

F.A.C.T., Inc.
Families and Children Together, Inc.

Just For Parents



**P.O. BOX 1838
2720 Vine Street
EL DORADO, ARKANSAS 71731
PHONE: (870) 862-4545 OR FAX: (870) 862-0830
Website: www.fact-inc.com**

2008-2009

**Dr. Brenda J. Holder
Executive Director**

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**F.A.C.T., Inc. Service Locations
Administrative Offices
P.O. Box 1838/2720 Vine Street
El Dorado, Arkansas 71731
Phone: (870) 862-4545 Fax: (870) 862-0380**

*Bearden
Head Start Center
P.O. Box 199
431 North School Street
Bearden, AR 71720
Phone: (870) 687-2955
Fax: (870) 687-2923

Fordyce
Head Start Center
104 College Street
Fordyce, AR 71742
Phone: (870) 352-3333
Fax: (870) 352-5947

Bearden
ABC Center
100 Oak Street, Room 1
Bearden, AR 71720
ABC Phone/Fax: (870) 687-2020

Hampton*
Head Start Center
P.O. Box 810
Hampton, AR 71744
Phone/Fax: (870) 798-3225

Camden
Head Start Center
1199 Maul Road
Camden, AR 71701
Phone: (870) 836-5227
Fax: (870) 836-5189

Harmony Grove
Head Start Center
401 Ouachita 88
Camden, AR 71701
Phone/Fax: (870) 574-2757

*El Dorado/Fairview
Head Start Center
800 Barnes
El Dorado, AR 71730
Phone: (870) 864-0117
Fax: (870) 864-0071

Junction City
Head Start/ABCSS Center
P.O. Box 507
300 West Holly
Junction City, AR 71749
Head Start & ABCSS
Phone: (870) 924-5615
Fax: (870) 924-4646

Emerson
Head Start Center
P.O. Box 128
508 West Main
Emerson, AR 71740
Phone/Fax: (870) 547-2564

Magnolia
Head Start Center
655 Hwy. 79 South
Magnolia, AR 71753
Phone/Fax: (870) 901-7100

Magnolia East
Head Start/ABC Center
801 Calhoun Road
Magnolia, AR 71753
Head Start & ABC
Phone/Fax: (870) 234-1701

McNeil
Head Start Center
P.O. Box 483
Logoly Road
Mc Neil, AR 71752
Phone/Fax: (870) 695-3900

Morning Star
Head Start Center
804 Lockhart
El Dorado, AR 71730
Phone/Fax: (870) 862-2755

Murmil Heights
Head Start/ABCSS Center
2000 Ripley
El Dorado, AR 71730
Phone: (870) 862-3169
Fax: (870) 862-1396

SAU Tech
ABCSS Center
P.O. Box 35
100 Carr Road
Camden, AR 71701
Phone/Fax: (870) 574-1515

Strong
Head Start/ABC Center
P.O. Box 60
735 South Concord
Strong, AR 71765
ABC
Phone/Fax: (870) 797-2416
Head Start
Phone/Fax: (870) 797-7378

Taylor
ABC Center
506 East Pine Street
Taylor, AR 71861
Phone/Fax: (870) 694-6018

West Woods
Head Start Center
1500 Bradford Street
El Dorado, AR 71730
Phone/Fax: (870) 875-1714

*Includes the Early Head Start program for infants and toddlers

MISSION STATEMENT
of
F.A.C.T., Inc

To empower children and families!

PHILOSOPHY
of
F.A.C.T., Inc.

We believe that from birth, all children need early child development experiences that support their unique characteristics and provide love, warmth, and positive learning experiences. All families need encouragement and support from their community to achieve their own goals and provide a safe and nurturing environment for their young children.

STANDARDS OF CONDUCT

In accordance with the **Head Start Performance Standards (1304.52(h)(1-3)**, the provision of standards of conduct support agencies in reinforcing appropriate professional behavior among staff. These standards are a guide to staff members in decision making and are to protect staff against allegations of misconduct. By law, all staff, consultants, and volunteers:

- ⇒ Respect and promote the unique identity of each child and family and refrain from stereotyping on the basis of gender, race, ethnicity, culture, religion, or disability.
- ⇒ Follow program confidentiality policies concerning information about children, families, and other staff members.
- ⇒ Ensure no child is left alone or unsupervised while under their care.
- ⇒ Use positive methods of child guidance and not engage in corporal punishment, emotional or physical abuse, or humiliation. In addition, staff are not to employ methods of discipline that involve isolation, the use of food as punishment or reward, or the denial of basic needs.
- ⇒ All employees engaged in the award and administration of contracts or other financial awards are not to solicit or accept personal gratuities, favors, or anything of significant monetary value from contractors or potential contractors.
- ⇒ Violations of the Standards of Conduct are to be reported to the Assistant Director.
- ⇒ Volunteers, substitutes, or consultants violating the Standards of Conduct will not be allowed to work in a F.A.C.T., Inc. center.

**Goals
of
F.A.C.T., Inc.**

- ◇ To strive for excellence in services and support programs that serve both children and families;
- ◇ To focus on staffing and career development;
- ◇ To restructure management oversight to provide for greater accountability;
- ◇ To build a strong and enduring infrastructure for ongoing research;
- ◇ To continually assess needs, strategically plan and specifically address local priorities;
- ◇ To expand the number of children served and the scope of services provided in a way that is more responsive to the needs of children and families;
- ◇ To serve as a central community institution for children and families;
- ◇ To forge new and maintain current partnerships to meet the changing needs of individual families and communities;
- ◇ To provide safe and developmentally enriched care giving environments which promote the physical, cognitive, social and emotional growth of children from birth, and prepare them for future growth and development;
- ◇ To provide comprehensive programs involving activities generally associated with the fields of health, social services, parent involvement, disability services and education;
- ◇ To support parents, both mothers and fathers, in their roles as primary care givers and educators of their children, and families in meeting personal goals and achieving self-sufficiency across a wide variety of domains;
- ◇ To mobilize communities to provide the resources and environments necessary to ensure a comprehensive, integrated array of services and support for families; and
- ◇ To ensure the provision of high quality responsive services to families through the development of highly-trained, caring and adequately compensated program staff.

COMMUNITY PARTNERSHIP GOALS
of
F.A.C.T., Inc.

Although Head Start and Early Head Start are federal to local programs, F.A.C.T., Inc., Head Start, and Early Head Start recognize the importance and role of the state in policies, initiatives, and decisions that affect low income children and their families. Therefore, the formulation of local community partnerships are intended to:

- ◆ Assist in the development of significant, multi-agency and public-private partnerships between FACT., Inc. and all interested community services;
- ◆ Assist in building early childhood systems and access to comprehensive services and support for all low income children;
- ◆ Encourage widespread collaboration between FACT., Inc. and other appropriate programs, services, and initiatives to augment FACT., Inc.'s capacity to be a partner in state initiatives on behalf of children and their families; and
- ◆ Facilitate the involvement of FACT., Inc. in state policies, plans, processes, and decisions affecting FACT., Inc.'s target population and other low income families.

As a Head Start and Early Head Start grantee, F.A.C.T., Inc. and local community partners formulate partnerships intended to:

- ◆ Maximize the strengths of parents to provide their family unit with the ability to promote the health, well-being, social and educational skills of their children;
- ◆ Assist families or individuals to become self-sufficient;
- ◆ Encourage parents to take responsibility for the physical, emotional, and financial support of their family unit; and
- ◆ Advocate parents and community leaders to work together to make communities safe, healthy, and developmentally supportive for children, youth, and families.

What We Believe.....

WE BELIEVE THAT YOU, THE PARENT, ARE THE CHILD'S FIRST TEACHER.

The hope for a better world lies with its children.

- We believe that the impressionable, pre-school years are the most important years in the life of a child. We are dedicated to providing a healthy, friendly, and stimulating environment which allows children to grow and develop to their fullest potential.
- We believe that it is important to lay a strong foundation for continuing educational development within the framework of meeting the needs of each child.
- We believe that the education of children requires the efforts of both our staff and you, the parent.
- We believe in a climate of cooperation and understanding which encourages parent involvement in the daily education of children.

We look forward to sharing many happy experiences with you and your child during this program year.

WELCOME TO OUR FAMILY

Your Child's Teacher: _____

Teacher's Assistant: _____

Family Service Advocate: _____

Home Educator: _____

Other: _____

Center Information Just For Parents

ARRIVAL AND DEPARTURE

Children must be signed in upon their arrival, and must be signed out at their departure by **AUTHORIZED** adults or children over 14 years of age. In order to authorize someone to pick up your child, there must be a completed authorization form in your child's file. These forms will be filled out at the time of enrollment, and should you need to add or delete names to your child's pick-up authorization list, talk with your child's teacher to complete the necessary file information.

Whenever parents (or designee) are later than the designated pickup time allowed, the parent must sign a LATE PICKUP form explaining the reason for being late. A consultation concerning the importance of being timely in picking up children should occur with the center director at this time. If three or more late pickups occur within the program year, the parent may be requested to transfer their child to a home-based option.

If your child is regularly left in the center after hours, the proper authorities will be notified of possible child neglect.

