCR management, law enforcement officer, or designated KCR office staff member. Personnel or visitors insisting on departure may be allowed to leave, but once they have done so they may not re-enter the facility until the lockdown is over.

Reasons for a lockdown may be initiated include:

- An out-of-control student or KCR guest who is a threat to the safety of others or himself/herself
- Someone identified as having a gun or weapon
- An unauthorized intruder
- Hazardous chemicals inside or outside the facility
- A weather-related event

Weapons and Possession

Possessing firearms, a knife, pepper spray or other dangerous devices is prohibited. Weapons that are intended in the result in physical harm to another person is prohibited on all classroom grounds. Harassment, intimidation, bullying, and retaliation are prohibited with staff, volunteers, or other parents in the program.

If possession of weapons is suspected:

Call 911 (If in immediate danger)

Notify the Director or designee

If weapons are found, with the child, report immediately to police. Appropriate child abuse procedures are begun. Parent (s) are notified.

Drugs (Possession of or use of on Head Start / Early Head Start / ECEAP Grounds)

If drug possession is suspected, notify Director or designee.

(This includes any tobacco products, chew, e-cigarette, marijuana or alcohol)

For Children the Teacher searches child and belongings.

Any drugs or drug paraphernalia are reported to the police.

Appropriate child abuse procedures are begun.

Parents will be notified by the Teacher, Manager, or Director.

Mandatory Reporting Child Protective Services (CPS)

CPS is a specialized unit in the Division of Children and Family Services (DCFS) of the Department of Social and Health Services (DSHS). The law requires that CPS staff investigate reports of suspected child abuse or neglect. (RCW 26.44.020 (18)). CPS seeks to assure the safety of children; and part of the job of CPS is helping parents get the services that are available to build a better family relationship. CPS takes as much time as possible to put parents in touch with organizations and people who can be of help.

All staff members, teachers and aides, social service staff, and volunteers are required by Washington State Law to report suspected incidents of abuse and neglect (RCW 26.44.030(1)). The reporting law specifies reporting when you have “reasonable cause to believe that a child has suffered abuse or neglect”. In doing so they have civil immunity under the law; and failure to report can result in a gross misdemeanor charge.

In-Kind

In-Kind is when someone donates materials or time to the program. The program is required to record in-kind contributions, and match **20% of the money received from grants with in-kind donations in order to maintain the grant funding.**

In-kind must be documented in writing and contain the signature of the volunteer and a verifying signature of a staff person. For more information ask your Family Development Specialist or contact the Parenting/Volunteer Programs Coordinator.

The program would not exist without parent participation. Your time is valuable!

Volunteering

Parents are welcome to participate in the classroom as volunteers. Parents who wish to volunteer must attend volunteer training before spending time in the classroom. Parents who stay for short periods of time (1 or 2 days a month) do not need to go through the training. The program will pay for TB tests and food handler's permits for volunteers. The program also requires a current background check to ensure the safety of the children in the program.

Requirements for volunteers:

Completed volunteer application

Background check

TB test

Orientation

Food handler's permit (optional)

Transportation

Kitsap Community Resources Head Start, Early Head Start, ECEA Program does not provide transportation for children to or from class. Families that have difficulty transporting their children to class are encouraged to discuss their situation with their Family Development Specialist. Family Development Specialists will assist families in finding resources to help with transportation issues.

Policy Council

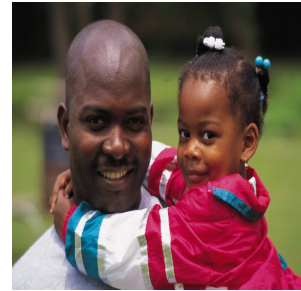
Parents on the Policy Council participate in the process of making decisions about the nature and operations of the program. Policy Council consists of Parent Representatives, Alternates and Community Representatives. Parent representatives and alternates are selected by their site to represent that particular center.

Family Services



Family Services

The Family Service staff supports families personal growth and independence. They respect the family's decisions and priorities. Family Development Specialists are at each site to support the parents and to share information and link parents to community resources. If a parent is in need of food or shelter, counseling or any crisis intervention, the Family Development Specialists are there to help. If a parent has an education or career goal, the Family Development Specialists can assist in providing the direction necessary to obtain that goal. The Family Services Manager and the Family Development Specialists will listen to your concerns and applaud your successes.



Kitsap Community Resources Head Start/Early Head Start/ECEA program is committed to working with the whole family. Therefore, we recognize the invaluable contributions that both men and women make in the lives of children.

Over the years, the Head Start, Early Head Start and ECEA programs have had great successes involving women. However, it has only been recently that these programs have made an extended effort to get more men involved. Studies show that children who have a positive male role model in their life, such as a father, uncle, grandfather, step-father, or brother, are healthier in general.

Men make a difference in the lives of children

Pick-up Policy:

All parents/guardians will complete a new Emergency Card (A-19) at first enrollment, at re-enrollment, when changes occur. This is to ensure staff are aware of any changes and have the most up-to-date information and are able to reach a parent/guardian or other designated adult in the event of an emergency.

Only persons written on the most recent Pick-up List may pick-up a child after showing official government issued identification. No authorization or permissions will be accepted verbally or over the telephone.

All persons designated to pick-up must be at least 15 years old and deemed responsible by the legal parent/guardian.

Early Learning and Family Service Staff cannot and will not bar access of a child or their records to any legal parent or guardian who provide documentation of their legal right to that information unless there is a legal court order of restraint or protection on file.

Documentation includes but is not limited to Birth Certificate identifying the individual as the parent or court/legal documentation demonstrating legal authority.

Staff are legally obligated to allow Child Protective Services or Law Enforcement acting within the authority of their position access to children and their records in the course of an active investigation.

All children must be signed-out before they may leave the classroom to ensure staff have an accurate count of children present.

At no point may staff be allowed to sign-out a child who is not related to them with the exception of children transported by a school district.

