



# PARENT'S HANDBOOK

2023-2024



**WESTERN DAIRYLAND**  
Head Start Program

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## WELCOME MESSAGE FROM THE DIRECTOR

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Dear Head Start families,

Welcome to the Western Dairyland Head Start program (WDHS)! This handbook was created to answer any questions regarding program procedures and policies. Please keep this handbook to refer to it as needed and let us know if you have any questions. You can also access to most current version on our website at:

<https://www.wdheadstart.org/for-families>

At WDHS, we take great pride in partnering and collaborating with families to ensure everyone receives a high-quality and comprehensive early childhood experience. You are your child's most important teacher. Working together as a team, our staff will help support and nurture a positive parent-child relationship that is essential to your child's healthy development and well-being. WDHS offers various activities and strategies to help foster parenting and leadership skills, such as parenting classes, budgeting workshops, family fun events, and Policy Council. You will receive information on these opportunities through our monthly newsletter, flyers, a communication app, and notes being sent home to your child.

Whether you are new to Head Start or are a returning family, I hope you have a positive Head Start experience full of opportunities to learn and grow.

Sincerely,



Head Start Director

## OUR MISSION

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To educate and empower low-income children (pre-natal – 5 years) and families to reach their highest potential.

## HEAD START CORE VALUES

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- We strive for excellence through continuous improvement and best practices.
- We treat everyone with respect, compassion, and empathy.
- We create safe and nurturing high quality environments for children and staff.

## WESTERN DAIRYLAND E.O.C. OFFICES

MAIN OFFICE:	EAU CLAIRE OFFICE:
23140 Whitehall Road, P.O. Box 125	418 Wisconsin Street
Independence, WI 54747	Eau Claire, WI 54703
Phone: 715-985-2391 ext. 1251	Phone: 715-836-7511
1-800-782-1063 ext. 1251	
Website: <a href="https://www.wdheadstart.org/">https://www.wdheadstart.org/</a>	

## HEAD START MANAGEMENT TEAM

TITLE	NAME	EMAIL
Head Start Director	Thanh Bui-Duquette	<a href="mailto:Thanh.Bui-Duquette@wdeoc.org">Thanh.Bui-Duquette@wdeoc.org</a>
Business Manager	Meghan Solberg	<a href="mailto:Meghan.Solberg@wdeoc.org">Meghan.Solberg@wdeoc.org</a>
Education Manager	Jennifer Marum	<a href="mailto:Jennifer.Marum@wdeoc.org">Jennifer.Marum@wdeoc.org</a>
Education Manager	Heather Yates	<a href="mailto:Heather.Yates@wdeoc.org">Heather.Yates@wdeoc.org</a>
Education Coach	Sarah Brott	<a href="mailto:Sarah.Brott@wdeoc.org">Sarah.Brott@wdeoc.org</a>
ERSEA Manager	Sherri Van Vuren	<a href="mailto:Sherri.Vanvuren@wdeoc.org">Sherri.Vanvuren@wdeoc.org</a>
Family and Community Manager	Sarah McAllister	<a href="mailto:Sarah.Mcallister@wdeoc.org">Sarah.Mcallister@wdeoc.org</a>
Health Manager	Alexis Thompson	<a href="mailto:Alexis.Thompson@wdeoc.org">Alexis.Thompson@wdeoc.org</a>
Home Based Manager	Linsey Kaufman	<a href="mailto:Linsey.Kaufman@wdeoc.org">Linsey.Kaufman@wdeoc.org</a>

## FAMILY INFORMATION

Welcome to the Western Dairyland Head Start program! This handbook tells you everything you might need to know about our program. If you have any questions that are not answered here, please feel free to ask any of the Head Start staff. We look forward to partnering with your family this year.

**CENTER/HOME BASED:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**CENTER MANAGER:** \_\_\_\_\_

**TEACHER:** \_\_\_\_\_

**FAMILY ADVOCATE:** \_\_\_\_\_

**TRANSPORTATION SERVICES/BUS DRIVER:** \_\_\_\_\_

**TRANSPORTATION SERVICES PHONE:** \_\_\_\_\_

## LICENSED CENTERS

CENTER	MAXIMUM CAPACITY	AGES OF CHILDREN SERVED	Operation
<b>Altoona Early Education Center</b> 1312 North Hillcrest Parkway Altoona, WI 54720 (715) 895-7524	34	3 years to 6 years	8:30 a.m. to 4:30 p.m. Monday through Friday* August to June
<b>Arcadia Early Learning Center</b> 358 E. River Street Arcadia, WI 54612 (715) 797-3430 <i>Collaboration with the Arcadia School District</i>	34	3 years to 6 years	7:00 a.m. to 4:30 p.m. Monday through Friday* August to June
<b>Black River Falls Head Start</b> 905 Alder Street Black River Falls, WI 54615 (715) 284-4442	34	3 years to 6 years	7:00 a.m. to 4:30 p.m. Monday through Friday* September to June
<b>Blair Head Start Center</b> N31024 Elland Road Blair, WI 54616 (608) 989-9860 <i>Collaboration with the Blair-Taylor School District</i>	17	3 years to 7 years	7:15 a.m. to 4:30 p.m. Monday through Friday* August to June
<b>Cochrane-Fountain City Early Learning Center</b> S2770 State Highway 35 Fountain City, WI 54629 (608) 687-4171 <i>Collaboration with the Cochrane-Fountain City School District</i>	26	3 years to 7 years	7:30 a.m. to 4:30 p.m. Monday through Friday* January to December
<b>Eau Claire Head Start Center</b> 3103 Oak Knoll Drive Eau Claire, WI 54701 (715) 896-4721	64	3 years to 5 years	8:00 a.m. to 5:00 p.m. Monday through Friday* August to June
<b>Independence Head Start Center</b> 35480 Sixth Street Independence, WI 54747 (715) 985-2597	34	3 years to 7 years	7:30 a.m. to 4:00 p.m. Monday through Friday* January to December
<b>Naples Head Start Center</b> S283 County Rd BB & HH Mondovi, WI 54755 (715) 926-4830	17	3 years to 7 years	7:30 a.m. to 4:30 p.m. Monday through Friday* August to June
<b>Truax Head Start Center</b> 623 Truax Blvd Eau Claire, WI 54703 (715) 598-1826	17	3 years to 7 years	8:00 a.m. to 4:30 p.m. Monday through Friday* August to June

\* Extra days included in the license to allow for having classes to make up for snow days

## HOME-BASED SOCIALIZATION LOCATIONS

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HOME-BASED PROGRAM	SOCIALIZATION LOCATION
<b>EARLY HEAD START</b>	
<b>Buffalo County</b>	Cochrane-Fountain City Early Learning Center S2770 State Highway 35 Fountain City, WI 54629
<b>Eau Claire County</b>	Eau Claire Head Start Center 3103 Oak Knoll Drive Eau Claire, WI 54701
<b>Jackson County</b>	Black River Falls Head Start Center 905 Alder Street Black River Falls, WI 54615
<b>Trempealeau County</b>	Independence Head Start Center 35480 Sixth Street Independence, WI 54747



## COMPREHENSIVE SERVICES

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Head Start comprehensive services include:

- Education
- Screenings and follow-up for health, development, and behavior
- Health and safety
- Promote children's social and emotional well-being
- Nutrition
- Family goal-setting
- Social services
- Transition services
- Services for children with disabilities

Comprehensive services are delivered in a safe and nurturing high quality environment that is individualized to support children's growth in the five essential domains. A minimum of 10 percent of a program's total enrollment must be children with disabilities. Additionally, Head Start services are designed to be responsive to each child and family's ethnic, cultural, and linguistic heritage.