ATTENDANCE

It is very important that children arrive at their centers on time. Learning is especially important in the early morning hours. When children arrive late, much of the important concepts to have been learned that day may already have been missed.

Additionally, teachers must call in lunch counts, often by 8:30. When parents are later than 9:00 in arriving with their child, the lunch count cannot be changed and no lunch will be provided for the child. Because of this and other reasons, whenever a child cannot be delivered to the center before 9:00, the child will not be accepted into the center for that day and will be considered absent for the day. If, however, the parent lets the teacher or center director know ahead of time that the child will be late, because (for example) the child has a dental appointment scheduled, or that the child will be arriving late due to car trouble, then the child will be accepted and lunch plans can be made for the child.

If your child is absent four consecutive days for unexplained reasons, or if an irregular attendance pattern is observed, a staff member will contact the family and you will receive a letter explaining the program's attendance policy. Continued unexcused absences will result in your child being dropped from the program.

(SUMMER) ATTENDANCE POLICY—For EHS

During the period between the end of the current Head Start school year (usually in mid-May) and the beginning of the next Head Start school year (usually in mid-August), each child enrolled in Early Head Start must attend at least 4 days per week. If the family is taking a vacation, or if the child falls ill and will be absent for more than one day, staff must be notified and this information must be recorded in the roll book under “Reasons for Absence.” In cases where the child is absent more than one day per week and staff have not been notified of a legitimate excuse, the child may be dropped from the program.

The parents/guardians of each child enrolled in Early Head Start will receive a consultation outlining this policy from the child’s teacher, Family Service Aide (FSA), or Family and Classroom Assistant (F&CA) prior to the end of the current Head Start school year.

CONFERENCES

To provide the best services possible for your child and family, we encourage on-going communication between parents and the center staff. Parent/Teacher conferences may be requested by either party at any time with a minimum of two per year for Early Head Start, Head Start and Arkansas Better Chance (ABC) programs.

DAILY SCHEDULE

The daily classroom schedule is arranged by the Education Advisor in accordance with the funding source guidelines and minimum licensing standards. Any changes by staff in reference to the schedule must be approved by the Education Advisor prior to being implemented. The daily schedule is to be posted in the parent area and adhered to as closely as possible.

In Early Head Start classrooms, immobile infants need a minimum of one (1) hour of rocking each day, while mobile infants/toddlers need a minimum of thirty (30) minutes of rocking each day. Babies may be left in cribs, if content, for **very** brief amounts of time. Sleeping children should be visually checked every ten (10) minutes and physically checked every thirty (30) minutes. All babies are to have floor time daily and a variety of music is to be played throughout the day.

Each center will operate on a daily schedule that will be posted in detail at the center. Please see your child’s teacher for a copy of the EHS/HS or ABC Daily Schedule.

EXTENDED HOURS PROCEDURES

To remain competitive and meet the needs of our parents, local Head Start hours of services needed have been changed to meet the local school districts hours.

Criteria

Families meeting the criteria of being working parents, in school/job training, and/or those with children meeting the disability standards will be allowed to remain in their respective centers receiving extended services. FACT, Inc. center class schedules will be extended to approximately 2:45 pm. Centers located within a local school district where it is not feasible to remain until 2:45 pm, will be adjusted so as not to interfere with the public schools release time. Eligibility will be periodically checked to ensure compliance with all requirements.

Procedures

At the beginning of each program year, or at Parent Orientation, families of preschool (three to five yr old) children will be surveyed to determine if enough qualified families are interested in or in need of extended hour services. There must, at a minimum, be eight (8) children/families in each center who meet the criteria for *Extended Hours*. All licensing requirements on staffing, etc. must be maintained. Multi-classroom centers will use a rotation schedule among the teaching staff to cover the extended time. Each Center Director will be responsible for establishing plans for that center.

Qualifications

A 'Working Parent(s)' family means: working at least 30 hours a week; time of day doesn't matter. For a dual parent family this means both parents must be working, or one working and one in school (see school qualifications below). 'Parent in School' means: a parent in school taking a minimum of 12 hours of classes per semester.

Verification Process

One staff member at each center is to be assigned to verify qualifying status of participating families upon acceptance. Monthly random 'spot checks' are to be done (50% of enrollment at a minimum) to verify continued eligibility. To verify eligibility use:

- 1) School: note from instructors or business office verifying attendance. A copy a class schedule alone does not prove attendance.
- 2) Work: most recent pay stub or written verification from employee's supervisor or finance department proving ongoing employment.

Parents have **five (5)** business days to prove school or work involvement upon request by verification officer.

If a family's employment or schooling is terminated, 30 days are allowed to gain employment or reentry into school. If not, then the child is dropped from the *Extended Hours* program.

FIELD TRIPS

Parents are notified in writing of all field trips prior to the scheduled trip. Signed permission slips stating the destination, departure time from the center, and estimated time to arrive back at the center are kept in a file at the center. If a child is denied permission to participate on the field trip, alternate arrangements are made.

All Field trips must be approved by the Education Advisor prior to scheduling. Submit tentative field trip schedules on the form provided by the end of September. If this tentative schedule is changed, send an amended schedule to the Education Advisor. Indicate whether a notice to the Health/Nutrition Coordinator is needed regarding these changes. Field trips must pertain to the curriculum.

NO FIELD TRIPS REQUIRING TRANSPORTATION WILL BE ALLOWED. *WALKING TRIPS ONLY!

Non-walking field trips may be allowed if 100% of parents will volunteer to take their own children to the field trip and the center(s) may also close.

Prior approval **MUST** be given by Central Office. *One exception to this rule is using the FACT, Inc. bus for the (field) trip, etc.

The Nutrition Coordinator must be contacted one full week prior to a scheduled field trip if the trip will involve the center staff and children being gone during any regularly scheduled meal-time.

On the day of the field trip, a sign containing the following is posted on the main entry door of the Center:

- Destination (with directions)
- Time of departure and
- Expected time of return

For EHS: EHS centers will do walking field trips or buggy trips around the block or a designated center area. Staff will use this time to initiate the child to items of interest (i.e.: trees, flowers, leaves, grass, birds, etc.)

Parents must sign a Field Trip Permission Form, if the field trip will take the child off of the center property.

FUND RAISER, DONATION, & SOLICITATION

No fund raising activities, requests for donations, or solicitations are to be initiated by Centers, Classrooms, or Parent Groups without written approval of the Executive Director or designee. Planning preparations and/or announcements for these will be handled through the Central Office.

GRADUATION CEREMONY POLICY

F.A.C.T., Inc. will not sponsor formal graduation ceremonies. There are several reasons for this policy:

1. Long, repetitive practices for such ceremonies are not developmentally appropriate for preschoolers.
2. Not all parents can buy (or wish to buy) expensive clothing, or caps or gowns, for their preschoolers, and no parents should feel pressured to spend money they may not have.
3. Such ceremonies are emotional powder kegs, with many parents having strong feelings and many different ideas about how such ceremonies are to be carried out.
4. Speakers are generally chosen to please adults, not for the benefit of the children.
5. Locations, equipment, room temperature, degree of formality implied, types of certificates, and dress are all objects of controversy that can be avoided when plans are kept simple.

This is not to say that a straightforward, brief program cannot be held. Parents are advised to work with the teacher in planning an uncomplicated but pleasant end-of-year program. Suggestions might be: wearing Sunday dress, meeting in the school cafeteria or library, having the children sing a few of the songs they have learned, and having the teacher give out certificates to all (three-and-four-year-old) children for completing a year of preschool. On the other hand, parents might plan a picnic on the school grounds, children might wear short sets, and teachers might hand out portfolios of the children's work from throughout the year.

Specifically, caps and gowns will not be worn, guest speakers will not be invited, expensive dress will not be encouraged, and space will not be rented.

HOME VISITS

In the center based Head Start programs, a minimum of two home visits will be scheduled by both your child's teacher and your assigned Family Service Advocate. For Early Head Start, teachers will also conduct a minimum of two home visits. Pregnant mothers enrolled in the Early Head Start center based program will have a weekly home visit. The Health/Nutrition Coordinator will accompany the Family/Classroom Assistant on a home visit when the baby is two weeks old to assess the need for further assistance.

In the Home Based program, the Home Educator will visit in the home weekly. By becoming better acquainted with the family and home environment, the staff can better serve each child. The home visit is a very special and important part of our program. During this home visit the family and staff will share information concerning the child's progress and needs, in addition to discussing any family needs and possible referrals or other services. Throughout the program year, parents will be provided with educational and informative materials regarding matters of special concern.

OPERATING SCHEDULE

See individual centers for program hours and specific opening and closing times.

With some exceptions, all centers will be open the same days that the local public schools are in session. Centers will also observe the same snow days as the public schools.

PARADE POLICY

Due to insurance restrictions, **NO** individual center, classroom, home based group, or parent club is allowed to participate in any parade while representing F.A.C.T., Inc., Head Start, ABC, etc.

Service Information Just for Parents

COMMUNITY PARTNERSHIPS

F.A.C.T., Inc. serves families within the context of the community, and recognizes that many other agencies and groups work with the same families. Our objective is to ensure that we collaborate with partners in our community in order to provide the highest level of services to children and families, to foster the development of a continuum of family centered services, and to advocate for a community that shares responsibility for the healthy development of children and families of all cultures.