Part Day/Full Day Attendance Policy

Purpose:

Research indicates that regular attendance in a high quality early learning program provides lasting benefits throughout a child's life. Our purpose is to work with all families to ensure they have every opportunity to take full advantage of all that our programs have to offer.

Policy:

If a child is absent without notifying the center within 1 hour, a KCR Head Start/Early Head Start/ECEAP staff person must contact the family to determine the reason and what the program can reasonably do to facilitate the return of the child to the program as soon as possible. This effort must be documented. It is an expectation the program maintains an **85% present monthly attendance** rate. It shall be the responsibility of all KCR Head Start/Early Head Start/ECEAP staff to support parents in understanding the importance of regular attendance and assist in resolving any barriers.

Procedure:

Staff follow-up

If a child is absent without explanation a staff person will attempt to contact the family to determine a primary cause for the child's absence within 1 hour to ensure the well-being of the child, and document this attempt.

If a child continues to be absent without explanation (such as 2 consecutive days) staff will conduct a home visit or make other direct contact with the child's parents.

If a child has or is at risk of missing 10% of available program days staff must develop strategies to improve identified barriers. These strategies can include:

- Provide Information about the benefits of regular attendance
 - Support Families to promote the child's regular attendance
 - Intensive case management
 - Temporarily provide services outside the classroom until barriers are resolved
- If a child ceases to attend staff must make all effort to re-engage the family to resume attendance including home visits and in-writing.
2. If after 10 days of the last date of attendance staff have been unable to re-engage contact or establish services then the program must consider the slot vacant and fill it with an eligible child from the waitlist.
 3. For Head Start and Early Head Start Homeless or Foster children only a slot will be held for 30 days from the last date of attendance to attempt to re-establish contact. If after 30 days services have not been re-established the slot will be considered abandoned and either placed in reserve for a new Homeless or Foster child or filled with a child from the waitlist.

Drop off Policy:

Children may be dropped off once class starts.

Anyone may drop-off a child regardless of if they are on the official Emergency Card

Whoever drops the child off must sign the child in to ensure staff have an accurate count of children present in the event of an emergency.

A child may not be dropped off if there isn't an up-to-date Emergency Card on file.

Home Visits (Home Based)

The Home Based program is available for children from birth to three years as well as pregnant women. A staff member visits your home once per week for 1-1/2 hours. Home visits generally cover topics such as child development, parenting techniques, and nutrition. Visits are individually designed for each family depending on the child(ren)'s ages and the unique needs of the family.

Home Base Attendance Policy

The Home Based program option is designed for families whose children and parents are primarily in the home environment and offers comprehensive Early Learning and Family Services through regular home visits and group socialization experiences. In order to provide the highest quality of services to families, KCR Early Head Start Programs believe that regular home visits are essential and we hold the expectation that families will follow these guidelines for attendance:

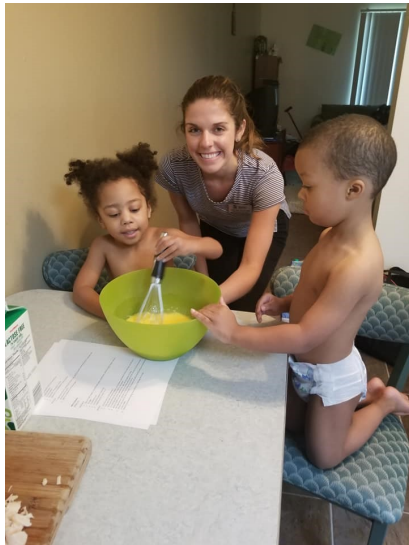
- When a family knows that they will not be available to meet with a Home Visitor, they need to contact the Home Visitor to reschedule their visit.
- If a Home Visitor arrives for a visit and the family is not home or available, the Home Visitor will leave a *Sorry I Missed You* card with contact information and attempt to contact the family to reschedule the visit.
- If a Home Visitor is unable to make contact with a family, they will continue attempts to contact them with a minimum of 3 attempts per week (at different times of day and multiple days of the week) to make every effort possible to contact the family.
- If after 2 weeks of attempted contact, the Home Visitor is still unable to reach a family, a letter will be sent to ask if the family wishes to continue participation in the program. Families will have 10 calendar days to respond to the letter to continue home based services.
- If after 10 calendar day response time has passed and there is still no contact from the family, KCR Early Head Start/Head Start will consider the home based slot abandoned. The Home Visitor will then be required to fill the abandoned slot with another participant within 30 calendar days.

Home Base Parent Participation Agreement

- I understand that my family and I are to take part in and keep weekly home visits, lasting 1 ½ hours each, or call to reschedule if we are unable to attend.
- I understand that I need to be involved in planning and participating in activities with my child and Home Visitor during each visit. To fully participate in all portions of the home visit, I agree to turn off my television and/or stereo, phone/cell phone, and other electronics.
- I understand that it is important to assist in planning, attend, and volunteer at PCAD activities provided by Early Head Start/Head Start two times each month.
- I understand the importance of preventive health care and agree to work with my Home Visitor to complete all screenings and to keep immunizations and well child checks up to date.
- I will not smoke while the Home Visitor is on a planned visit.
- I will secure all family pets in another area of the home or yard so that we will have no pet interruptions during the planned visit.

Prenatal Health Policy (Home Based)

- I understand that I am responsible for attending all scheduled medical and dental appointments necessary for a healthy pregnancy.
- I understand that I have my first prenatal checkup or documentation of same within 30 days of enrollment
- I understand the Early Head Start staff will assist me to obtaining comprehensive prenatal and postpartum care including (but not limited to) nutrition counseling, mental health services and dental care.
- I understand that if I have no medical insurance Early Head Start staff will assist me in obtaining proper insurance to cover necessary medical care.
- I understand that if I have no dental insurance Early Head Start staff will assist me in obtaining free or low cost dental services.
- I understand that if I refuse medical care or refuse to attend a scheduled appointment I must state so in writing to my appointed EHS support staff.
- I understand that all health information furnished by me regarding my medical history is for the sole purpose of detecting existing or potential health problems with myself and/or my developing child.
- I understand that any information is regarded as confidential and will be shared only with those program personnel and health providers who assist my family in maintaining good health.
- I understand that my health records is available for my review and that I will receive a summary of it upon leaving the program.
- I understand that when my child is born I will be responsible for his/her recommended checkups and ongoing health care.