## HEALTH

### HEALTH REQUIREMENTS

Health and school readiness are closely linked. Children need to be healthy and safe to learn. Western Dairyland Head Start emphasizes the importance of early identification of health problems. We believe in promoting children's health and wellness, as well as supporting children's physical, mental, and social well-being. Our staff will work with your family to establish or maintain access to ongoing, continuous health care for your child and promote healthy, safe behaviors in centers and at home.

<b>HEALTH CHECK VISIT SCHEDULE</b> <b>RECOMMENDED NUMBER OF SCREENINGS</b> <i>FROM THE WISCONSIN DEPARTMENT OF HEALTH AND FAMILY SERVICES</i>													
AGE	EARLY HEAD START										HEAD START		
	Birth to 1 mo.	2 mos.	4 mos.	6 mos.	9 mos.	12 mos.	15 mos.	18 mos.	24 mos.	30 mos.	3 yrs.	4 yrs.	5 yrs.
<b>Health and Developmental Assessment</b>													
Developmental/ Behavioral Assessment	•	•	•	•	•	•	•	•	•	•	•	•	•
<b>Physical Assessment</b>													
Length/Height and Weight	•	•	•	•	•	•	•	•	•	•	•	•	•
Physical Examination	•	•	•	•	•	•	•	•	•	•	•	•	•
Vision	«	«	«	«	«	«	«	«	«	«	•	•	•
Hearing	•	«	«	«	«	«	«	«	«	«	•	•	•
Oral Health				«	«	• or «		• or «	• or «	• or «	•	•	•
<b>Procedures</b>													
Blood Lead						•			•		•	•	•
<b>Key</b> • = to be performed • = if never tested before « = risk assessment to be performed with appropriate action to follow, if positive													

### PHYSICAL EXAMS AND TREATMENTS

Head Start requires that your child be up to date with physical exams based on their age. Per Wisconsin childcare licensing regulations, each child must have an up-to-date physical (within the last twelve months) on record with us.

Physical exams, or well-child exams, are visits your child has with their doctor when they are not sick. Sometimes they will get shots at these visits, but not always. We follow Wisconsin's Health Check schedule for needed exams and screenings.

Immunization records must be submitted prior to your child starting school. We will also find out if your child has been screened for lead and anemia (low iron) before coming to Western Dairyland Head Start programs. These tests are done at 12 and 24 months of age, either at a WIC visit or by your child's doctor.

## DENTAL REQUIREMENTS

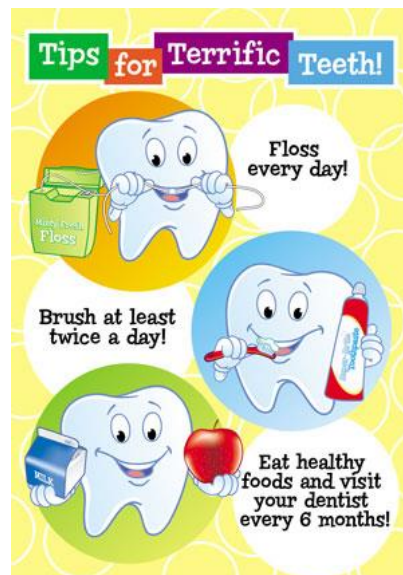
Children with healthy teeth are better able to eat, speak, and focus on learning. A yearly dental exam is required for all Head Start children. There are many dental services that are necessary for children's teeth to grow and develop properly. It is important to get children into the dentist as early as possible to receive all services and assessments. A child's first dental exam should be when they get their first tooth or no later than 12 months of age.

<b>DENTAL VISIT SCHEDULE</b> <i>BY THE DEPARTMENT OF HEALTH ADOPTED FROM THE AMERICAN ACADEMY OF PEDIATRIC DENTISTRY</i>						
AGE	EARLY HEAD START			HEAD START		
	BIRTH – 6 MOS	12 MOS – 24 MOS	2 YRS – 3 YRS	3 yrs.	4 yrs.	5 yrs.
Dental Services						
Clinical Oral Exam	●	●	●	●	●	●
Growth and Development Assessment	●	●	●	●	●	●
Topical Fluoride Treatment	●	●	●	●	●	●
Fluoride Supplement	«	«	«	●	●	●
Oral Hygiene Counseling	«	«	«	●	●	●
Assessment for Teeth Alignment Treatment				●	●	●
Assessment for Sealants				●	●	●
<b>Key</b> ● = To be performed in clinical setting ● = If they have erupted their first tooth « = Done by Parent/Guardian/Caregiver at home						

## DENTAL EXAMS AND TREATMENTS

Within 90 days of your child's first day of attendance or first home visit, our program must have an up-to-date (within the last 12 months) dental exam record. If you do not have a dentist that meets the needs of your child/family, our staff will assist you in finding a "dental home". If additional dental treatment is required, we will help you to make sure that treatment is received.

Because tooth decay can start when a child is very young, preventing decay is the key to good dental health. Starting when the first tooth comes in, brush your child's teeth two times a day. Your child will need your help with brushing until age 8. Children in Head Start will brush their teeth at least one time each day in their classroom.



## **VISION AND HEARING SCREENINGS**

A health screening can help find out if a child needs more testing by their doctor or another health professional. All Head Start and Early Head Start children must receive vision and hearing screenings within 45 days of the first day of attendance or the first home visit for home-based program.

For Head Start children, vision and hearing screenings will be conducted while they are at school.

For children in Early Head Start, the home visitor will screen children, within the first 45 days of their first home visit, using the Wisconsin Department of Health Services Typical Vision Developmental Milestone, and the Wisconsin Department of Health Services Typical Hearing Developmental Milestone screening tools.

## **MENTAL HEALTH SERVICES**

When children feel safe and can develop secure relationships with the adults around them, they are more successful learners. A large part of children's learning in early childhood centers around understanding, sharing and regulating their emotions.

Our mental health services can provide answers to simple questions, as well as more complex interventions and referrals. The Ages and Stages Questionnaire (ASQ-SE), a behavioral screening, is completed by the parent within 45 days of your child's first day of attendance or first home visit for home-based. The screening results will be incorporated into the individualized plan for each child. Our curriculum promotes emotional awareness and expression in the daily classroom environment to foster the social competence of young children. The mental health consultant provides observation in each classroom and at socializations to ensure we are providing a positive learning environment that promotes your child's social and emotional well-being. The mental health consultant is available to answer any questions regarding your child's developmental growth and wellness, and to offer general mental health information.

### **NUTRITION AND NUTRITION EDUCATION**

Children who eat nutritious food during every meal stay healthy and have energy to learn. Western Dairyland Head Start programs can help you and your child make good food choices. This is done by:

- Looking at what your child eats (home visit discussion)
- Nutrition education: children's classroom activities include working with healthy foods and parent information about good nutrition (workshops or written)
- Providing healthy meals and snacks for children in our classrooms

Head Start will weigh and measure your child two times each year to make sure your child is growing in a healthy way. If there are any concerns or questions, you can always talk to our Health Manager or Nutrition Consultant, a registered dietitian.

### **SPECIAL DIETARY NEEDS**

If your child has food allergies or is on a special diet, we will do our best to make accommodations for this. We will make substitutions when a statement signed by a physician is on file. Accommodations are provided to allow children with disabilities and other dietary needs to eat with their peers. Adaptive equipment, utensils and cups will be provided. Please discuss any special dietary needs with the Center Manager or Home Visitor.

Peanut allergy is the most common serious food allergy in children. Because of this, our agency has adopted a "No Nut" policy.

### **FOODS BROUGHT FROM HOME**

We respectfully request that no foods be brought from home unless there is a medical reason. Your child's meals, while in our care, are specifically planned to meet the USDA-Child and Adult Care Food Program guidelines.