EDUCATION AND EARLY CHILDHOOD DEVELOPMENT

F.A.C.T., Inc. strives to provide all children with a safe, nurturing, engaging, enjoyable, and secure learning environment in order to help them gain the awareness, skills, and confidence necessary to succeed in their present environment, and to deal with later responsibilities in school and in life. Each child is treated as an individual in an inclusive community that values, respects, and responds to diversity. The varied experiences provided by the program support the continuum of children's growth and development, which includes the physical, social, emotional, and cognitive development of each child. Infant and toddler staff are responsive, nurturing, caring, and in tune with each child's cues and developmental stages. They are expected to provide an emotionally secure and physically safe environment to the children; sitting on the floor to be at the child's level unless rocking, diapering, feeding, etc.; and providing a developmentally appropriate learning environment to meet the individual needs of each child.

FAMILY PARTNERSHIPS

F.A.C.T., Inc. offers parents opportunities and support for growth so that they can identify their own strengths, needs, and interests, and find their *own* solutions. The objective of F.A.C.T., Inc. is to support parents as they identify and meet their own goals, nurture the development of their children in the context of their family and culture, and advocate for communities that are supportive of children and families of all cultures. The building of trusting, collaborative relationships between parents and staff allows them to share with and to learn from one another.

HEALTH AND DEVELOPMENTAL SERVICES

F.A.C.T., Inc.'s commitment to wellness embraces a comprehensive vision of health for children, families, and staff. The objective is to ensure that, through collaboration among families, staff, and health professionals, all health and developmental concerns are identified, and children and families are linked to an ongoing source of continuous, accessible care to meet their basic health needs. The "Partners For A Healthy Baby" prenatal curriculum is used in the Early Head Start program to reinforce the importance of prenatal care.

HEALTH AND SAFETY

It is our goal to support healthy physical development by encouraging practices that prevent illness or injury, and by promoting positive, culturally relevant health habits that enhance life-long well-being.

LITERACY

F.A.C.T., Inc. offers parents opportunities to participate in family literacy services by checking out books from the various lending libraries, etc. Parents are also made aware of community programs available that encourage literacy development. For example: reading tutors; GED classes; ESL classes; college catalogs; information on financial assistance, etc. Staff make referrals for family members found to be in need of literacy or educational training and all referrals, services and outcomes are documented.

FATHER/MALE INVOLVEMENT

One of the goals of F.A.C.T., Inc. is to support parents, both mothers and fathers and other significant males, in their roles as primary care givers and educators of their children and families. Father/Male involvement and participation in the program is very important to F.A.C.T., Inc. Interviews, observations, children's records, training reports, meeting agendas, minutes and rosters serve as the source of data in assessing the complete picture of father/male involvement in their child's life and in the program in general.

MENTAL WELLNESS

The objective of our mental wellness program is to build collaborative relationships among children, families, staff, mental wellness professionals, and the community at large, in order to enhance awareness and understanding of mental wellness and the contribution that mental health information and services can make to meet the needs of all clients.

NUTRITION

The goal of our nutrition program is to promote wellness by providing nutrition services that supplement and complement those of the home and the community. Child and family services assist families in meeting their nutritional needs and in establishing good eating habits that nurture needs.

SPECIAL SERVICES

F.A.C.T., Inc. operates under a federal mandate to make available, at a minimum, ten percent of its enrollment opportunities to children with disabilities. Historically, F.A.C.T., Inc. exceeds this mandate and serves children in integrated, developmentally appropriate programs. In addition, F.A.C.T., Inc. has a mandate to recruit and enroll income-eligible children and children with disabilities who are most in need of services and to coordinate with the local education agencies (LEA) and other groups to benefit children with disabilities and their families.

TRANSITION

Transition is an ongoing process beginning with recruitment and the application for program services, and continuing until a client leaves the program or a child enters kindergarten. Transition activities occur both in and out of program settings.

Enrollment in F.A.C.T., Inc. programs require a determination as to the type of setting needed to benefit the client. Transition conferences are held to inform the parents of children entering Early Head Start, Head Start, or ABC and pregnant women entering the Early Head Start programs of rules and regulations, program services, options, and specific health, dental, and developmental needs of each client. Transition Out conferences are held to discuss progress and to plan for the transfer of required records to the next program setting.

Parent Involvement Opportunities

HOME-SCHOOL CONNECTION

Communication between the home and school is very important in order to work together toward the proper growth and development of your child. Your child's experiences at home are just as important as what is being learned in the center. We encourage you to help your child learn at home by following the suggestions below:

INFANTS AND TODDLERS

- 1) Hold, cuddle, and talk to your baby often.
- 2) Give your child lots of room to practice walking. Provide safe ways for your baby to be active and move around.
- 3) Listen and respond to your baby by imitating his or her sounds.
- 4) Talk to your baby—he or she will understand before being able to talk.
- 5) Provide ways for your baby to use the senses (i.e. toys with bright colors, soft fabrics, etc.)
- 6) Create a space where your child can play and make a mess safely.

PRESCHOOLERS

- 1) Talk to the teacher to find out how your child is progressing. The teacher will give you materials to help at home.
- 2) Let your child plant a seed, water it, and watch it grow. Bean seeds are good because they sprout in a few days.
- 3) Teach your child to say his or her name and age.
- 4) Teach your child his or her body parts.
- 5) Teach your child to wash hands before meals and after using the bathroom.
- 6) Teach your child about food and colors at the grocery store.
- 7) Using old magazines, teach your child the name of animals, vegetables, fruits, and other objects.
- 8) Teach your child to say "PLEASE", "THANK YOU", and "EXCUSE ME".
- 9) Teach your child to cover his or her mouth when sneezing, yawning, or coughing.
- 10) Read stories to your child and take time to TALK about the pictures.
- 11) When disciplining your child, try to explain what has been done wrong instead of hitting.
- 12) Let your child play with things like empty boxes, plastic jars, cake pans, and spoons.

PARENT CLUB

Parents are encouraged to attend Parent Meetings held once each month. The meetings are designed to give parents the opportunity to be a part of their child's education by becoming involved in making decisions relating to the nature and operation of the program. In addition, informative training on a wide range of topics is provided at each meeting.

In September parents will elect officers who, along with the center staff and home base staff, conduct the meetings. All parents and other interested persons of enrolled children are members of the Parent Club. Meetings will be held at a time and place that is convenient to the parent group.

Officers of the Parent Club are as follows: President, Vice President, Secretary, and/or Treasurer, and a Policy Council Representative.

In addition, parents willing to serve on the Health, Education, or the Male Involvement Committee will volunteer to have their names submitted to the Central Office for selection.

PARENT RESPONSIBILITIES

1. All parents of children enrolled in the preschool programs must provide a cover for the child's mat (i.e. a crib sheet) and adequate cover for the child (i.e. blanket, towel, etc.) during rest time. These covers must be taken home to be laundered a minimum of once a week, and more often as necessary.
2. Parents or another responsible authorized adult must sign their children in and out daily. The children are the responsibility of the staff only after they are signed in.
3. Children must be on time in the morning and must be picked up on time in the afternoon. Children who drop from the program must re-apply.
4. Children should bring personal toys to school **ONLY** for show and tell activities. Please obtain permission from the center staff prior to bringing any toys to the center. If a child wants to share a book, it should be appropriate for pre-schoolers.
5. Do not allow children to bring money to school.
6. Tennis shoes or rubber soled shoes are recommended. Cowboy boots, flip flops, backless sandals, body suits, overalls, and belts should not be worn.
7. Send an extra change of clothes in a bag with the child's name on it. Accidents do happen!

8. Dress your child in clothes that are comfortable and can be used for painting, playing outside etc. Send an extra sweater or jacket that can be left at the center in case the weather changes unexpectedly.
9. Do not send food or gum to the center.
10. Breakfast is served from 8:00 to 8:30 a.m. Parents need to notify the teacher if the child arrives late and has not had breakfast .
11. Permission slips for field trips and medical appointments will be signed prior to each trip. Field trips are announced, and parents are invited to attend and assist.
12. Do not send your child to school when he/she is sick. Do not send your child to school if he/she has vomited two or more times in a 24 hour period. Do not send your child to school if he/she has not been free of fever for 24 hours, and a child **MUST** be taken home after extensive dental work. **If your child becomes ill while at school, a parent or other authorized person will be called to pick the child up immediately.** As a safety precaution, the child will be separated from the rest of the group until he or she can be picked up. Temporarily excluding a sick child from program participation protects the health and safety of the affected child, other children, and staff.
13. Only prescription medicine will be given by the staff to a child and only **after a consent form is signed by the parent or guardian.** Medicine must be clearly labeled with instructions and the name of both the medicine and doctor must be visible. Documentation will be kept at the center specifying at what time and by whom the medication was administered. Parents should dispense all non-prescriptions drug including Tylenol, aspirin, or cough medicine. (See Medication Policy)
14. All children will rest after lunch. Children will not be forced to go to sleep during this period, but will rest quietly so that others may sleep. If you are coming early for your child, please notify the staff so your child will be ready.
15. Check your child's cubby each day before leaving the center for any papers and materials to be taken home.
16. **Inform the center staff of any change of address, telephone numbers or changes in who is authorized to pick up your child.**
17. Each parent of infants and toddlers must provide 6 bottles (four 8 ounces and two 4 ounce) with caps and bottle rings for their child. The four 8 ounce bottles and one 4 ounce bottle will be used for formula. The remaining 4 ounce bottle will be used for water. These bottles are to remain in the facility.