Process for Resolving Parent and Community Complaints

Policy:

When a complaint arises, the parent or community member will first attempt to resolve it at the center level. KCR staff will respond to the complaint in a timely manner to assure that the issue is heard and resolved.

If, after addressing the complaint at the center level, the issue is not resolved to the parent/ community members' satisfaction, the parent/community member will fill out a Community Complaint Form (located on the Parent Board at each site). The form will then be given to the Site Supervisor who will have 5 working days to respond in person or by telephone. If the issue cannot be resolved through this process the following will occur:

If the issue cannot be resolved at the site level:

Step #1: The Site Supervisor will be responsible for directing the complaint to the appropriate Manager. The Manager will then have ten working days to attempt to resolve the complaint and respond either in person, by telephone or in writing. If the issue is not resolved to the parent/community members' Satisfaction, they will state to the Manager that they would like the matter be addressed at the next level. (Step #2)

Step #2: If the complaint is not resolved in Step #1, the Manger will be responsible for directing the complaint to the Head Start/Early Head Start/ECEAP Director. The Director will then have ten working days to attempt to resolve the complaint and respond either in person, by telephone, or in writing. If the issue is not resolved to the parent/community members' satisfaction they will state to the Director that they would like the matter to be addressed at the next level. (Step #3)

Step #3: If the complaint is not resolved in Step #2, the Director will be responsible for directing the complaint to the KCR Executive Director. The KCR Executive Director will then have ten working days to resolve the complaint and respond either in person, by telephone, or in writing. If the issue is not resolved to the parent/community members' satisfaction they will state to the KCR Executive Director that they would like the matter to be addressed at the next level. (Step #4)

Step #4: If Steps #1-3 have not brought resolution to the matter and further action is required, the KCR Executive Director will be responsible for directing the complaint to the KCR Board of Directors Executive Committee. The KCR Board of Directors Executive Committee will present a written decision within thirty days.

ANY COMPLAINT OF AN EMERGENCY NATURE REGARDING THE HEALTH AND SAFETY OF A CHILD WILL BE RESPONDED TO BY APPROPRIATE STAFF WITHIN A 24-HOUR PERIOD.

All staff, Policy Council and KCR Board members will adhere to the KCR Confidentiality Policy throughout the resolution process. KCR staff strongly encourage all community complaints be brought to their attention as promptly as possible. We are dedicated to resolving complaints satisfactorily and in a timely manner. Early reporting makes this possible

Approved by Policy Council 8/18/2010

Child Development



GOLD by Teaching Strategies

For evaluation based on evaluation

What is observation-based evaluation?

In an early childhood program, each child starts the year knowing, doing and needing different things. To help teachers get to know the children and take them to learn at their own pace, our school has chosen GOLD, an evaluation system based on observation. Gold will help teachers gather information that will help them make decisions about teaching and learning children.

What is observation-based Evaluation?

Your child's teacher will be gathering information about what your child can do. The Teacher:

- Take notes on what he sees and hears during the regular activities during the year;
- Gather samples of what children write and draw, and take pictures and videos
- It will match the information gathered with what the research tells us about what to expect from children of similar age or who are in the same grade;
- You will use the information to support your child's learning to meet your individual needs.

We can work together to make sure your child has the skills to achieve success in school and in life.

Where are GOLD data stored and how are they kept private?

Your child's documentation and progress verification data are kept in an online portfolio. This portfolio is located in a safe place. All data is stored in a secure data center on a network with strictly controlled access. Only you, your child's teachers, the program administrator, and the people you authorize will be able to see the data in your child's portfolio.

What is my role as a family member?

No one knows your child better than you do. You play an important role in supporting your child's learning and helping your school experience be as easy as possible. When you meet with your child's teacher, consider sharing any information that helps the teacher know your child better. As the year goes on, ask the teacher what he or she has learned about your child through GOLD. You may consider questions such as "What can my child do well?" "What will be your next steps?" "What can I do at home to support what is happening in the classroom."

How is GOLD different from a standardized test?

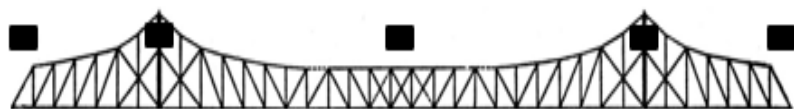
The main difference between a standardized test and gold is that with gold your child is not being evaluated at any given time. Instead, the teacher will take notes on what your child can do at different times of the day, for an extended period of time. The teacher will also talk to you and any specialist who works with your child, which does not always happen when you use a standardized test. All this information will become part of an online portfolio with notes, photos, videos, audio and samples of your child's work. In addition, the knowledge, dislikes and behavior that your child is demonstrating will be compared to generalized expectations of development and learning, which are based on research, for children of similar age or who are in the same grade. As a whole, all the information will help create an image about what your child knows and can do and the steps he or she is expected to take. Thus, unlike standardized tests, GOLD helps the teacher to attend the specific needs of your child and to plan intentional learning experiences that are perfect for him.

Welcome to Kitsap Community Resources Early Learning!

We know that you have come to our program to get high quality preschool for your child. Part of our approach is to also support you, as your whole family well-being is critical to your child's development. To help us know how to support you, we look with you at some areas of your family's life. Together, we help you set goals, like increasing parenting skills, finding a better job, getting more education, and learning new skills.

With our partner program EMPath—Economic Mobility Pathways, we believe that the journey to family stability and well-being is like crossing a bridge, traveling from where you are to reach your goals. The Department of Early Learning's Bridge to Child and Family Self-Reliance* is held up by five major pillars which are all inter-related, and all equally important.