Foods from home are not allowed. We offer a variety of foods and all children will be encouraged, but not forced, to try all foods. It may take children 10 to 15 times of being

exposed to a new food before they decide if they like it or not. Children are not allowed to bring treats for celebrations such as birthdays or holidays.

### **MEDICATION**

If your child is taking any medications or needs an asthma inhaler or epi-pen, you **MUST** complete a medication authorization form and provide the medication in the original container with the prescription label attached. The completed form must be on file at the center before any medication or treatments can be administered by staff.

### **CHRONIC HEALTH CONDITIONS**

If your child has a known chronic condition, there may be additional paperwork needed for our staff to properly accommodate your child at Head Start. This paperwork is vital to the health and safety of your child while they are in our care. It will provide clear guidance for program staff by specifying procedures and clarifying responsibilities of staff for your child to participate in all program activities. We want to make sure we know everything about the condition so we can treat it properly and efficiently.

Examples of conditions that require further documentation include:

Asthma: Asthma Action Plan signed by the doctor

Seizure History: Seizure Action Plan Signed by the doctor

Food Allergy: Note from doctor stating the allergy and what to substitute the food with

These are just a few of the common chronic conditions seen at Head Start. Any condition that requires changes to the day-to-day activities in the classroom most likely will need further paperwork. Please talk to your Center Manager if you have any questions about the paperwork needed and how the accommodations will be met in the classroom. If you are unsure if your child will need additional paperwork also reach out and staff can determine further actions.

### **COMMUNICABLE DISEASES**

We will notify you in writing if your child is exposed to a communicable disease while at Head Start. A completed Wisconsin Childhood Communicable Disease Chart can be found at <https://www.dhs.wisconsin.gov/publications/p4/p44397.pdf>.

### **EMERGENCY FIRST AID**

# FIRST AID

**Call 911 or an Emergency Number for any severely ill or injured child.**

## STINGS AND BITES

**Stinging Insects** Remove the stinger as quickly as possible with the scraping motion of a fingernail. Put a cold compress on the bite to relieve the pain. If trouble breathing, fainting, or extreme swelling occurs, call 911 or an emergency number immediately.

For hives, nausea, or vomiting, call the pediatrician. For spider bites, call the pediatrician or Poison Center and describe the spider. Have the pediatrician examine any bites that become infected.



**Animal or Human Bites** Wash wound thoroughly with soap and water. Call the pediatrician. The child may require a tetanus or rabies shot.

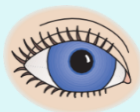
**Ticks** Use tweezers or your fingers to grasp as close as possible to the head of the tick and slowly pull the tick away from the point of attachment. Call the pediatrician if the child develops symptoms such as a rash or fever.

**Snake Bites** Take the child to an emergency department if you are concerned that the snake may be poisonous or if you are unsure of the type of snake bite. Keep the child at rest. Do not apply ice. Loosely splint the injured area and keep it at rest, positioned at, or slightly below, the level of the heart. Try to identify the snake, if you can do so safely.

## CONVULSIONS, SEIZURES

If the child is breathing, lay her on her side to prevent choking. Make sure the child is safe from objects that could injure her. Do not put anything in the child's mouth. Loosen any tight clothing. Perform rescue breathing if the child is blue or not breathing. Call 911 or an emergency number.

## EYE INJURIES



If anything is splashed in the eye, flush gently with water for at least 15 minutes. Call the Poison Center or the pediatrician for further advice. Any injured or painful eye should be seen by a doctor. Do NOT touch or rub an injured eye. Do NOT apply medication. Do NOT remove objects stuck into the eye. Cover the painful or injured eye with a paper cup or eye shield until you can get medical help. An eye injury may require a tetanus booster.

## FRACTURES AND SPRAINS

**DO NOT MOVE A CHILD WHO MAY HAVE A NECK OR BACK INJURY**, as this may cause serious harm. Call 911 or an emergency number.

If an injured area is painful, swollen, deformed, or if motion causes pain, wrap it in a towel or soft cloth and make a splint with cardboard or another rigid material to hold the arm or leg in place. Apply ice or a cold compress, call the pediatrician, or seek emergency care. If there is a break in the skin near the fracture or if you can see the bone, cover the area with a clean bandage, make a splint as described above, and seek emergency care.

If the foot or hand below the injured part is cold or discolored, seek immediate emergency care.



## FEVER

Fever in children is usually caused by infection. It also can be caused by chemicals, poisons, medications, an environment that is too hot, or an extreme level of overactivity. Take the child's temperature to see if he has a fever. Most pediatricians consider any thermometer reading above 100.4°F (38°C) a sign of fever. However, the way the child looks and behaves is more important than how high the child's temperature is.

Call the pediatrician immediately if the child has a fever and

- Appears very ill, is unusually drowsy, or is very fussy
- Has been in an extremely hot place, such as an overheated car
- Has additional symptoms such as a stiff neck, severe headache, severe sore throat, severe ear pain, an unexplained rash, or repeated vomiting or diarrhea
- Has a condition causing immune suppression (such as sickle cell disease, cancer, or the taking of steroids)
- Has had a seizure
- Is less than 2 months of age and has a rectal temperature of 100.4°F (38°C) or higher

To make the child more comfortable, dress him in light clothing, give him cool liquids to drink, and keep him calm. The pediatrician may recommend fever medications. Do not use aspirin to treat a child's fever. Aspirin has been linked with Reye syndrome, a serious disease that affects the liver and brain.



## BURNS AND SCALDS

**General Treatment** First stop the burning process by removing the child from contact with hot water or a hot object (for example, tar). If clothing is burning, smother flames and cool clothing by soaking with water. Remove clothing unless it is firmly stuck to the skin. Run cool water over burned skin until the pain stops. Do not use ice or apply any butter, grease, medication, or ointment.

**Burns With Blisters** Do not break the blisters. Call the pediatrician for advice on how to cover the burn and about any burns on the face, hands, feet, or genitals.

**Large or Deep Burns** Call 911 or an emergency number. After stopping and cooling the burn, keep the child warm with a clean sheet covered with a blanket until help arrives.

**Electrical Burns** Disconnect electrical power. Do NOT touch the victim with bare hands. Pull the victim away from the power source with a wooden pole. ALL electrical burns need to be seen by a doctor.



## SKIN WOUNDS

Make sure the child is immunized for tetanus. Any open wound may require a tetanus booster even when the child is currently immunized. If the child has an open wound, ask the pediatrician if the child should receive a tetanus booster.

**Bruises** Apply cold compresses. Call the pediatrician if the child has a crush injury, large bruises, continued pain, or swelling. The pediatrician may recommend acetaminophen for pain.

**Cuts** Wash small cuts with water until clean. Use direct pressure with a clean cloth to stop bleeding. Apply an antibiotic ointment, then cover the cut with a clean bandage. Call the pediatrician for large and/or deep cuts, or if the wound is gaping, because stitches should be placed without delay. For major bleeding, call for help (911 or an emergency number). Continue direct pressure with a clean cloth until help arrives.

**Scrapes** Rinse with soap and water to remove dirt and germs. Do not use detergents, alcohol, or peroxide. Use antiseptic soap. Apply an antibiotic ointment and a bandage that will not stick to the wound.

**Splinters** Remove small splinters with tweezers, then wash and apply local antiseptic. If you are unable to remove the splinter completely, call the pediatrician.

**Puncture Wounds** Do not remove large objects such as a knife or stick from a wound. Call for emergency medical assistance (911). Such objects must be removed by a doctor.

Call the pediatrician for all puncture wounds. The child may need a tetanus booster.



## HEAD INJURIES

**DO NOT MOVE A CHILD WHO MAY HAVE A SERIOUS HEAD, NECK, AND/OR BACK INJURY.** This may cause further harm.

Call 911 or an emergency number immediately if the child loses consciousness and does not awaken within a few minutes.