**CHILD CARE REIMBURSEMENT POLICY
For Parent Out-of-Area Travel**

In the event that child care would prevent parents from fully participating in required program activities, reimbursement of child care expenses to low-income parents would be made on a case by case basis using the following rates and guidelines:

Rates (per hour)

One child	\$2
Two Children	\$3
Three Children	\$4
Four or more children	\$5 (maximum amount to be paid per hour)

Guidelines

The maximum number of hours paid per day is 8.

The maximum number of hours paid per week is 40.

The allowable age group to be paid is aged 12 and under.

Allowable providers **do not** include spouse, grandparents, and/or older siblings.

POLICY COUNCIL

The Policy Council is a group consisting of at least 51% parents of children enrolled in the program, plus representatives of the community. Along with some management functions (outlined in section 1304.50 of the Federal Regulations), the Policy Council has the opportunity to initiate suggestions and ideas for program improvements.

Community representatives will be approved by the parent members of the Policy Council. Program staff may attend the policy council meetings in a non-voting capacity. Regular Policy Council meetings will be held a minimum of four times per year, and other meetings will be held when necessary.

VOLUNTEERS

Parents and other interested persons are encouraged to serve as volunteers in the centers. Volunteers may assist staff by performing classroom and playground duties, helping with special projects, making items for the center, assisting with maintenance, and donating needed items.

Parent Code of Conduct

1. BEHAVIOR OF PARENTS TOWARD THEIR OWN CHILDREN

Parents will address misbehaviors of their own children attending a preschool function or classroom in a positive way. No physical or verbal punishment of children is allowed at a preschool function or classroom. This includes, but is not limited to, striking your child in any way or cursing at your child at a preschool function or classroom.

2. BEHAVIOR OF PARENTS TOWARD OTHER PEOPLES' CHILDREN

Parents will direct all concerns regarding other children at a preschool function or classroom to preschool staff immediately. It is not the intent of this standard to stop a parent from helping a child who is in immediate danger, but to use common sense in a situation where a child may be at risk of being harmed.

3. BEHAVIOR OF PARENTS TOWARD STAFF

Parents will treat preschool staff members with respect, and follow agency policy regarding disagreements or concerns. It is never appropriate for a parent to threaten a staff member in any way.

4. BEHAVIOR OF PARENTS TOWARD OTHER PARENTS

If a parent has a disagreement or problem with another parent at a preschool function or classroom, that problem will be addressed with respect. It is never appropriate for a parent to threaten another parent at a preschool function or classroom. To promote a safe, happy environment for our children, parents will address problems with other parents and staff in private, away from children and other guests. No quarreling in front of children is allowed.

5. LANGUAGE OF PARENTS

When in the presence of children at a preschool function or classroom, parents will use language appropriate for young children to hear. Cursing and/or swearing is not allowed. *Cell phone ring tones* must likewise be appropriate for young children to hear.

6. SMOKING

Parents will smoke only in designated areas when at a preschool function or classroom. Our buildings/playgrounds are non-smoking, as are all fieldtrips and preschool activities. If a parent must smoke, staff will advise the parent of a designated area, away from and out of view of the children.

7. CLOTHING

Parents will be fully dressed in acceptable, modest clothing at all preschool functions.

It is not our wish to exclude or terminate the enrollment of any child or family. If the situation arises, however, that does place staff, children, or family members in danger, F.A.C.T., Inc. reserves the right to re-evaluate the enrollment status of a family to protect the safety of others.

If, at any time, staff feels a child, a staff member, or any person on campus is being threatened or is in danger, appropriate law enforcement will be called.

VOLUNTEERS

WHAT PARENTS/VOLUNTEERS CAN DO

Volunteers can collect, save or donate:

Newspaper; magazines; popsicle sticks; plastic bottles; calendars and advertising materials with brightly colored pictures suitable for classroom use; sturdy small boxes and cartons; shoes; outgrown but suitable clothing for dramatic play; sewing scraps; ribbons; braid; empty spools; and tin cans in different sizes.

Volunteers at home can:

1. Cut pictures from magazines
2. Mend donated clothing
3. Make clothing for dolls
4. Make bean bags for the center
5. Make aprons
6. Mend books and toys
7. Make costumes for special occasions

Volunteers in the center can:

In the Classroom

1. Assist the teacher and teacher assistant with artwork, playing games, reading books, lead singing, and telling stories
2. Assist with transitions and hygienic routines such as brushing teeth, hand washing, etc

On the Playground

1. Play games
2. Watch the children

In the Lunchroom and Kitchen

1. Show the children how to set the table
2. Encourage the children to eat and talk about their food
3. Help the children clean off the table after meals
4. Help the staff with kitchen cleanup

WHY DO PEOPLE VOLUNTEER

“It is one of the most beautiful compensations in this life that no man can seriously help another without helping himself.”

~RALPH WALDO EMERSON~

People get involved in volunteering in many different ways and for a variety of reasons. Volunteer positions are as diverse as the people who are contributing the services, and the list of reasons why people volunteer is always growing.

Volunteering not only allows an individual the opportunity to help, but also provides many benefits to the volunteer. Through volunteering a person can:

- * Gain valuable work experience.
- * Explore career possibilities.
- * Achieve new skills.
- * Confront community issues.
- * Make valuable use of leisure time.
- * Make use of particular talents or abilities.
- * Secure employment references.
- * Improve communications skills.
- * Contribute to the required 25% local non-federal match to ensure the continuance of State and Federal funding.

F.A.C.T., Inc. staff encourage you to become a part of the center activities and your child’s education by volunteering your time and talents. We value your assistance and want you to share ideas with us.

- * Be willing to volunteer. **Volunteers are needed daily.**
- * Inform the staff of any special skills you may have. We need your help.
- * Share your ideas with your child’s teacher or home educator.

VOLUNTEER JOB DESCRIPTION

Major Objectives of Position:

- 1) To enhance the job skills of parents by providing on the job training and experience.
- 2) To enhance the self-confidence and independence of parents.
- 3) To enhance the child development programs of Families and Children Together, Inc. by fostering an environment in which children can develop to their full potential.

Responsibilities:

Assist center staff in day to day activities such as:

- | | |
|-----------------------------|----------------------------|
| making learning materials | assisting with field trips |
| supervising playground | reading stories |
| preparing and serving meals | cleaning/maintenance |

Other duties as needed or as volunteer's aptitudes or talents can be best utilized.

Qualifications:

Must complete an application/job description.

Training Requirements:

A brief orientation will be provided at the first Parent Meeting or when the parent comes to the center to volunteer. All volunteers will receive an orientation on general rules and regulations, discipline procedures, safety procedures and emergency plans before beginning work. On-going training will be provided as jobs are assigned.

Limitations:

I understand that I can not be the sole supervisor of the children. A staff member must be present at all times.

I certify that I have completed an application, and have read and understand this Job Description.

Volunteer Signature

Date

DEVELOPMENTAL MILESTONES FOR CHILDREN AGES NEWBORN TO FIVE YEARS

NEW BORN TO 1 MONTH

1. Likes to hear noises, especially parent voices
2. Likes simple toys that appeal to sight, hearing, and touch
3. Likes to sleep a lot
4. Develops crying patterns to let you know his/her needs such as food, pain, diaper changes, etc.
5. Likes to hear things (songs, words, rhymes, etc.)
6. Keeps fist clenched
7. Keeps elbows bent
8. Keeps hips and knees flexed
9. Holds arms and legs close to the front of their body
10. Likes to be cuddled

1 MONTH TO 3 MONTHS

1. Begins to recognize mommy and daddy's voice and face
2. Begins to laugh, squeal, and smile spontaneously
3. Begins to coo, babble, and gurgle; wants a response to his/her vocalizations
4. Begins to discover his/her hands and feet and plays with them
5. Begins to grasp and hold objects
6. Supports head well

4 MONTHS TO 7 MONTHS

1. Begins to play copycat
2. Begins to grasp the concept of cause and effect by dropping objects, kicking his/her crib for the noise, and plays with pop-up toys over and over again.
3. Begins to sit up
4. Likes to play peek-a-boo
5. Likes to look at partially hidden objects and begins to understand object permanence
6. Likes to use fingers to eat purified baby food
7. Explores objects with hands and mouth
8. Begins to make noises and put sounds together

8 MONTHS TO 12 MONTHS

1. Begins to recognize familiar objects and their purpose
2. Begins to stack blocks
3. Likes to put objects into a container and take them out
4. Points at and pokes thing with his/her index finger
5. Tries to imitate words and gestures
6. Likes to play simple games like “pattycake”
7. Becomes curious about objects around him/her; likes to manipulate them as much as possible.
8. Separation anxiety begins to appear
9. Enjoys push and pull toys, squeeze toys, and containers for bath time
10. Says 1 to 4 words (i.e. mama, dada, no, etc.)