Bridge to Child and Family Self-Reliance



Family Stability		Well-Being		Financial Management		Education & Training	Employment & Career Management
Housing	Family & Dependents	Health & Mental Health	Networks	Debt	Savings	Education	Earnings Level
Having a safe, affordable stable place to call home.	Making sure that your family's needs are met so you can focus on your goals.	Feeling physically and emotionally healthy so you can participate fully in work, school, or family.	Having people in your life who give you personal support, and who also have the knowledge and connections to help you achieve your goals.	Being up-to-date on any debt payments.	Having enough money in the bank to meet your family's needs and afford more than the basics.	Having enough education and training so that you can choose a well-paying and satisfying career.	Being employed in a career that pays enough so that you can support your family.

Our family services staff will work in partnership with you to:

- **Assess** where you are on the Bridge, and where you want to be.
- **Prioritize** the areas that are most important for you and your family.
- **Develop** individualized, specific goals that will help you move towards self-reliance.
- **Connect** with resources that will support your journey.
- **Celebrate** your successes!

Head Start Early Learning Outcomes Framework

The Head Start Early Learning Outcomes Framework: Ages Birth to Five outlines and describes the skills, behaviors, and concepts that programs must foster in all children, including children who are dual language learners (DLLs) and children with disabilities. As designed, the Framework will guide early childhood programs to align curricula, assessments, and professional development to school readiness goals and assure the continuity of early learning experiences.

CENTRAL DOMAINS

	APPROACHES TO LEARNING	SOCIAL AND EMOTIONAL DEVELOPMENT	LANGUAGE AND LITERACY	COGNITION	PERCEPTUAL, MOTOR, AND PHYSICAL DEVELOPMENT
INFANT/TODDLER	Approaches to Learning	Social and Emotional Development	Language and Communication	Cognition	Perceptual, Motor, and Physical Development
PRE-SCHOOLER	Approaches to Learning	Social and Emotional Development	Language and Communication Literacy	Mathematics Development Scientific Reasoning	Perceptual, Motor, and Physical Development

The guiding principles of the Framework have been fundamental to the Head Start program from its inception. They underlie the program policies and practices that prepare young children for success in school and beyond.

- ⇒ **Each child is unique and can succeed.**
- ⇒ **Learning occurs within the context of relationships.**
- ⇒ **Families are children's first and most important caregivers, teachers and advocates.**
- ⇒ **Children learn best when they are emotionally and physically safe and secure.**
- ⇒ **Areas of development are integrated, and children learn many concepts and skills at the same time.**
- ⇒ **Teaching must be intentional and focused on how children learn and grow.**
- ⇒ **Every child has diverse strengths rooted in their family's culture, background, language, and beliefs.**

Procedures to Protect the Confidentiality of Personally Identifiable Information (PII) Of Children & Families

Kitsap Community Resources (KCR) uses a comprehensive approach to data management designed to support the availability, usability, integrity, and security of data to safeguard the Personally Identifiable Information (PII) contained in child and family records. KCR complies with the confidentiality a data procedures as defined in the Head Start Program Performance Standards (1303.20), ECEAP Performance Standards A-213 Confidentiality, and the Individuals with Disabilities Act (IDEA).

Personally Identifiable Information (PII) is defined as any information that could identify a specific individual, including but not limited to a child's name, name of a child's family member, street address of the child, social security number, or other information that is linked or linkable to the child per Head Start Performance Standards (1305).

Data includes all PII and other non-public information. Data includes, but is not limited to, child level enrollment and assessment data used for daily program operation, aggregate child-level assessment data used for program outcome reports and data used to show compliance to regulatory agencies.



PARENT, FAMILY AND COMMUNITY ENGAGEMENT FRAMEWORK

Positive & Goal-Oriented Relationships



As part of the Head Start Road Map to Excellence, the Office of Head Start and the Head Start National Center on Parent, Family, and Community Engagement have created an organizational map for charting strategies and achieving goals related to parent and family engagement in Head Start and Early Head Start. The *PFCE Framework* is a prenatal to age 8 based tool. It outlines an approach to change that shows how the program can work together as a whole to promote parent and family engagement outcomes.

Sample Classroom Schedule

The following are samples of daily classroom schedules. Center Hours Vary--Please see specific schedules at your child's center.

Full Day Daily Schedule Head Start/Early Head Start

7:00	Center opens, activities	12:30	Rest period
8:00	Greeting circle	1:45	Quiet activities
8:30	Breakfast	2:30	Snack
9:00	Brush teeth and circle time	3:00	Outdoor activities
9:15	Learning centers	3:45	Learning Centers
10:30	Outdoor activities	5:00	Evening snack
11:30	Lunch	5:30	Center closes
12:00	Getting ready to rest/transition		



Part Day Daily Schedule A.M. Class

Greetings
Breakfast
1st Circle Time
Learning Activities/Choices
Outside Play
2nd Circle Time
Snack
Departure



Part Day Daily Schedule P.M. Class

Greetings
Lunch
1st Circle Time
Learning Activities/Choices
Outside Play
2nd Circle Time
Snack
Departure

Activities in the center include the following:

pre-reading skills	puppetry	nature walks
play dough	cooking	dancing
art activities	learning trips	math activities
building	Music	painting
singing	special visitors	games and more
gluing	stories	

What to Wear



Children learn through play. Messy activities (Sand & Water play) are frequently planned, therefore, appropriate dress should allow for exploration without worry. Children should wear clothing that is "play wear". Also, be sure they are dressed for our Northwest weather. Talk with your Family Development Specialist or Home Visitor if you need coats or other clothing.

ASQ (Ages and Stages Questionnaire)

The ASQ is a developmental screening tool for infants, toddlers and preschoolers. The ASQ is to be completed within the first 45 days of enrollment. Child Development staff and parents work together to complete the ASQ questionnaire which identifies areas of growth for your child. The ASQ can be completed in 10–15 minutes and screens for possible delays in five developmental areas; communication, gross motor, fine motor, problem solving, and personal-social development.