Call the pediatrician for a child with a head injury and any of the following:

- Loss of consciousness
- Drowsiness that lasts longer than 2 hours
- Difficulty being awakened
- Persistent headache or vomiting
- Clumsiness or inability to move any body part
- Oozing of blood or watery fluid from ears or nose
- Convulsions (seizures)
- Abnormal speech or behavior

For any questions about less serious injuries, call the pediatrician.

## POISONS

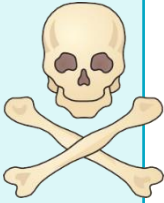
If the child has been exposed to or ingested a poison, call the Poison Center at 800/222-1222.

**Swallowed Poisons** Any nonfood substance is a potential poison. Call the Poison Center immediately. Do not induce vomiting except on professional advice. The Poison Center will give you further instructions.

**Fumes, Gases, or Smoke** Get the victim into fresh air and call 911 or the fire department. If the child is not breathing, start cardio-pulmonary resuscitation (CPR) and continue until help arrives.

**Skin Exposure** If acids, lye, pesticides, chemicals, poisonous plants, or any potentially poisonous substance comes in contact with a child's skin, eyes, or hair, brush off any residual material while wearing rubber gloves, if possible. Remove contaminated clothing. Wash skin, eyes, or hair with large quantities of water or mild soap and water. Call the Poison Center for further advice.

If a child is unconscious, becoming drowsy, having convulsions, or having trouble breathing, call 911 or an emergency number. Bring the poisonous substance (safely contained) with you to the hospital.



Does your community have 911? If not, note the number of your local ambulance service and other important numbers below.

**BE PREPARED: CALL 911**  
**KEEP EMERGENCY NUMBERS**  
**BY YOUR TELEPHONE**

PEDIATRICIAN \_\_\_\_\_

PEDIATRIC DENTIST \_\_\_\_\_

POISON CENTER \_\_\_\_\_

AMBULANCE \_\_\_\_\_

EMERGENCY DEPARTMENT \_\_\_\_\_

FIRE \_\_\_\_\_

POLICE \_\_\_\_\_

## TEETH

**Baby Teeth** If knocked out or broken, apply clean gauze to control bleeding and call pediatric dentist.

**Permanent Teeth** If knocked out, find the tooth and, if dirty, rinse gently without scrubbing or touching the root. Do not use chemical cleansers. Use milk or cold running water. Place the tooth into clean water or milk and transport the tooth with the child when seeking emergency care. Call and go directly to the pediatric dentist or an emergency department. If the tooth is broken, save the pieces in milk and call the pediatric dentist immediately.



## NOSEBLEEDS

Keep the child in a sitting position with the head tilted slightly forward. Apply firm, steady pressure to both nostrils by squeezing them between your thumb and index finger for 10 minutes.

If bleeding continues, or is very heavy, call the pediatrician or seek emergency care.

## FAINTING

Lay the child on his back with his head to the side. Do **NOT** give the child anything to drink. If the child does not wake up right away, call the pediatrician, or dial 911 or an emergency number. If the child is not breathing, begin CPR.



# CHOKING/ CPR

## LEARN AND PRACTICE CPR

### IF ALONE WITH A CHILD WHO IS CHOKING...

1. SHOUT FOR HELP.

2. START RESCUE EFFORTS FOR 1 MINUTE.

3. CALL 911 OR AN EMERGENCY NUMBER.

#### YOU SHOULD START FIRST AID FOR CHOKING IF...

- The child cannot breathe at all (the chest is not moving up and down).
- The child cannot cough, talk, or make a normal voice sound.
- The child is found unconscious. (Go to CPR.)

#### DO NOT START FIRST AID FOR CHOKING IF...

- The child can breathe, cry, talk, or make a normal voice sound.
- The child can cough, sputter, or move air at all. The child's normal reflexes are working to clear the airway.

## FOR INFANTS LESS THAN 1 YEAR OF AGE

### INFANT CHOKING

Begin the following if the infant is choking and is unable to breathe. However, if the infant is coughing, crying, speaking, or able to breathe at all, DO NOT do any of the following. Depending on the infant's condition, call 911 or the pediatrician for further advice.

#### 1 FIVE BACK BLOWS



ALTERNATING

#### 2 FIVE CHEST THRUSTS



Alternate back blows and chest thrusts until the object is dislodged or the infant becomes unconscious. If the infant becomes unconscious, begin CPR.

(Health care professionals only: assess pulse before starting CPR.)

### INFANT CPR (Cardiopulmonary Resuscitation)

To be used when the infant is unconscious or when breathing stops.

#### 1 OPEN AIRWAY

- Look for movement of the chest and abdomen.
- Listen for sounds of breathing.
- Feel for breath on your cheek.
- Open airway as shown.
- Look for a foreign object in the mouth. If you can see an object in the infant's mouth, sweep it out carefully with your finger. Do not try a finger sweep if the object is in the infant's throat, because it could be pushed further into the throat.

#### 2 RESCUE BREATHING

- Position head and chin with both hands as shown — head gently tilted back, chin lifted.
- Seal your mouth over the infant's mouth and nose.
- Blow gently, enough air to make chest rise and fall 2 times.

If no rise or fall, repeat 1 & 2. If no response, treat for blocked airway. (See "INFANT CHOKING" steps 1 & 2 at left.)

#### 3 ASSESS RESPONSE

- Place your ear next to the infant's mouth and look, listen, and feel for normal breathing or coughing.
- Look for body movement.

If you cannot see, hear, or feel signs of normal breathing, coughing, or movement, start chest compressions.



#### 4 CHEST COMPRESSIONS

- Place 2 fingers of one hand over the lower half of the chest. Avoid the bottom tip of the breastbone.
- Compress chest 1/2" to 1" deep.
- Alternate 5 compressions with 1 breath.
- Compress chest 100 times per minute.



Check for signs of normal breathing, coughing, or movement every minute.

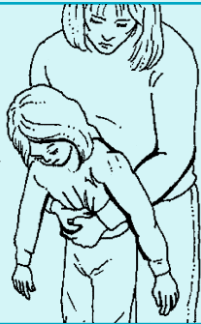
## FOR CHILDREN 1 TO 8 YEARS OF AGE\*

### CHILD CHOKING

Begin the following if the child is choking and is unable to breathe. However, if the child is coughing, crying, speaking, or able to breathe at all, **DO NOT** do any of the following, but call the pediatrician for further advice.

#### CONSCIOUS

**FIVE QUICK INWARD AND UPWARD THRUSTS** just above the navel and well below the bottom tip of the breastbone and rib cage (modified Heimlich maneuver).



If the child becomes unconscious, begin CPR.

The information contained in this publication should not be used as a substitute for the medical advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on the individual facts and circumstances.

### CHILD CPR (Cardiopulmonary Resuscitation)

To be used when the child is **UNCONSCIOUS** or when breathing stops.

#### 1 OPEN AIRWAY

- **Look** for movement of the chest and abdomen.
- **Listen** for sounds of breathing.
- **Feel** for breath on your cheek.
- **Open** airway as shown.
- **Look** for a foreign object in the mouth. **If you can see** an object in the child's mouth, sweep it out carefully with finger. **Do not** try a finger sweep if the object is in the child's throat because it could be pushed further into the throat.



#### 2 RESCUE BREATHING

- **Position** head and chin with both hands as shown.
- **Seal** your mouth over child's mouth.
- **Pinch** child's nose.
- **Blow** enough air to make child's chest rise and fall 2 times.



#### 2A HEALTH CARE PROFESSIONALS ONLY:

- Use **abdominal thrusts** to try to remove an airway obstruction.
- Continue steps 1, 2, and 2A until the object is retrieved or rescue breaths are effective.
- Assess pulse before starting CPR.