12 MONTHS TO 18 MONTHS

1. Begins to bend down and pick up a toy—may still hold on to furniture
2. Begins to understand commands (“Give me the book”)
3. Begins to tell you what he/she needs or wants by pointing; makes word-like noises or gestures
4. Begins to “help” you dress him/her by lifting his/her foot when you put shoes on
5. Says 4 to 6 words
6. Begins to climb on furniture
7. Begins to pick up “finger food” such as Cheerios
8. Begins to mark on paper with crayons in back and forth motion
9. Begins to throw a small ball with a forward arm motion
10. Begins to try to feed self with a spoon

18 MONTHS TO 24 MONTHS

1. Uses 10 or more words
2. Points to named objects
3. Begins to run
4. Begins to use spoon/fork
5. Points to one named body part
6. Tries to kick ball
7. Tries to “name” favorite pictures
8. Climbs in/out of chairs
9. Is confident in walking
10. Wants to hold/examine things

24 MONTHS TO 30 MONTHS

1. Takes off articles of clothing without help (besides shoes or socks)
2. Tries to feed a doll
3. Builds 4-6 block tower
4. Points to 2 items in a picture
5. Tries to throw a ball overhand
6. Speaks clearly half the time
7. Names one item in picture
8. Tries to jump up
9. Tries to put on clothes
10. Tries to copy a line
11. Strings 3 or 4 words into sentences
12. Holds spoon to feed self
13. Goes up/down stairs alone
14. Shows left/right hand preference

30 MONTHS TO 36 MONTHS

1. Names 1 to 4 pictures
2. Puts on a main article of clothing without help
3. Jumps up
4. Names six body parts
5. Tries to balance on one foot
6. Calls one or two friends by name
7. Copies vertical line
8. Names one color
9. Tries to jump forward
10. Begins using adjectives (pretty, good, nice)

36 MONTHS TO 42 MONTHS

1. Brushes teeth with help
2. Builds 6 to 8 block tower
3. Carries on 2 to 3 sentence conversations
4. Washes/dries hands
5. Uses prepositions (in, out, by, for)
6. Pulls on T-shirt
7. Jumps ahead
8. Copies a circle
9. Climbs stairs 1 foot at a time
10. Responds to toilet training
11. Begins saying we
12. Pours without spilling

42 MONTHS TO 48 MONTHS

1. Climb stairs 2 feet on each stair
2. Use concepts best, most, biggest, hardest
3. Tries to dress/undress without help
4. Counts 3 to 4 objects
5. Completes toilet training
6. Emergence of insecurity
7. Awkward coordination
8. Frequent stuttering
9. Much whining
10. Excludes "outsiders" at playtime

48 TO 54 MONTHS

1. Copies a square
2. Skips on one foot
3. Brushes teeth
4. Washes/dries face and hands
5. Laces shoes
6. Dresses/undresses with supervision
7. Draws person with head, arms and legs
8. Carries out simple errands
9. Counts 4 to 6 objects
10. Overdoes physical activities

54 MONTHS TO 60 MONTHS

1. Can tell difference between real and make believe
2. Does things on own initiative without being told
3. Fluent use of words
4. Beginning to discuss and have conversations
5. Interested in new words, signs, places
6. Rapid growth in fine motor coordination
7. Rapid growth in depth perception
8. Rapid growth in spatial perception
9. Develops first modesty about using the toilet
10. Fascinated with belly buttons

60 MONTHS TO 66 MONTHS

1. Skips with alternate feet
2. Counts 10 to 12 objects
3. Names colors
4. Tells how many fingers
5. Names penny, nickel, and dime
6. Prints first name
7. Writes 1 to 5
8. Names days of the week
9. Knows time by hour
10. Knows sight words (stop, go, hot, cold)

This guide shows the normal signs of growth in a young child. Many children develop faster than the guide indicates. Those who develop slower than this, however, may have special needs. Additional information on child growth and development will be discussed during the parent orientation, one on one consultations, parent meetings, and in-service training.

Policies Just For Parents

BEHAVIOR MANAGEMENT

F.A.C.T., Inc. uses the following methods of behavior management:

Children are redirected into acceptable behavior through modeling and guidance. The child's self concept will not be damaged for any reason and the child is not to be made to feel that they are unacceptable because of his/her behavior. They are helped to understand that the behavior is unacceptable. The method of discipline will not be humiliating, frightening, or physically harmful to the child. It will be consistent and individualized for each child so as to be appropriate to their level of understanding and directed toward teaching the child acceptable behavior and self-control.

F.A.C.T., Inc. believes that the staff and parents should work together to address the social and emotional needs of their children. When a child demonstrates behaviors which are continually disruptive to the class, aggressive toward others, destructive of property, or defiant to class instructions and/or rules, F.A.C.T., Inc. will involve the parent/guardian to address these behaviors and develop strategies to address the behavior concerns of the child. **This is a team effort, and families are expected to be part of that team.**

Limits are set and firm consistent controls for defiant behaviors are to be enforced. The following steps will be used when a child demonstrates behaviors which are disruptive to the class, aggressive toward others, destructive of property, or defiant to class instructions and/or rules.

Step 1: The classroom teacher and staff will talk with the child about the behavior, choices and consequences of those choices, and will **redirect** the child to a specific task

Step 2: At the time a child's behavior is out of control and likely to cause harm to the child or other people, or the child's behavior is so disruptive to the class activities, the child will spend time away from the group. This is to enable the child to calm down and return to the group. When the child is calm, the teacher/staff will discuss with the child the inappropriate behavior, encourage the child to talk about his feelings, and suggest alternative ways to express strong feelings.

Step 3: If the inappropriate behavior continues or intensifies, the teacher, with approval of center director/program manager, will call the parent and have the parent talk with the child by phone. The parent will provide the classroom teacher with a list of contacts and telephone numbers.

Step 4: If the inappropriate behavior continues or intensifies, the teacher will contact the parent/guardian to pick the child up for the rest of the day. The child will be picked up within _____ minutes of receiving the call. The agency reserves the right to call the local office of DHS if all contact numbers were exhausted without reaching the parent. The Special Services Coordinator or the Central Office receptionist will be notified when a child has been sent home for the remainder of the day.

***If the child is receiving disability services, the Special Services Coordinator or the Central Office Receptionist must be called prior to sending the child home.**

Step 5: At this point, a formal conference will be scheduled with the parent/guardian and staff to address the behavior concerns. The child **will not** be permitted to return to the center until the parent/teacher conference has been held. The Special Services Coordinator or central office staff will be notified of this action. An individual behavior plan will be written by staff and parents to develop strategies to work with the child to make positive behavior changes. A copy of the behavior plan will be sent to the Special Services Coordinator.

Step 6: If after implementing the behavior plan, the child's behavior continues to be disruptive to the classroom, or endangers the safety of others, the center director/program manager will contact the Special Services Coordinator to schedule a meeting of the Multi-disciplinary Committee who will discuss the child's behavior, examine options for that child, and make referrals for further evaluation if recommended by the committee.

Step 7: **As a final option, F.A.C.T., Inc. reserves the right to dismiss any child from the program as a result of the Multi-disciplinary committee's recommendation and administrative decision.**

Immediate dismissal: A child will be immediately dismissed from the program if one or more of the following occur: any violent behavior/act/threat involving a weapon (knife, gun, scissors, or other objects) that might cause death and/or extreme harm to anyone within the center or on property being utilized by the program.

BREAST FEEDING

Proper storage and handling of breast milk are necessary to ensure that spoilage is prevented, bacterial growth is minimized, and each child receives his/her own mother's milk. All mothers wishing to come into the center and breast-feed their child will be provided with a private, quiet area. Because breast milk is a body fluid, staff **MUST** ensure that a barrier is present between them and the milk at all times.

For those breast feeding mothers who wish to pump and send the expressed milk to the center, the following procedures **MUST** be adhered to: Breast milk **MUST** be already placed in individual servings/bottles when brought into the center. Each bottle **MUST** be clearly labeled with the child's name and the date. The bottles must have a cap and the nipple **MUST** be turned downward inside the cap with the nipple cover in place to prevent spillage as the milk freezes.

For those who choose to use bottles with disposable linings, the individual liners **MUST** be filled, sealed, and labeled with the child's name and date. **ALL** breast milk is brought to the center sealed **AND** sealed inside a zipper-sealed bag. **ALL** breast milk bottles and/or containers (including disposable liners) are sent home with the parents in a zipper-sealed container for sanitizing and/or disposal.

Refrigerated breast milk is discarded after 48 hours and frozen breast milk is discarded after three (3) months.

Frozen breast milk is placed in the refrigerator to be thawed. Once the milk thaws, it is used within 24 hours and is **NEVER** re-frozen. If the milk is to be heated, it will be placed in a crock-pot with warm water for five minutes. Breast milk, (as well as all other bottles), is **NEVER** heated in a microwave due to uneven heating and the possibility of severe burning.

Any remaining contents after a feeding are discarded immediately.

Staff wear gloves at ALL times (including feedings) when handling breast milk. Parent education is a vital element in understanding this procedure. Staff MUST educate parents on the health concerns regarding breast milk. They should explain why as a body fluid it must be handled with gloves and that a barrier must be kept between the staff persons body and the bottle and child.