Learning Trips

Our pre-school classes participate in regular learning trips. Transportation for these off site trips will be arranged through public transportation or parent transportation. The Head Start bus will be available for one learning trip per class per school year. Prior to all learning trips, information packets will be given to parents and written consent for your child to participate will be obtained. Parents electing to not have their child participate will be asked to arrange alternate care for their child during that time.

Behavioral Health Services

Behavioral health and wellness is a priority for the KCR Head Start/Early Head Start/ECEA Programs. Families and staff have access to consultants for both behavioral health and wellness. Consultants regularly observe in classrooms and meet with staff to review strategies to support the overall wellness of children in the program. Services available include screening for mental wellness, answering questions about wellness, and connecting to counseling services. Families who wish for further information on access to services through the consultants should ask their FDS or Home Visitor.

First Aid

When children are in our care, staff with current training in age-appropriate Cardio-Pulmonary Resuscitation (CPR and First Aid) are always available. The Health Technician and center staff are responsible for assuring our first aid kit (s) are fully stocked.

The location of the first aid kit is different in each center. Locations of first aid kits are clearly posted at sites for easy access. When we go on learning trips and outside of the classroom the teacher is responsible for taking the first aid kit. (Fanny Pack).

Parent Teacher/Home Visit Conferences (Center Based)

Families enrolled in the center based options will be offered a minimum of two home visits and two conferences per year. These opportunities are a chance to build relationships between staff and families, gain information on your child's progress, and be involved in planning goals and activities for your child.

Late Pick-Up Policy

Your well-being is important to us. If caregivers will be late picking up your child, please contact staff as soon as possible. If we do not hear from you within 30 minutes of class end and we are unable to reach any of the emergency numbers who are able to pick-up from the most current Emergency Card, it will be necessary for us to call 911 and request Law Enforcement check on your welfare while child-protective services may be notified to care for your child(ren) until you or another designated adult can be located.

In Extended day fees may be associated with late pick-up after the center has closed

Positive Guidance Policy

KCR's Positive Guidance Policy includes practices that are respectful of all children. This allows them to understand their behavior, develop self-control, and learn to make positive choices. In our program, children are provided with opportunities, assistance, and modeling to develop social skills such as cooperation, helping, negotiating, and talking through their conflicts with others.

Children learn best when adults treat them with dignity, respect, and use techniques such as:

- ◆ Setting clear, fair, and consistent limits for behavior
- ◆ Treating mistakes as learning opportunities and not reasons for reprimand
- ◆ Redirecting children to acceptable behavior or activity before self-control is gone
- ◆ Listening and teaching when children talk about their feelings and frustrations
- ◆ Modeling problem solving skills to resolve conflict
- ◆ Patiently reminding children of rules and why we have them
- ◆ Remembering that our own actions and responses affect children;
- ◆ Making the classroom fun and engaging for children
- ◆ Creating individualized activities for each child to have fun and learn

Within the KCR Early Learning programs, any use of corporal punishment, isolation, or strong physical intervention is a critical matter. At times, mild interventions may be used by staff to help guide a child toward more positive behaviors. Any strategies used to help them regain control will be discussed with parents so that we can work together to help the child build important social skills. Definitions of different types of interventions can be found in the full Positive Guidance Policy in your child's classroom.

The strategies listed below are not allowed in our classrooms and will not be tolerated by staff, volunteers, or other persons visiting our classrooms:

- Bind or tie a child to restrict movement or tape a child's mouth
- Screaming at a child in anger
- Use of toilet learning/training methods that punish, demean, or humiliate a child
- Use any form of corporal punishment including inflicting physical or emotional pain; including public or private humiliation, rejecting, terrorizing, extended ignoring, or corrupting a child.
- Use any form of verbal abuse, including profane, sarcastic language, threats, or derogatory remarks about a child's person or family by ridiculing, blaming, teasing, insulting, name-calling.
- Laughing at children's inappropriate/negative behavior.
- Staff discussing behaviors among themselves in the presence of children or non-involved adults.
- Use or withhold of food, physical activity or outside time, a favorite center or activity, as a punishment or reward.
- Use isolation to discipline a child. *Time outs will not be used without written consent and an individual guidance plan.*
- At no time will staff send a child home or expel them due to challenging behaviors in the classroom.
- At no time will a child be left alone or unsupervised by classroom staff while under the care of the KCR Head Start/Early Head Start/ECEA Programs.

Social-Emotional Screening For All Children

The DECA (Devereux Early Childhood Assessment) assists our staff in developing a strength-based program which fosters healthy social and emotional growth in children.

The 3 primary purposes of the DECA are to help staff:

1. Identify your child's strengths and weaknesses in the following areas:

- Initiative: Your child's ability to use independent thought and action to meet his or her needs.
- Self-regulation: Your child's ability to experience a range of feelings and express them using words and actions that society considers appropriate.
- Attachment/Relationship: A mutual, strong, and long-lasting relationship between a child and significant adults such as parents, family, and teachers.
- The DECA also contains a Behavior Concerns Scale, which measures a wide variety of challenging and problem behaviors seen in some preschool children.

2. Generate classroom profiles and implement appropriate curriculum which builds on the strengths of the children.

3. Identify, intervene and reduce challenging behaviors.

The teacher and the parent each complete a questionnaire on the child; the results from both are then recorded to create a complete picture of the child.

For more information on the DECA, please talk to your child's teacher.

Disability Contact for Parents To request Child Find:

Bremerton School District
(360) 473-1008~Ask for Child Find

Central Kitsap School District
(360) 662-8167

North Kitsap School District
(360) 396-3509

To request 0 to 3 evaluation from early intervention provider:

Holly Ridge Center Infant Toddler Provider (360) 373-2536

KCR Early Head Start/Head Start/ECEAP Special Services Coordinator

: (360) 473-2078

Our Special Services Coordinator is available to Parent(s) at all times for questions, concerns, or information desired. Kitsap Community Resources individualizes services for all children and provides support for children with disabilities.