If still no rise or fall, repeat 1&2. If still no rise or fall, continue with step 3 (below).

#### 3 ASSESS RESPONSE

- Place your ear next to the child's mouth and look, listen, and feel for **normal breathing** or **coughing**.
- Look for **body movement**.

If you cannot see, hear, or feel signs of normal breathing, coughing, or movement, start chest compressions.



#### 4 CHEST COMPRESSIONS

- **Compress** chest 1" to 1 1/2".
- **Alternate** 5 compressions with 1 breath.
- **Compress** chest 100 times per minute.

Press with the heel of 1 hand on the lower half of the chest. Lift fingers to avoid ribs. Do not press near the bottom tip of the breastbone.



Be sure someone calls 911 as soon as possible, and by 1 minute after starting rescue efforts.

**\*For children 8 and older, adult recommendations for choking/CPR apply.**

American Academy of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN®

**If at any time an object is coughed up or the infant/child starts to breathe, call 911 or the pediatrician for further advice.**

**Ask the pediatrician for information on Choking/CPR instructions for children older than 8 years of age and on an approved first aid course or CPR course in your community.**

## CENTER CLASSROOM/HOME-BASED INFORMATION

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### A TYPICAL DAY IN OUR PROGRAM

- Arrival: Children are greeted by the teachers
- Toileting, Washing Hands
- Breakfast/Lunch
- Tooth Brushing
- Circle Time (Large Group)
- Exploring/Working in Learning Centers
- Small-Group/Individualized Support
- Toileting, Washing Hands
- Snacks
- Gross Motor/Outdoor Play
- Closing Activity/Departure
- Rest Time (Full Day programs ONLY)

### ATTENDANCE POLICY

Regular attendance is essential for your child to gain the most from their educational experience. If your child doesn't attend school regularly, they miss out on strengthening school readiness skills and long term academic performance. Missing just 10% of class, which equals 18 days per year or just 2 days per month, puts children at risk for future achievement. It is important to build a healthy habit of daily school attendance right from the beginning.

Head Start requires that enrolled students attend classes consistently. Individual attendance is monitored, and follow-up contact for absence is required.

If you know your child will not be attending Head Start for any reason:

1. Please call the center your child attends and give a reason for absence. The phone has voicemail, so you can leave a message at any time, even in the middle of the night.
2. For centers with contracted transportation, please call the Bus Company or school district to notify them of your child's absence.

You must notify your home visitor if your child will be absent or miss a home visit. For the home-based program, we will make every effort to reschedule home visits canceled by you. Any home visit canceled by the staff will have to be made up.

Please keep us informed of illnesses or emergencies that will prevent your child from attending school or home visits.

### MULTIPLE ABSENCES/UNEXCUSED ABSENCE

Western Dairyland program policies state that if children cannot maintain consistent attendance, they may be withdrawn and replaced. Communication between the

parent/guardian and our staff is crucial. If your child is absent and you do not contact us regarding the reason for absence, a staff member will contact you to discuss it. Program staff may be able to help recognize attendance challenges and assist with referrals for services.

### **CANCELLATION**

In the event of extreme cold, icy roads, or heavy snowfall, Head Start classes may be cancelled. If the school district where your Head Start center is located is closed due to weather or has a 2 hour late start, our center will be closed also. **We will not call you to notify you of cancellations.** Please listen to local TV and radio stations for the cancellation lists. **If it says the *local* school district is closed, Western Dairyland Head Start programs will be closed as well.** If you have any questions regarding school cancellations, please call the center.

### **EMERGENCY PREPAREDNESS FIRE EVACUATION PLAN**

In the event of a fire, WDHS will implement the following Rescue Plan:

- Teachers get the attendance form, gather and count the children and go to the designated meeting place.
- The Teacher Assistant will bring the emergency backpack which contains the first aid kit, the phone and the emergency contact list for children.
- The Center Manager will call the 911.
- If a shelter is needed once we evacuate the building, we will follow the evacuation plan.

**The site's designated meeting place in the event of a fire is**

\_\_\_\_\_.

### **SHELTER-IN-PLACE PLAN**

In the event of chemical, biological, or radiological threat, nuclear blast, explosion or any disaster that would require children to be confined at the center, WDHS will:

- Lock all doors, close windows and air vents.
- Move children to the designated "shelter-in-place" area.
- The designated employee will turn off all fans, heating and air conditioning systems.
- Classroom teachers will carry a first aid kit to the shelter with them.

**The site's designated "shelter-in-place" is**

\_\_\_\_\_.

The center will have food and water available in the shelter. Extra clothing, bedding, emergency lighting and a battery operated radio will be accessible for use in the designated area.

Parents will be notified by phone that a shelter in place has occurred. All children and staff will remain in the building until it is deemed safe to leave.

## **EVACUATION PLAN**

In the event of chemical, biological, or radiological threat, nuclear blast, explosion or any disaster that would require children to be transported to a safe shelter area, WDHS will implement the following plan:

**The primary shelter is** \_\_\_\_\_.

**The secondary shelter is** \_\_\_\_\_.

- The teacher will get the attendance form, gather and count the children.
- If the primary shelter is deemed to be safe and poses no threat, the teacher will transport children in the bus or walk if it is safe to do so.
- The Center Manager will bring the emergency backpack which contains the first aid kit, the phone and the emergency contact list for children (unless it has been contaminated).
- Parents will be notified by phone that an evacuation has occurred and that staff and children are moved to the designated safe shelter.
- All staff and children would remain at the designated shelter until authorities advise it is safe to leave.

## **TORNADO**

In the event of a tornado warning, we will follow the shelter-in-place plan.

- The Teachers will get the attendance form, gather and count the children.
- The Center Manager will bring the emergency backpack which contains the first aid kit, the phone and the emergency contact list for children.
- We will stay in the sheltered area until the event has passed. If the event happens during a pick up time, we will invite families to join us in the sheltered area until the event passes.

## **MEDICAL EMERGENCIES**

If your child would have an illness or injury while in our care, we will make a determination if the illness/injury needs immediate medical attention. Staff members are CPR certified and first aid trained.

- If the illness/injury is mild, we will treat the child and call parents to determine necessary steps.

- If the injury/illness is severe, we will call 911, notify parents, share relevant health information to medical personnel, and accompany child to medical facility until a parent(s) arrives.

**The site's designated medical facility is:** \_\_\_\_\_.

## **INTRUDER**

In the case of unauthorized individuals entering the facility, each site/location has an individualized Intruder Alert Procedure. Parents will be notified of all lockdown events. Just as we practice fire drills, staff and children practice the Intruder Alert procedures in the facility.

## **DRESSING FOR HEAD START**

Children are very active while at school, both indoors and outdoors. Children need to wear comfortable clothes that are easy for them to do by themselves. Please keep this in mind when dressing your child for Head Start.

Please always send your child to school in closed-toe shoes such as tennis shoes.

## **PLEASE NO SANDALS, FLIP FLOPS, OR CLOGS.**

Children will play outside every day unless the temperature with wind chill reaches below 0 degrees Fahrenheit. Please remember to send boots, snow pants, mittens, hats, and other winter gear every day as the weather changes. Also, please LABEL each item of outdoor clothing!

We recommend that you send an extra set of clothes for your children, such as short and long-sleeved shirts, short and long pants, socks, and underwear. Label each item with your child's name. These items will be kept at the center in case your child's clothing needs to be changed while at school.

## **BACKPACKS**

Your child should have a bag or backpack to carry notes, artwork, and other important papers between home and Head Start. Please label the child's name **inside** their backpack. The bag should be big enough to fit a standard size folder. We will provide a folder for home/school communication. Please check your child's backpack daily for notes/communication from school. If you are unable to provide a backpack, let us know and we can assist you.