CHILD ABUSE AND NEGLECT/LICENSING VIOLATIONS

According to Arkansas Child Abuse and Neglect Reporting laws (Act 1208-1991) ALL suspected cases of child abuse must be reported.

“Any person with reasonable cause to suspect child maltreatment (abuse, sexual abuse, neglect, sexual exploitation, or abandonment), or that a child died as a result of child maltreatment, or who observes a child being subjected to conditions or circumstances which would reasonably result in child maltreatment must immediately notify the **Child Abuse Central Intake Unit at 1-800-482-5964**, the **Licensing Central Office at (501) 682-8590 or 1-800-445-3316**, or law enforcement.” (A copy of Act 1208-1991 is available at each center).

Anyone who observes a licensing violation will report it to the Center Director who must then report it to the Central Office (Assistant Director). As always, anytime the licensing violation concerns the physical abuse or corporal punishment of a child, the employee is to call the Child Abuse Central Intake Unit **FIRST**, and then follow-up with notification to the Family and Community Partnerships Coordinator.

CONCERNING CHILDREN’S SEXUAL BEHAVIOR

A certain amount of sexual curiosity is considered normal at these preschool ages. Children are often curious about their own body as well as that of others. Generally, the **less distress a parent or a teacher displays toward children who exhibit this curiosity, the better.**

When parents display undue anxiety or alarm at such actions, children are often made to feel ashamed. Too, such behavior on the part of parents can even promote further exploration, as children wonder why the matter received such attention!

Our staff is trained in how to handle such situations. If you have questions about our agency policy in handling these situations, please talk with your child’s teacher.

CHILD INTERVIEW POLICY

According to state licensing, your child is subject to an interview at any time by a child care licensing investigator and/or law enforcement for investigative purposes and for determining compliance with Licensing Requirements.

CLASS PARTIES

Centers may only have parties or special activities for the holidays listed below. All proposed food and activities must have **prior** written approval from the Education Advisor and Health/Nutrition Coordinator.

Fall Festival

Christmas

Valentine's Day

Family Fun Day

(Fall Festival-held in October as a classroom party. No costumes are allowed during school hours. This is separate from any parent involvement activity held after school hours). Parent involvement activities, as done in individual centers, are to be planned, approved, and carried out by the parent club members. Teachers' advice and help should be minimal. Parent involvement activities should not require extensive amounts of teachers' time—resulting in excessive amounts of flex time that will take away from teachers' time in the classroom.

General Procedures:

- ◇ Parties are to be held only after rest time and are not to exceed one hour. All parties or related activities are to be held on the holiday unless it falls on the weekend, at which time they are to be held the Friday prior to the holiday. Christmas parties are to be held the last day centers are open before closing for the holiday. Special Thanksgiving dinners for centers located in public schools are to be observed according to the school's schedules. Centers with their own kitchens will observe special activities the last day the center is open.
- ◇ No birthday parties are allowed in the centers. No food, presents, balloons etc. are to be brought or sent to the center for birthday parties, etc.
- ◇ On rare occasions (no more than 4 times a year: Fall Festival, Christmas, Valentine's Day, and Family Fun Day) when a party is planned, the teacher may choose to alter the highly nutritious menus normally followed. The teacher may enlist a few parents to bring a few purchased items such as cookies or soft drinks, which will be brought to the center still in their wrappings, for the celebration. The menu will be strictly planned by the teacher and parents, approved ahead of time by the Health/Nutrition Coordinator, and must be strictly followed.
- ◇ No gifts are to be exchanged, and parents are not to be asked to give money for gifts. **All purchases must have prior written approval from the Education Coordinator.**

CLASS PICTURES

Individual and group pictures will be made one time per year by a professional photographer.

COMPLAINT PROCEDURE

All parents, relatives, community advocates, etc., are encouraged to voice any concerns regarding all aspects of any F.A.C.T., Inc. program.

Any person wishing to voice a concern or question about any F.A.C.T., Inc. staff member, procedure, or center, should follow these procedures:

- 1) Discuss concerns with a local staff member (i.e. teacher or Center Director). If a person feels that a concern is not sufficiently addressed at this level, he/she can go to the next level.
- 2) Contact the Assistant Director at the Central Office at 862-4545 to express a concern. A Central Office staff member will be assigned, depending upon the nature of the issue. Following the phone call, submit your concern in writing to the Assistant Director.
- 3) The assigned staff member will investigate the complaint by contacting persons involved and then making a written report to be distributed to all necessary files, with a copy sent to the Executive Director of F.A.C.T., Inc.
- 4) The person registering the written complaint will be contacted about the report and any action taken within 10 (ten) business days from receipt of the written complaint in the Central Office.
- 5) If the complainant is not satisfied with the report, or the action taken, he/she may contact the F.A.C.T., Inc. Executive Director.

CONFIDENTIALITY POLICY

All information regarding clients of all F.A.C.T., Inc. programs (including children, volunteers, parents, staff, etc.) must be kept confidential at all times.

FACT, Inc. has adopted the following guidelines regarding confidentiality:

1. Clients, parents, guardians, or custodial parents are the primary source of information about themselves, and information sought from them is limited to what is essential for service.
2. Clients, parents, guardians, or custodial parents, and other volunteers are prohibited from reviewing records other than those of their own family.

3. Health, Education, Family & Community Services, and Disability records on families are open only to the authorized F.A.C.T., Inc. staff in order to provide services to families. Other individuals such as federal monitors may review certain documentation in order to insure compliance with the law.
4. Only information that is essential to provide the service is recorded and maintained.
5. No information is released to anyone outside the program without written consent from the family, except in reporting child abuse and neglect or upon receipt of court orders.
6. Other agencies and individuals are consulted only with family's consent.
7. All classroom client records will be locked in the file cabinet at all times. Disability files are to be kept in a **separate** locked drawer.
8. The teachers, assistants, Home Educators, and family service aides/advocates will have access to the keys to the file cabinet and are responsible for their client's records assigned to that particular class.
9. In accordance with federal HIPAA privacy rules all medical information, including Protected Health Info (PHI) will be kept strictly confidential.

DIAPERING/TOILETING POLICY

Before changing a child's diaper, staff will gather up all supplies required for the procedure and place them in an area that can be easily reached without leaving the child unattended on the changing table. Gloves will be worn at all times during each diaper change, and hands will be washed **before** and **after** each diaper change. With a lukewarm wet washcloth, the non-mobile child's face and hands will be cleansed before the diaper is changed. If the child is mobile, he/she will be encouraged by the teacher to wash the face and hands at the child-sized sink. The diaper is then removed and the diaper area is cleansed from front to back with a non-allergenic diaper wipe. The clean diaper is then put on and gloves are removed, wrapping the soiled diaper inside the glove and thrown away in the appropriate covered container, which will be emptied periodically throughout the day. With a **clean** lukewarm wet washcloth, the child's face and hands are cleaned again. The soiled washcloths will be maintained in the appropriate covered container and will also be emptied periodically throughout the day. The child is then returned to a safe area and the changing table is cleansed with bleach solution (1/4 cup of bleach per gallon of water) which is mixed fresh daily. The bleach solution will be left for a minimum of 30 seconds before being removed with a paper towel in order to eliminate all bacteria. Staff will once again wash their hands with soap and water when the procedure is completed. No powders are to be used on infants/toddlers. Special written permission from the parent must be obtained to use diaper creams and lotions. These items will be labeled with the child's name and kept in a locked area out of reach of the children.

Once the child has been potty trained, staff shall continue to wear gloves at all time while assisting the child in the restroom. Both the child and the staff will wash hands before and after using the toilet.

The Diapering Procedures must be posted near the changing table where it is clearly visible to the staff during diaper changing process.

CLOTH DIAPERS

For those parents wishing to use cloth diapers or children who are allergic to disposable diapers, the parent will provide a clean diaper pail daily with the child's name on it. After each diaper is removed, the diaper is placed in individual plastic bags and put in that child's diaper pail. Staff are NOT responsible for washing out cloth diapers. The diaper pail is sent home daily and returned the next day with clean diapers and a clean diaper pail.

DISCIPLINE (SEE BEHAVIOR MANAGEMENT)

EARLY HEAD START CLASSROOM ADMITTANCE

Before entering any Early Head Start classroom, **ALL** persons (including staff, parents, volunteers, and visitors) must remove their shoes and wash their hands in order to prevent the spread of contagious and infectious diseases.

Early Head Start staff will wear slippers with non-skid soles. These slippers are to be worn within the confines of the Early Head Start classroom **ONLY**. When exiting the Early Head Start classroom, but not the building, the staff will place shoe covers over their slippers. When exiting the building, the staff will remove the slippers, place them in the staff locker, and put on personal shoes.

All other persons entering the Early Head Start classroom will place shoe covers over their shoes before being admitted into the room.

EMERGENCY EVACUATION PLAN

General Procedure: Teachers are to take the children’s sign in sheets and the emergency contact information sheet with them to the evacuation site. As soon as practical, directors should notify Central Office.