Family Culture, Holidays, & Traditions Experiences for Young Children

KCR Early Learning & Family Services understands the importance of culture & traditions for each individual child and family. We, as an agency, have chosen to share the experiences of each family in a respectful way. Therefore, we do not teach or promote specific beliefs, rather invite families to share their own experiences with the program as part of the curriculum planning process.

Teachers will:

- Gather information by conducting a Family Culture/Volunteer Survey as part of the initial home visit.
- Complete a group profile to help them plan throughout the year.
- Respect that family culture consists of daily routines and experiences, community events, non-holiday and holiday traditions. All of these experiences should be reflected in the planning process.
- Invite parents to share activities based on their input on the survey and any ideas provided throughout the program year.
- Assist parents (when needed) to carry out activities or implement parent ideas at times that the parent may be unavailable to come into the classroom to interact with the children him/herself.
- Document all activities on lesson plans and Family Framework Poster on a monthly basis.

Families will:

- Complete the survey to provide insights into their family life that will enhance the classroom experiences.
- Guide the curriculum planning process by offering ideas/activities that their family enjoys.
- Provide hands on help sharing the activity whenever possible.
- Respect traditions shared by other families as learning experiences for all children.

Planning for celebrations and traditions will differ and should reflect the group of children and families enrolled in that class. Teaching staff should seek guidance from their Site Supervisor to help with planning when needed. All activities should be developmentally appropriate to the ages and stages of children in the class. At no time should a child miss class or “stay home” because they do not celebrate in the same manner as others. If this is a possibility, staff should consult their Site Supervisor for assistance with alternatives or consider cancelling such “holiday” activities.

Year End Transition Events

Transitions are an on-going process throughout the school year. Whether your child will be continuing with us for another year or entering Kindergarten, our staff would like to share end of the year successes with you. Year end events are an opportunity to plan for your child’s transition from the program to the next class, center, or school. When spring rolls around, your FDS and Teacher will meet with your site’s Parent Committee to help develop a year end event. Year end events are optional and must meet specific guidelines. Key points for planning these events include:

- Organized by parents and staff working together;
 - Part of curriculum planning process includes the Family Framework Poster and Lesson Plans;
 - Will include literacy based activities;
 - Planned with enough time to meet program requirements (about a month ahead);
 - Food requirements, follow KCR Nutrition guidelines;
 - Should be reflective of the cultures of children, families, and individual site;
 - May be held on site or as a learning event (planned early enough to meet program requirements); Learning trips must follow all Early Head start, Head Start, and ECEAP event requirements regardless of location.
 - May not include Potluck
 - Will be held within the program’s regular operating hours;
 - Parents will not be expected to purchase any materials or supplies for year end events. Policy Council approval is required. Fundraising is not allowed for events;
 - Caps and gowns are discouraged. Some children will be going on to Kindergarten and many other children will be remaining in the program and returning in the fall. The program would like to be inclusive of all children and does not hold graduations.
- For more information about Year End Transition Events, please see your **Family Development Specialist or Teacher**.



Health



Health Services

Healthy children have a greater opportunity to learn. The health of children is one of our primary concerns. Head Start/EHS/ECEAP programs provide comprehensive health services program for families and children which includes:

- Finding a medical and dental home
- Preventive health care (medical & dental exams)
- Preventive screenings (vision & hearing, dental, developmental and growth)
- Child nutrition
- Health resources
- Oral health
- Communicable disease awareness
- Home safety and injury prevention



We also work towards improving the child's health by introducing healthy living habits. Healthy living habits and injury prevention techniques are combined in the classroom and home base curriculum, along with daily personal hygiene such as hand washing and tooth brushing.

Our goal is that each child is in the best possible health, that preventative health measures are taken, and that follow up treatment and services are obtained for any health need.

Collaborative efforts with health care providers are made to help connect families to available resources in their community. The Health Services staff will work with families by providing community resources and medical/dental providers in the community in an effort to ensure that your family is linked with a medical/dental home.

Head Start/Early Head Start performance standards require the following:

- Physical (Well Child Exam) & Dental exam: *up-to-date exam within 90 days of enrollment*
- Medical & Dental home: *connected with a healthcare provider or dentist within 30 days of enrollment*
- Immunization Records: *current at enrollment & throughout the program year*
- Vision & Hearing Screening: *within 45 days of enrollment*
- Developmental Screenings: *within 45 days of enrollment*

ECEAP performance standards require the following:

- Physical & Dental exam: *up-to-date exam within 90 days of enrollment*
- Health Screenings: *within 90 days of enrollment*
- Immunization Records: *current at enrollment & throughout the program year*

Health Requirements: **Health Screenings, Physical & Dental Exams, Lead Screening, Immunizations**

Health Screenings

Each child will receive **vision and hearing screenings** in the classroom with parent permission. Screenings for Head Start/EHS children will be performed within 45 days of the child's first day of class or home base services and within 90 days for ECEAP children. **If the screening indicates an area of concern or additional evaluation is needed, the staff will ask parents to follow up with their child's healthcare provider to ensure necessary services are received.** Also, be aware that the health staff for our program will contact your child's healthcare provider(s) for information to ensure their follow-up is complete. All information is kept confidential according to the agency's Confidentiality Policy. The health staff will offer all assistance possible to ensure that the child receives appropriate follow-up treatment.

Physical (Well Child) Exam

All children enrolled in our Head Start/EHS/ECEAP programs should have a complete well child exam (physical) in accordance with Washington Apple Health (Medicaid) EPSDT schedule. Even if your child appears healthy, they still need regular check-ups to screen for any problems that you may not know about. It is also a good time to talk to your child's healthcare provider about any health concerns or issues.