## **ITEMS FROM HOME**

There are many toys and activities for your child to enjoy while at the Head Start center. Please do not allow your child to bring items from home to class or home-based socialization. This includes toys, jewelry, books, gum, candy, and other items.





## CHILD GUIDANCE

Our guidance policy is designed to assist children in learning rules and expectations, gain self-control, acquire self-confidence, and develop appropriate social skills through their interactions with others.

Discipline must be:

- Individualized and consistent for each child
- Appropriate to the child's age and level of understanding
- Directed toward teaching the child acceptable behavior and self-control

Our staff only use positive methods of discipline and guidance that encourage self-esteem, self-control, and self-direction. These methods include the following:

- Using praise and encouragement of expected behavior instead of focusing on unacceptable behavior
- Reminding a child of behavior expectations daily by using clear, positive statements
- Redirecting behavior using positive statements
- Redirecting a child to another activity when experiencing continued conflict
- Using calming techniques such as deep breathing and counting aloud

We believe that together with families, we can partner to develop strong, confident children.

## BIRTHDAY/HOLIDAY CELEBRATIONS



Unless you wish otherwise, your child's birthday will be recognized at the center. Please note that center regulations prohibit birthday treats from being served at the center.

Western Dairyland Head Start follows a non-biased holiday curriculum. Many families celebrate the holidays in many different ways, and we strive to be respectful of each family. Therefore, holidays such as Halloween, Christmas, Valentine's Day, Easter, etc., are not celebrated in the centers. Instead, the children will study seasonal themes and other topics of interest. We ask that you not send Halloween costumes or treats, Christmas cards, or Valentine's Day cards

to school.

## CHILD RELEASE POLICIES

Your child's safety is our priority. All individuals authorized to pick up/drop up your child must be listed on the enrollment form in writing. Please be sure to update your enrollment form regularly whenever there are any changes.

Your enrollment form must list all the individuals (13 or older) who will be getting your child off the bus, including daycare staff. The bus driver must be able to see the



authorized individuals before your child can be released. If the driver cannot see an authorized individual, they will not drop off your child. In addition, bus drivers WILL NOT release your child to anyone who is not on your enrollment form. The bus driver will check the photo identification of anyone picking up your child. All authorizations or changes to enrollment forms must be in writing.

If a parent or other authorized person is not at the drop off location, center staff will make every reasonable effort to contact the emergency phone numbers you provide for us. Your child will continue to ride the route and then return to the center or designated bus company location with the driver. You will need to pick up your child at the center or bus company location.

Some of our centers have school district provided transportation and therefore, follow the school's transportation policies. Please check with your center staff if you have questions about transportation at your center.

Parents who drop off/pick up their child at the center must come into the classroom or onto the playground and ensure the teacher knows that their child has arrived or is leaving.

## CHILD ILLNESS

Children grow and learn best when they are healthy and safe! Thus, our teachers and staff work with your family to ensure a healthy environment for all children. Since most infections in young children are mild and are spread by children without symptoms, excluding children with mild illnesses is unlikely to reduce the spread of most infections at school. However, exclusion is necessary for some infectious diseases to support your child's wellbeing and to protect the health of other children and our staff.



The most important reasons for exclusion are the inability for a child to take part in normal activities or the inability of teachers or staff to give the proper care a child needs. The other main reason to temporarily exclude a child is if their illness has a risk of spreading harmful disease to others. We reference both national guidelines from the leading pediatricians across the US and the Wisconsin Childhood Communicable Diseases to determine when it is safest for a child to stay at home.

For these reasons, you should follow the chart below to determine when to keep your child home:

<b>SYMPTOM</b>	<b>WHEN TO KEEP CHILD HOME</b>
<b>Common Cold</b> (runny nose, cough)	If accompanied by behavior change, difficulty breathing or has red/purple rash not associated with injury
<b>Cough</b>	If severe cough, rapid or difficult breathing, wheezing without previous evaluation, blue color of skin or lips
<b>Diaper Rash</b>	If has oozing sores leaking body fluids outside the diaper
<b>Diarrhea</b>	If stool is not contained in the diaper or if a toilet-trained child has "accidents," when child has more than 2 stools per day above their usual, or when stool contains blood or mucus
<b>Difficulty/ Noisy breathing</b>	If rapid breathing, breath sounds heard when the child is at rest, wheezing without previous evaluation, blue color of skin or lips, severe cough, or has fever with behavioral change
<b>Earache</b>	Not unless child meets other symptom criteria
<b>Eye Irritation</b>	If child has watery discharge that is yellow or white
<b>Fever</b>	Any child with a temperature of 101° F (38.3° C) or above with a behavioral change or other symptoms (e.g., sore throat, rash, vomiting, diarrhea). If infant is younger than 2 months, any fever of 100.4° or above needs exclusion and immediate medical attention.
<b>Headache, Neckache</b>	Not unless child meets other symptom criteria
<b>Itching</b>	If from chickenpox, ringworm, impetigo, scabies, head lice and have not started on treatment yet If from pinworm, allergic reactions, eczema and now appears with weeping or crusty sore
<b>Mouth Sores</b>	If have sores with drooling that a child cannot control or if unable to participate due to symptoms related to the mouth sores
<b>Rash</b>	If behavior change or fever, oozing/open wound unable to be covered, bruising not associated with injury, joint pain with rash, rapidly spreading blood-red rash, or tender/red area of skin which is increasing in size or tenderness
<b>Sore Throat</b>	If unable to swallow, excessive drooling with breathing difficulty, or fever with behavioral change
<b>Stomachache</b>	If severe pain causing child to double over or scream, has bloody/black stools, has not urinated for 8 hours, has yellow skin/eyes, diarrhea (see diarrhea), vomiting (see vomiting)
<b>Lumps on neck</b>	If having difficulty breathing or swallowing, has red, tender, warm glands
<b>Vomiting</b>	If vomited more than 2 times in 24 hours, vomit appears green/bloody, or has fever, hives, or recent head injury

If your child DOES meet one of the listed exclusion criteria for their symptoms(s), we ask that you keep your child from coming to Head Start until they no longer meet the exclusion criteria or until necessary steps are fulfilled and cleared by the Health Manager or a physician.

If your child starts showing signs of these illnesses while at Head Start, our staff will call you or the emergency contact numbers listed on your enrollment form to promptly pick up your child.

For any child experiencing symptoms, it can be helpful to take note of what symptoms they have and when they started or changed. This is useful when determining what is causing their symptoms and when they would be safe to return.

If your child has one of these symptoms but DOES NOT meet the exclusion criteria for their symptoms, they are most likely safe to attend Head Start. If you have questions, or are unsure if your child applies to these, call the Head Start Facility.

## HAND WASHING



According to the Center for Disease Control and Prevention, handwashing is one of the best ways to avoid getting sick and spreading illness to others. Your child will practice handwashing at arrival time, before and after meal or snack, before and after water table activities, after messy activities (sand, play-doh, outdoor play), and after toileting.

## DAILY MEALS AND SNACKS

Head Start participates in the U.S Department of Agriculture Child and Adult Care Food Program. Your child is served a well-balanced breakfast and/or lunch and a snack at Head Start. Besides providing good nutrition, mealtimes are a pleasant time for socialization and other learning opportunities.

If your child has food allergies or a special diet, we will be happy to make accommodations for this. Please discuss any special dietary needs with the Center Manager.

***Disclosure - USDA Nondiscrimination Statement with Complaint Filing Procedure:***

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

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

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/ad-3027.pdf>, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted 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; or
2. **fax:**  
(833) 256-1665 or (202) 690-7442; or
3. **email:**  
[program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider.