Site Evacuation: Centers located in the public schools will follow the school evacuation plans. The school in which each center is located will be responsible for the transportation of Head Start, ABC, EHS, and ABCSS children. Centers, which are a “stand-alone” site, will use the following procedures:

Fairview—will follow the instruction of the Local Emergency Planning Commission (LEPC). Parents will be instructed to listen to the local radio stations and TV Fox 14 for site locations. Parents are not to go to the center to pick up their children. Parents are to go to the evacuation shelter that the LEPC has assigned. The Incident Commander will be responsible for arranging transportation. Program Manager or designee will need to call 911 and inform them that they have been ordered to evacuate and they have no means to evacuate the number of children and staff that are present at the time.

Magnolia East—will follow the instruction of the Local Emergency Planning Commission (LEPC). Parents will be instructed to listen to one of the two radio stations in Magnolia and also TV channel 13. Parents are not to go to the center to pick up their children. Parents are to go to the evacuation shelter that the LEPC has assigned. The Incident Commander will be responsible for arranging transportation. Center Director or designee will need to call 911 and inform them that they have been ordered to evacuate and they have no means to evacuate the number of children and staff that are present at the time.

Morning Star—will follow the instruction of the Local Emergency Planning Commission (LEPC). Parents will be instructed to listen to the local radio stations and TV Fox 14 for site locations. Parents are not to go to the center to pick up their children. Parents are to go to the evacuation shelter that the LEPC has assigned. The Incident Commander will be responsible for arranging transportation. Center Director or designee will need to call 911 and inform them that they have been ordered to evacuate and they have no means to evacuate the number of children and staff that are present at the time.

THE LOCAL EMERGENCY PLANNING COMMISSION WILL DETERMINE ALL EVACUATION SITES. SITES WILL BE DETERMINED AT THE TIME OF EVACUATION.

SHELTER IN PLACE PLAN

Shelter in Place is when a disaster has occurred that the Local Emergency Planning Commission (LEPC) has determined to be hazardous to the public. In the event of a disaster, the LEPC will determine whether *Shelter in Place* or site evacuation is necessary. You will need to follow the LEPC's directions.

Center Director/Program Managers will need to choose a room that will accommodate all staff and children. In selecting your location keep in mind bathroom facility and activities to occupy the children for up to 4 hours. Center Director/Program Managers will need to assign job duties for setting up *Shelter in Place* and making sure that each designee knows their assigned responsibilities. In order to account for each child, staff are required to carry the clipboard containing the children's sign-in-sheets and the Emergency Contact Sheet for notifications of parents.

Shelter in Place:

- √ Children's sign-in-sheet
- √ Emergency Contact Information Sheet
- √ Move inside the building
- √ Close and lock all windows and doors
- √ Turn off all ventilation systems
- √ Move to one room of the building and seal the room by covering and taping all windows and doors
- √ Turn on radio for further emergency instruction
- √ **Stay off the phone** (this is very important because the phone lines are needed for emergencies)

Shelter In Place Kit Includes:

- √ Plastic sheets (painters drop cloth, etc.)
- √ Duct tape
- √ Water (for drinking and wetting towels)
- √ Snacks
- √ Battery operated radio
- √ Towels (for wetting, to close gaps in doors and windows)
- √ Flashlight
- √ Fanny pack (fully stocked)
- √ Sign that states that we are shelter in place

FRAUDULENT (Dishonest) APPLICATIONS

A committee of key management staff (Executive Director, Assistant Director, Human Resources Coordinator, plus a Policy Council member and Chief Financial Officer) plus the ERSEA Coordinator (and the EHS/Education Advisor, if an EHS family is involved, or the central office ABC/Education Advisor if an ABC family is involved) must meet to determine if fraud is, indeed, involved. After sufficient inquiry, if a (3/4 majority minimum) decision is made that fraud has been found, the representative from the committee will meet with the family involved as quickly as possible to let them know that they will be dropped from the program. The family will be given 14 calendar days to find other childcare and to begin transition processes. The agency will provide help with this process as needed. As a general rule, prosecution will not be sought, and the family can reapply to the program after one year.

INFANT AND TODDLER FEEDING

INFANTS

Each parent must provide 6 bottles (four 8 ounce and two 4 ounce) with caps and bottle rings for their child. The four 8 ounce and one of the 4 ounce bottles will be used for formula. The remaining 4 ounce bottles will be used for water. These bottles are to remain in the facility. Each bottle, bottle ring , cap, and nipple is to be marked with the child's initials.

Water is boiled daily before leaving the center for a minimum of 10 minutes and placed in covered sterilized containers in the refrigerator. The boiled water is used for mixing formula and for filling drinking water bottles. It may also be used to weaken juice.

All formulas are to be mixed in sterilized pitchers, in the bottle preparation area by the FSA/Nutrition Aide. In the event the FSA/Nutrition Aide is absent, the teacher will prepare the bottles. Pitchers containing formulas are to be labeled with type of formula, date of preparation, and person mixing the formula. The names of the children that are to use that kind of formula must be posted in the bottle preparation area.

All bottles for each child will be prepared prior to center opening each day. Bottles for each child are to be placed in the child's individual container which is labeled with the child's name and type of formula and stored in the classroom refrigerator.

Bottles will be given to each child at the temperature the parents requests, or at room temperature. Bottles may be warmed by sitting them in a water heated crock pot. **Bottles will NOT be warmed in the microwave due to uneven heating patterns. Bottles may be warmed only twice. After the second warming and use, the formula must be disposed.**

Bottles are not left out in the open for longer than 20 minutes.

Staff ensure that their hands are washed properly and each infant's face and hands are washed with a lukewarm washcloth both **before and after** each feeding.

Bibs are placed on all children for each feeding.

All infants are fed on demand and are never awakened to adhere to a strict schedule. All children are held when given a bottle. When a child is developmentally ready, they may hold their own bottle while the care giver holds them. **No baby is put in a crib with a bottle.**

When children begin eating infant cereal, the formula from that child's bottle will be used for mixing.

Eating tables are sanitized with bleach solution **before and after** each use.

In order to eliminate all bacteria, the bleach solution is left for a minimum of 30 seconds before being dried with a paper towel.

Children are encouraged and **never forced** to eat and/or taste new foods. All new foods are introduced at home prior to using in the center due to the possibility of food allergies.

USDA requirements are strictly adhered to at all times. Any child requiring food that is different from the USDA Infant Feeding Schedule must have a statement on file from the primary care physician.

All food intake, including solids and liquids, is documented on the Infant/Toddler Daily Activity form. This is shared with and signed by the parent on a daily basis.

When a child begins to drink from a sipper cup, water, juice, etc. may be given at any time during the day.

TODDLERS

Staff and children wash their hands properly **before and after** each meal. All children's faces are washed with a lukewarm washcloth **before and after** each meal.

Eating tables are sanitized with bleach solution **before and after** each use. In order to eliminate all bacteria, the solution is left for a minimum of 30 seconds before being dried with a paper towel.

All children wear bibs during meals.

Although toddlers are fed on a schedule, snacks are available throughout the day.

Children are encouraged and **never forced** to eat and/or taste new foods. All new foods are introduced at home prior to using in the center due to the possibility of food allergies.

USDA requirements are strictly adhered to at all times. Any child requiring food that is different from the USDA Toddler Feeding Schedule must have a statement on file from the primary care physician.

All food intake, including solids and liquids, is documented on the Infant/Toddler Daily Activity form. This is shared with and signed by the parent on a daily basis.

A primary goal of the program is to foster each child's independence. Therefore, as children are developmentally ready, they are encouraged to feed themselves.

MEDICATION RESTRICTION POLICIES

Oral and/or topical medications prescribed by a physician will be administered by staff with the following restrictions:

- The 1st dose must have been given at home.
- **No** "as needed/prn" medications will be given at the center other than asthma inhalers and epi pens.
- Diaper ointment/lotions may be used with written parental consent.
- Medication is given **only** when alternate arrangements cannot be made for the child to receive the medication outside center hours such as those that are time sensitive.
- **ALL** parents/legal guardians must **fully** complete and sign the 'Medication Authorization Form' before any medication (oral and/or topical) is administered.
- Medication must be in the original container, labeled with the child's name, physician, pharmacy, medication name, administration instructions, and be currently issued.
- **All medication for all children in each classroom is kept in the top drawer of a locked file cabinet out of reach of children at all times. Those requiring refrigeration are also kept in a locked box in the refrigerator.**
- **Each child's medication is kept in a separate zip-lock bag. The bag will contain a picture of the child, the medication in the original container with the prescription label attached, and any special instructions on proper administration.**

- Changes in the administration of medications are made upon receipt of new written physician instructions, including the date of change. A new consent/authorization form must be completed by the parent/legal guardian.
- Only designated staff can administer medication.
- Two (2) staff members must be present for the administration of all medications (one person to administer and one person to witness). In the event there is only one regular staff person present, a volunteer may sign as a witness.
- The Medication Log must be completed at the time of administration and include the date, time, administration by, and witness initials, with the full signature indicated at the bottom of the form.
- All unused medication is returned to the parent after discontinuation of the medication and/or if the child drops from the program or transfers.
- The center director will notify the Health/Nutrition Coordinator of all medication to be given at the center immediately upon obtainment of parental consent.
- The Health/Nutrition Coordinator will provide a drug information handbook for referencing possible side effects or adverse reactions of which the center staff should be aware.
- All adverse reactions including allergic reactions **must be** reported to the Health/Nutrition Coordinator immediately.