The examination and screening test that may be done during physical examination include:

- Height & weight
- Immunizations
- Vision & hearing screening
- Blood testing for lead toxicity and anemia
- Dental and/or nutrition referral

Our program requires documentation of a current well child exam and it should be completed within 90 days of the child's enrollment. The health staff will assist families if their child does not have current exam and will give parents friendly reminders if child is not up to date. Pregnant women enrolled in our EHS are required to have a dental and medical examination on a schedule deemed appropriate by their healthcare provider as early in the pregnancy as possible and documentation of ongoing prenatal care.

Dental Exam

Dental exams are recommended by the age 1 year and every 6 months after. Dental disease is the leading chronic disease of childhood. **All children who are required to have a dental exam will need documentation of a current dental exam within 90 days of the child's enrollment.** All Head Start/ECEAP children are required to have at least a yearly dental exam. Infant and toddlers enrolled in Early Head Start are required to have an oral examination by a healthcare provider. Children older than age two and has never seen by a dentist or children identified as high risk by their provider should have a dental examination by a dental provider according to state EPSDT schedule. Staff will provide local dental resource for parents needing a dental home and will assist with identifying dental follow up and treatment needs.

Fluoride

Head Start/EHS performance standards requires staff to follow up with parents if their child is receiving any fluoride treatment such as fluoride varnish, supplements or fluoride in drinking water. We encourage parents to consult with their child's medical or dental provider if fluoride supplements needed.

Why fluoride is important?

Fluoride is effective in preventing and reversing the early signs of tooth decay. It makes the tooth stronger, so teeth are more resistant to acid attacks. Acid is formed when the bacteria combines with sugars in the foods we eat and beverages we drink. The acid that is produced harms tooth enamel and fluoride protects teeth by making them more resistant to acid.

Source from American Dental Association (ADA)

Tooth Brushing

All children served in our program will brush their teeth one time per day. This can be after lunch, breakfast, or snack, whatever works best for the teaching staff. At least one adult must role-model by brushing or using tooth brushing puppet to demonstrate.

Lead Screening

Lead is a poison that is very dangerous for young children because of the small size and rapid growth and development. Lead can cause learning difficulties, anemia and other medical problems. A blood test is the only way to tell if your child has lead poisoning.

Lead toxicity screening is required at age 12 months and 24 months for all Apple Health (Medicaid) enrolled children, regardless of lead exposure. If a child did NOT have a lead screening at 12 or 24 months, then it is required to have one test done between 36 and 72 months. Talk to your child's healthcare provider about a blood lead toxicity screening. The health staff will be asking for results of blood level test. This lead screening should be done during your child's well child exam.

Immunizations

To protect all children and staff, and to meet state licensing requirements, **we only accept children FULLY immunized for their age and must be up-to-date with their vaccines while in care.** A completed **Certificate of Immunization Status (CIS) must be signed by parent** and will be kept on file at the site. The health staff will give parents a reminder when their child's next vaccine is due. If a child becomes **PAST DUE with any required vaccines** while in care, the child will be **temporarily excluded from school until vaccines up-to-date.** Children who are **exempt** from vaccines **must have the Certificate of Exemption signed by parent and healthcare provider.**

Children with Special Health Care Needs:

Any child with a chronic health condition such as asthma, allergies, seizures or chronic illness will need to have an individualized health care plan in place BEFORE the child is accepted into care. A health care plan is an individualized, written communication shared by those who care a child with a health condition. This health care plan is developed with the collaboration with the child's healthcare provider.

If a child's health condition is life-threatening requires medication and/or treatment orders, then medication and/or treatment orders will be needed by the child's healthcare provider. Parents will need to review and sign the medication and/or treatment forms along with the health care plan. **Parents will be required to demonstrate and review with staff administering child's medication and/or treatment prior to child's first day of school.**

Medication Management

- ★ **Medication will be given only with prior written authorization of the child's parent or legal guardian AND written instructions from a licensed health care provider.**
- ★ **Medication is ordered to be given to a child during school hours when absolutely necessary.** The parent and prescribing health care provider are urged to design a schedule for giving medication outside of school hours.
- ★ **If medications are required then the Medication Administration form must be completed for each medication and updated with each new prescription by a licensed health care provider.** Sunscreen is the only non-prescription medication that can be administered with parent-only authorization.
- ★ **Parents will be asked to demonstrate for classroom staff the proper technique (consistent with the health care provider's instructions), including the use of any necessary equipment for administering their child's medication.**

Prescription Medications must be in the original container from the pharmacy and labeled with:

- Child's name-----first and last---middle initial if needed,
- Medication name,
- Dosage amount,
- Frequency, and
- Length of time (e.g. days)
- Name of health care provider who prescribed medication
- Expiration date

We will only give a child a non-prescription medication when:

- The medication is in its original container and
- If the dose and frequency is stated on the label, and
- The medication is age-appropriate**
- With written permission from a physician (*with exception to sunscreen*).
- Signature of parent.

**** NOTE:** Most medications say, "under 2 years of age, consult your physician". This means we won't give any child under 2 years of age an "over the counter medication" until we receive written consent from a parent and a health care provider legally authorized to prescribe medicine. This includes common acetaminophen (e.g. Tylenol).

Head Lice "No Nit" Policy

Children may help prevent the spread of lice by not sharing backpacks, hats, clothing, combs, brushes, barrettes, ribbons, and scrunches. Lice are spread by direct contact with the hair or headgear of a person infested with lice. Lice can only crawl; they do not fly or jump.

Policy:

Children found with live lice or nits in their hair will not be allowed to remain at school. A child can return to school once treatment has begun, parent/guardian has removed nits and no evidence of live lice.