## EDUCATION SERVICES

### DEVELOPMENTAL SCREENING

All children will be screened using developmental, social-emotional, hearing, and vision screening tools prior to or within 45 days of enrollment into the Western Dairyland Head Start programs. Your input is essential in the screening process. The results of these screenings will be shared with you at a home visit or parent-teacher conferences. If you have any concerns about your child's development, please talk with your teacher or family services specialist.

### CURRICULUM

#### HOME-BASED PROGRAMMING

Partners for a Healthy Baby is a research-based, home visiting curriculum used in the home visiting program. Partners for a Healthy Baby supports pregnant moms, expectant families, and parents of infants and toddlers. Partners for a Healthy Baby features materials for Home Visitors and families that promote child development and family well-being. The curriculum is organized around children's ages and topics that Home Visitors use to support age-appropriate learning and family development. Home visiting services are tailored to the family's unique needs. Home visitors may also use educational components of the Creative Curriculum as a supplement to Partners for a Healthy Baby.

#### CENTER-BASED PROGRAMMING

Creative Curriculum is a comprehensive, research-based curriculum designed to provide developmentally appropriate, content-rich programming for all students. Children learn through play. Our classrooms are designed using The Creative Curriculum. Teachers set up their classrooms in a way that encourages positive behavior and keeps children active and engaged. Learning opportunities are integrated into all activities. Active involvement and firsthand experiences foster total development.

When children do this:	They are learning to:
Put blocks in a truck and dump them out	Understand the size, weight, and number concepts (Math & Science)
Balance a large block on top of another	Control and coordinate muscles (physical coordination)
Finish a puzzle	Complete a task (persistence and self-esteem)
Sort pictures that are the same	Match and classify (Math)
Sing or do a finger play with the other children	Participate cooperatively in a group (Social Skills)
Catch and throw balls	Coordinate eye and hand movements (Physical Development)

When children do this:	They are learning to:
Turn pages in a book from left to right	Reading and writing readiness (Literacy)
Listen to a story and talk about what happened	Love books, remember details and express ideas (Literacy and Language)
Make boats sink in a water table	Recognize cause and effect (Science)
Play beside other children	Get along with others (Social skills)
Gather paper, scissors, and glue for a project	Plan and carry out a task (Cognitive)
Separate cups and plates at clean up time	Group objects in categories (Classifying, Math)
Pretending to be grown-ups	Understanding life experiences (Social Studies, Science)

### CONSCIOUS DISCIPLINE

Conscious Discipline is a comprehensive, research-based, social-emotional classroom management program. Conscious Discipline uses everyday life events to teach self-control, conflict resolution, character development, and social skills. It creates a compassionate culture in our classrooms and facilitates an intentional shift in the adult understanding of behavior. Conscious Discipline provides specific, research-backed strategies for responding to each child's individual needs. This highly effective approach is proven to increase self-regulation, sense of safety, connection, empathy, and intrinsic motivation in both children and adults.

### EDUCATIONAL HOME VISITS/ PARENT-TEACHER CONFERENCES

Home visits and center conferences are an excellent way for you to communicate with your child's teacher. You will be asked to participate in 2 educational home visits and 2 parent conferences during the school year. At home visits and parent-teacher conferences, we will set School Readiness Goals and review your child's progress. If you have questions or concerns about your child that arise before a home visit or conference is scheduled, please contact the center staff.

### EARLY HEAD START HOME-BASED VISITS

The home-based option is a method of Early Head Start programming that focuses on the home as the young child's primary learning environment. Home-based services have a primary goal of promoting the development of children from birth to age 3 in all areas of development.

Once a week, a Home Visitor will come to your home. Your home visit will last 90 minutes. You and your Home Visitor will work out a schedule that will fit into your routine. Any household members in the home can take part in the home visit. Home visits are planned jointly with you to provide educational opportunities for the child's learning and development using what is available in your home environment. Your Home Visitor will:



- Help you use the home environment to create rich learning opportunities
- Provide ideas for you to have learning opportunities with your child during the week
- Use your ideas and input when planning for your child
- Provide books to promote literacy
- Assist you in securing resources and needed services

### HOME-BASED SOCIALIZATIONS

Home-based socializations are held at a minimum twice a month. Parents are required to attend with their children. During this time, parents will get to know one another and share parenting successes and challenges. Socializations provide a time to learn about topics such as feeding an infant or dealing with the challenging behaviors. Your home visitor will be there too, along with another staff member. As your child's first and most important teacher, you will become partners in helping your child grow and learn.

### DISABILITY SERVICES

Western Dairyland Head Start programs ensure the individualized needs of children with disabilities are being met. All children have access to and can fully participate in the full range of activities and services. Our program works closely with other programs, including local school districts and Birth to Three, to support your child. We work with and assist families through the process of screening, referral, evaluation, and possible implementation of individualized education plans.

Talk to your child's teacher or family service specialist if you have any concerns or questions about your child's development.



### EARLY HEAD START TRANSITION

Early Head Start staff will assist you in facilitating the transition from Early Head Start to Head Start or another early childhood setting. A smooth transition is essential to ensure children continue to receive services and support.

The Early Head Start transition process will begin for each child and family at least six months before the child's third birthday.

### HEAD START TRANSITION

The transition planning process includes setting school readiness goals, setting family goals and updates, completing health requirements, and sharing information and resources with families regarding school readiness. Transition is an ongoing process from the time of enrollment until the child is ready to enter kindergarten.

Transition activities may also include the following:

- Head Start staff attendance at IEP meetings



- Parent/child take-home activities
- Summer take-home packets
- Handouts containing kindergarten readiness activities
- Field trips to the kindergarten classroom and the public school library.

## TRANSPORTATION SERVICES

Transportation services may be provided at some centers either directly or through a contracted bus company. Please make sure your child is ready for the bus at pick-up time. Remember that this time is approximate and may vary by a few minutes due to weather or other unforeseen events.

### TRANSPORTATION SAFETY EDUCATION CURRICULUM

School buses are the safest means of transportation to and from school and keep an estimated 17.3 million cars off the roads every year. Even so, children need to be taught how to stay safe around a school bus. During the first few weeks of school, we will be practicing safety procedures for boarding and exiting the bus. We encourage you to practice these at home as well. Designate a safe spot for you and your child to stand and wait for the bus. The bus driver will tell you when it is safe to load.



### SAFE LOADING PROCEDURES

1. Wait my turn
2. Wait for the "OK" to load sign
3. Take one step at a time
4. Hold onto the handrail

### SAFE CROSSING PROCEDURES AND PEDESTRIAN SAFETY

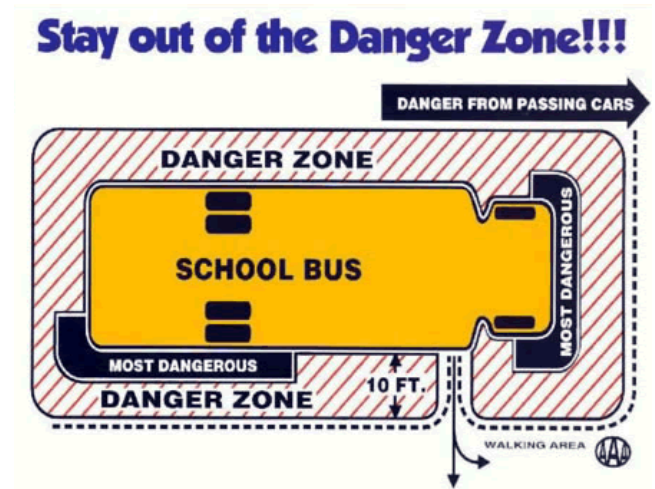
- Take 10 giant steps back
- Stop, Look, Listen
- Wait for the "OK" to cross
- Cross with an Adult



The "**Danger Zone**" is the area on all sides of the bus where children are in the most danger of not being seen by the driver:

- 10 feet in front of the bus where the driver may be too high to see a child
- 10 feet on either side of the bus where a child may be in the driver's blind spot
- 10 feet behind the school bus

The **10 giant steps** rule is the good measurement for children to identify the danger zone around the school bus. If a child can touch the bus, they are too close. If you can't see the driver, the driver can't see you. Please make sure your child stays out of the bus danger zones at all times.