POTTY TRAINING

Potty training should be a positive learning experience for all children. When developmentally appropriate, potty training provides opportunities to learn independence, self-control, and responsibility. Milestones for children in potty training include: muscle control, emotional readiness, willingness to cooperate, and the ability to communicate toileting needs

Staff work with parents to understand the biological, physical, and emotional stages of potty training and help families understand the importance of appropriate child-sized or modified potty seats. Parents are encouraged to share information about these experiences at home and about their preferences and concerns in order to better plan the approach to and timing of potty training. Staff will assist children to use the child-sized toilets within the facility, invite them to use the toilets, help them as needed, and positively reinforce their efforts regardless of the outcomes.

The Potty Training Orientation Form is reviewed with the parent when the child displays developmental readiness for the potty training experience. The form is signed by the parent and teacher/home educator and placed in the child's file.

SMOKE-FREE POLICY AND PROCEDURES

In an effort to safeguard and promote the health and safety of employees, children, participants, and visitors, FACT, Inc. recognizes the need to maintain smoke-free environments. The intent of this policy will be to achieve a reasonable balance for the interests of smokers and non-smokers; and where these interests conflict, a smoke-free environment will have priority.

In accordance with State, Federal (Public Law 103-227, Pro-Children Act of 1994), and Head Start Regulations (ACYF-PI-HS-95-04; Establishing a Smoke-Free Environment in Head Start Programs), all FACT, Inc. facilities and vehicles, owned, leased, or otherwise utilized will be designated as smoke-free environments.

RESTRICTIONS

Facilities:

Smoking will be prohibited in all facilities utilized by FACT, Inc. staff at all times.

If space is available, *designated smoking areas will be defined and will be:

located out of children's sight

away from the main entrances of the building(s)

at least 20 feet from the main entrance; and

at least 100 feet from any playground or outdoor activity area.

***FACT, Inc. centers located on public school property are required to adhere to the local school policy regarding smoking at all times.**

All smoking trash, including cigarette butts and matches, will be extinguished and disposed of in appropriate containers. Program supervisors will ensure periodic clean up of the designated smoking area. If the designated smoking area is not properly maintained, it can be eliminated at the discretion of the Executive Director or designee.

Vehicles:

Smoking will be prohibited in all FACT, Inc. vehicles at all times. Smoking will be prohibited in personal vehicles when in the process of transporting individuals on FACT, Inc. authorized business.

Indoor/Outdoor Activities:

Smoking will be prohibited by staff and volunteers when children are present. This includes both indoor and outdoor activities. During indoor activities, the designated smoking area will be outside the building and out of sight of the children and at least 20 feet away from the main entrance of the building. During outdoor activities, the designated smoking area will be out of sight of children and at least 100 feet away from the activity area.

Field trips, walks, and other off-site activities will be smoke-free to the fullest extent possible. In order to allow breaks on field trips, every effort will be made to ensure ample volunteers are present on field trips in order to maintain the required staff/child ratio during field trips.

F.A.C.T., Inc. will assist staff and parents who wish to quit smoking by making referrals to recommended smoking cessation programs and materials.

Training Just For Parents

PARENT TRAINING TOPIC LIST

To satisfy funding regulations, a training topic for specific areas is established for each month and is conducted either at the monthly Parent Club Meeting or on a specially called training date. Monthly training topics established for the F.A.C.T., Inc. programs are as follows:

AUGUST	Parent Orientation (Head Start and ABC only; EHS Parent Orientation occurs as enrolled throughout the Program Year.) Mental Health: Stranger anxiety, separation anxiety, temper tantrums, dealing with stress, maternal depression, etc. (EHS only)
SEPTEMBER	Education: Observation of growth and development; special developmental needs; developing appropriate home activities; and literacy activities; employment training; Bus safety (where applicable); Pedestrian safety
OCTOBER	Child abuse and neglect prevention (reporting, identifying; signs of physical, verbal and emotional abuse); domestic violence; and substance abuse; Content Area Plans
NOVEMBER	Nutrition: developing sound food habits and the impact on health, growth, and development
DECEMBER	First Aid: safety, and the dangers of pesticides and other toxic substances; transportation/bus safety (where applicable); employment training for parents
JANUARY	Mental Health/Wellness: behavior problems; building the child's self-esteem
FEBRUARY	Community Services: people in your community and the services they can offer; Volunteer Month
MARCH	Personal growth for parents: employment, literacy, secondary education, budgeting/finance, stress management, single parenting, child support services; Content Area Plans
APRIL	Transition to Kindergarten: car seat safety; safety belt systems, street crossing etc. (EHS-Transition begins at 30 months); FACT, Inc. Transition Procedures.

MAY	Preventive Health and Dental Care: reinforcing behavior learned during the year; Teacher Appreciation Activities
JUNE	Health/Safety: Toy safety, equipment safety, water safety, Sudden Infant Death Syndrome (SIDS), infant CPR, home safety checklist for babies, and pre and post natal care
JULY	Nutrition: Food Guide Pyramid For Young Children, healthy eating habits, the hazards of choking, etc.

TRAINING ACTIVITIES

Training and activities for parents of enrolled children are an integral part of F.A.C.T., Inc.'s programs. Each month at Parent Club meetings, presentations will be provided on the topics listed below. In addition to those listed, requested training resulting from the individual parent surveys will be provided. As notice is received from other agencies and community organizations of available training pertinent to our parents, notification will be made at each center.

EDUCATION:

- ◇ Activities that can be used in the home to reinforce the learning and development of children;
- ◇ Observation of growth and development of children in the home environment and identification of and handling of special needs; and
- ◇ Child development and behavioral development problems of preschool children.

HEALTH AND DENTAL:

- ◇ An organized health education program; and
- ◇ Principles of preventive health, emergency first-aid measures, and safety practices.
- ◇ The importance of proper dental hygiene and F.A.C.T., Inc.'s commitment of promoting dental hygiene from birth.

MENTAL WELLNESS:

- ◇ Understanding of child growth and development and appreciation of individual differences and the need for a supportive environment.

NUTRITION:

- ◇ Understanding the relationship of nutrition and health factors, and the variety of ways to provide for nutritional needs, and how to apply this knowledge in the development of sound food habits even after leaving the program;
- ◇ An organized nutrition education program;
- ◇ The selection and preparation of foods to meet family needs, guidance in home and money management and help in consumer education so that they can fulfill their major role and responsibility for the nutritional health of the family; and
- ◇ The benefits of food assistance programs.

SOCIAL SERVICES:

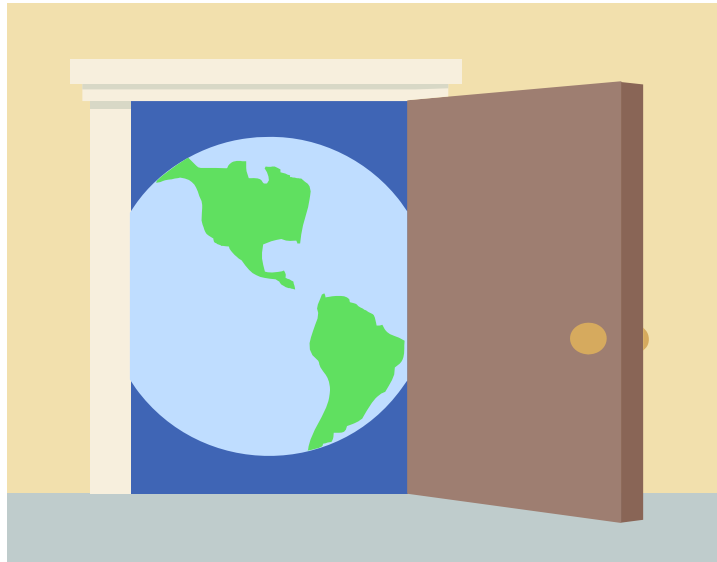
- ◇ Orientation and training on the need to prevent abuse and neglect and providing protection for abused and neglected children. This training will foster a helpful rather than a punitive attitude toward abusing or neglecting parents and other caretakers.
- ◇ Information on community service providers and services available.

PARENT INVOLVEMENT:

- ◇ Experiences and activities which support and enhance the parental role as the principal influence in your child's education and development;
- ◇ Experiences and activities leading to enhancing the development of skills, self-confidence, and sense of independence in fostering an environment in which children can develop to their fullest potential;
- ◇ Experiences in child growth and development which will strengthen your role as the primary influence in your children's life; and
- ◇ Identification of opportunities for continuing education which may lead towards self-enrichment and employment.

NO STATEMENT CONTAINED IN THE PARENT HANDBOOK CREATES ANY GUARANTEE OF EMPLOYMENT OR CREATES ANY OBLIGATION, CONTRACTUAL OR OTHERWISE, ON THE PART OF F.A.C.T., INC.

F.A.C.T., INC. HAS THE RIGHT AT ANY TIME, WITHOUT PRIOR NOTICE, TO MODIFY, AMEND OR TERMINATE POLICIES WITHIN THE LIMITS AND REQUIREMENTS IMPOSED BY LAW.



F.A.C.T., Inc. is a non-profit, Equal Employment Opportunity employer/provider. We will not discriminate against any employee or applicant for employment or services on the basis of race, color, religion, sex, age, national origin, ancestry, marital status, physical or mental disability or veteran status.