Procedures:

1. Staff will discreetly manage lice infestations so that the child is not ostracized, isolated or psychologically traumatized.
2. Teaching staff will conduct weekly head checks on all children in classroom. Head checks should be done during drop off while parent present. Use universal precautions.
3. If live lice or nits are observed, then parents will be asked to pick up their child and begin treatment. Also resources on how to treat head lice will be given to parent.
4. Staff will post Head Lice Exposure Letter in the classroom and send letter home with parents.
5. Teacher will notify the health staff that day if a child was sent home due to head lice.
6. The health staff will follow up with parent regarding treatment and any struggles that family may have treating head lice.
7. Refer family to a licensed health care provider for evaluation if having difficulties with infestation and notify the Health Services Manager.
8. Upon return, the parent/guardian is responsible for contacting staff to alert them of the child's return to class. The child's head check will occur upon re-admittance.
9. If a child has nits only upon returning, it will be handled on a case-by-case basis which will be determined by the health team. This means that support for families to remove nits from the child's hair will depend on: staff availability and the amount of nits that are still found in the child's hair.
10. Any questions regarding these procedures should be directed to the Health Team.

Exclusion Policy

Please keep your child home from school if he or she has one of these conditions or illnesses listed below. Exclusion from attending school is necessary when your child is either too ill to participate in normal activities, the condition or illness creates an unsafe or unhealthy environment for others at care, or when the illness requires a level of care or observation that

1. Fever – 101° F or above, oral temperature; or 100° F or above axillary temperature. Keep home until 24 hour fever free without fever-reducing medications.
2. Behavior indicating that he or she is not well or prevents the child from participating comfortably in activities regardless of temperature.
3. Vomiting-2 or more times within 24 hours.
4. Diarrhea– 2 or more watery stools or one bloody stool within 24 hours.
5. Thick yellow/green discharge from the nose with fever.
6. Thick yellow/green discharge from the eyes (possible sign of infection).
7. Unidentified rash until identified as non-communicable.
8. Severe itching of body or scalp, or scratching of scalp.
9. Lice and nits: Children may be readmitted after all lice/nits are removed.



If the child is diagnosed with any of the **contagious or reportable communicable disease**, a **note from a healthcare provider** will be required **before** child returns to school and parent/guardian will notify the child's teacher as soon as possible.

NOTE: If staff has concerns about a child's illness or ability to safely return to school, we reserve the right to request a note from the child's healthcare provider.

Medical Emergencies

In event of a serious illness or injury to a child in our care, staff will provide appropriate first aid and will contact the **Emergency Medical system (911)**. Parents, or if the parent cannot be reached, the child's alternate emergency contact person will be called immediately thereafter. Emergency response team will determine the need for, and provide, transportation to medical care. Staff will not transport child.

Toilet Training

Around 2½ – 3 years of age, most children will begin showing readiness for toilet learning. Completed in partnership with parents based on the child's development level and expressed readiness. Some signs of this we watch for are: saying they are wet, removing wet clothing, and showing interest in the toilet. When a child begins showing readiness, we will help them remove clothing and sit on the toilet. We encourage and praise all efforts, but are careful not to reprimand for accidents. Accidents are a natural part of learning. Thus, when your child begins to toilet train, please provide clothing that is easily removed and lots of extra clothing.

Physical & Outdoor Activity Policy

KCR Head Start/Early Head Start/ECEA Programs believe that outdoor learning environment and physical activity is an extension of the classroom learning environment. In keeping with this philosophy, teaching staff will adhere to the following policies:

- Teachers will plan for and schedule daily outdoor activities for all children, including infants.
- Teachers will interact with infants in daily physical activities that encourage active exploration of the infants' environment.
- The activities will be reflected on the lesson plans.
- Additional equipment/enhancements will be included in activity planning for the outdoor environment to support skill development in a variety of domain areas.
- Outdoor and gross motor experiences should be offered for a minimum of 30 minutes per day in Part Day classes and for a minimum of one hour per day in Full Day classes.
- Staff need to actively participate in outside activities-not just be an observer.
- Properly dressed children build up resistance by being outside in all kinds of weather. Encourage parents to send their children to school with outerwear appropriate for the weather.
- If inclement weather conditions prohibit outdoor play, alternate gross motor activities must be planned and carried out inside the classroom.
- Withholding physical activity time will not be used as a form of discipline.
- Drinking water will be available for children during outdoor activities and throughout the day.

In some cases, KCR classrooms share playground equipment with school districts, private child care, and public playground spaces. KCR staff are responsible to ensure that children play only on equipment that is developmentally appropriate and actively supervise use of all equipment.

During outdoor play or visits to playgrounds, children may not use the following equipment:

- Geo dome "spider web" climber
- Zip line
- Swing set (excludes supervised use of tire swing)
- Any equipment a child is unable to use independently (this is a clear sign that the equipment is not developmentally appropriate for the child).

Food Allergies, Intolerances, or Foods not Eaten for Cultural/Religious Reasons

We will provide food substitutions as needed. In some circumstances we may request verification from your doctor of these food allergies or intolerances. Food dislikes, however, do not receive the same accommodations.

Nutrition Plans

Individualized nutrition plans are developed as needed when a child has specific dietary requirements based on a medical condition, a food allergy or intolerance, or an oral-motor delay. All disabling food reactions require a signed medical statement from a recognized medical authority. These are kept in the child's classroom and file and will always be signed by the classroom staff and parent or guardian. We do our best to accommodate specific dietary needs while striving to meet the USDA requirements.

Outside Food

To minimize the risk of foodborne illness and allergic reactions we do not allow food prepared or purchased outside of KCR into the classrooms. Parents and community members are welcome to participate in classroom food activities that have been approved by our Certified Nutritionist. Food items will be purchased by the site supervisor.

Family Style Meals

At mealtimes, children and staff sit together at the table and eat family style. Children are encouraged to serve themselves and pour their own beverages as developmentally appropriate. Children are never forced to eat certain foods or amounts of food, however the adults will model healthy portion sizes and engage the children in pleasant conversation.

Menus

KCR provides a colorful menu of nutritious culturally diverse meals and snacks that are low in sugar, fat and salt and align with the USDA guidelines. Parents are encouraged to provide feedback and recipes as desired.

Dear Parents:

Non-discrimination Statement

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <https://www.ascr.usda.gov/filing-program-discrimination-complaint-usda-customer> and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov.

USDA is an equal opportunity provider, employer, and lender.
Certified Nutritionist, Phone: 360-473-2090