## FAMILY AND COMMUNITY ENGAGEMENT

### MONTHLY NEWSLETTER

Each month we will share Head Start happenings and information through the newsletter. We are utilizing QR codes to provide additional information. Simply open the camera on your smartphone or smart device and hold it steady for a few seconds. Your device will read the code and a notification will appear. Tap the notification and you'll be directed to the document or website! Please reach out to any Head Start staff if these aren't working for you, or if you'd like a quick demonstration.

### VOLUNTEERING

FAMILIES ARE ALWAYS WELCOME AT HEAD START! There are many ways for parents and family members to be involved with Head Start. You can volunteer by assisting at parent meetings, making menu suggestions, serving on parent committees, or volunteering in the classroom.

In the classroom, volunteers can:

- Assist with group activities
- Assist with hand washing and tooth brushing
- Assist children at mealtimes
- Arrange to share a personal skill or hobby with the children

At home, volunteers can:

- Complete Monthly Family Take Home activities
- Complete Monthly Calendar of Activities
- Contribute ideas and suggestions for activities

Please discuss your interests and preferences regarding volunteering with our staff. When you are engaged in your child's education, you teach your child that school is important. Research shows that children perform better in school when their families are engaged in their education. Adults volunteering in the classroom will be required to complete volunteer orientation with a center staff member, prior to volunteering.

### **VOLUNTEER IN-KIND**

Western Dairyland Head Start is a federally funded program. For every \$1 of Federal funds received, Western Dairyland has to generate \$0.25 in non-federal match or In-Kind. In-Kind contributions can be donations of volunteer time/services, space, or materials that directly benefit the program. For every hour you spent volunteering, you generate \$18.15 in In-Kind for our program. Please help us reach our goal by volunteering, completing take-home activities, and participating in Policy Council.

### **FATHERHOOD ENGAGEMENT INITIATIVE**

The Fatherhood Initiative is based on the belief that fathers and mothers contribute in different ways to their children's healthy growth and development.

When one parent is missing or not involved in the child's life, important areas of development are affected.

Recent research gives us new and important information on fathers' role in their child's lives. The quantity and quality of time influences this role that they spend with their children.

Benefits for **Children** with involved fathers....

- Have lower levels of aggression and higher levels of self-regulation
- Are more likely to do well in school
- Have healthy self-esteem
- Are less likely to have separation anxiety
- Demonstrate a greater ability to take initiative and have better self-control
- Are better problem solvers
- Get along better with peers
- Have fewer behavior problems
- Avoid high-risk behaviors

Benefits for the **Families** with involved fathers...

- Loving and nurturing relationships
- Better communication between fathers and family members
- Greater sense of commitment
- Help with coping with everyday hassles and stressful situations
- Less troubling conflicts with teenage children

The quality of fathers' interactions with staff makes a difference. When fathers feel valued and included in the program and receive services that strengthen their parenting skills, they are more engaged in the program and with their young children.

Our goal is to offer special activities and events for fathers and positive male role models. We encourage all men involved in your child's life to participate in home visits, socializations, parent meetings, and father/father-figure engagement activities.

### **FAMILY PARTNERSHIP AGREEMENT**

Western Dairyland Head Start programs work with each family to build on their strengths. Our staff will help your family complete the Family Partnership Agreement (FPA). The FPA will help you identify your family's strengths and assist you in setting goals for your future. You will have continued support to meet your goals during your regular contact with the Family Advocate or Home Visitor.

The staff will help to.....

- Identify the needs of the family and assist the family in finding a community resource to help meet those needs
- Provide a community resource list for families
- Furnish information about available community services and how to use them
- Provide assistance with adult education: GED, ESL, and college information.
- Serve as an advocate for your family
- Provide emergency assistance or crisis intervention
- Plan school readiness goals for your child

### **FAMILY SERVICE HOME VISITS**

Your Family Advocate will visit your home a twice during the school year at a time that is convenient for you. Your Family Advocate will, together with you, complete a Family Partnership Agreement through which you will:

- Identify your family strengths and interests
- Set goals for your family

Your Family Advocate will also assist you in securing the resources and services needed.

### **CONSCIOUS DISCIPLINE PARENT EDUCATION CURRICULUM**

Conscious Discipline parent events will give you opportunities to learn new skills in creating a safe, connected, problem-solving environment for your families.

### **POLICY COUNCIL**

Policy Council is a governing body that includes parents and some community members. At your first Parent Committee meeting, parents will vote to elect a Policy Council representative and an alternate for your center/program. This is an excellent opportunity for you, as parents, to connect with your peers and gain important

leadership skills, so you can advocate for your child and family. Policy Council members participate in fundamental aspects of the Head Start program, such as:

- Grant proposal and approval
- Budget
- Policies and procedures
- Personnel recommendations
- Recruitment, selection, and enrollment

Annual training for Policy Council is provided, typically in early November, to ensure Policy Council members understand the Head Start regulations applicable to their roles and responsibilities. If you are interested in being a Policy Council representative, see your child's Teacher, Home Visitor, or Family Advocate.

### **PARENT COMMITTEE MEETINGS**

As a parent, you are a member of the Parent Committee. All members of the family are invited to participate. You are valued and needed, have an important voice, and your engagement makes a difference for your child.

Parent Committee meetings are held regularly. The function of the meetings is to provide families with an opportunity to advise staff in developing and implementing activities and services to ensure they meet the needs of children and families. The parent committee will also elect a Policy Council representative and alternate to represent their center/program. The Policy Council member will inform the Parent Committee on information shared at a Policy Council level.

### **HEALTH SERVICES ADVISORY COMMITTEE**

The Health Services Advisory Committee comprises staff, Head Start parents, health providers, and community partners. The Health Services Advisory Committee meets at a minimum twice a year to identify community health needs, new resources, and opportunities to improve the health, wellness, and safety of the children and families we serve.

### **MILEAGE AND CHILD CARE REIMBURSEMENT**

Western Dairyland Head Start programs will reimburse families for mileage and childcare for the following activities:

- Policy Council
- Parent Committee
- Health Advisory Committee
- Home-based socialization

Mileage reimbursement rate is at \$0.25 per mile for one family and increases with additional families. The childcare reimbursement rate is at \$2.00 per hour for one child, \$3.50 per hour for two children, and \$5.00 per hour for three or more children. Childcare can ONLY be reimbursed when paid to friends, neighbors, childcare

providers, aunts, uncles, and grandparents of children. Childcare cannot be reimbursed when paid to parents, household members or siblings.

## **CONFIDENTIALITY**

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Western Dairyland Head Start programs is committed to protecting the confidentiality of the children and families we serve. Information will **ONLY** be shared with outside agencies with a parent's written consent on file at the center and in the main office. The granting of consent is voluntary on the part of the parent and may be revoked at any time. Request for revocation must be received in writing. If a parent revokes consent, that revocation is not retroactive and does not apply to an action that occurred before the consent was revoked.

The followings are some exceptions under the Head Start regulations to allow for disclosure of protected information without parental consent:

- A federal or state entity auditing or evaluating the program to ensure compliance with federal legal requirements
- Appropriate parties in order to address a disaster, health or safety emergency during the period of the emergency, or a serious health and safety risk such as a serious food allergy
- A judicial order or lawfully issued subpoena
- Authorized representative from the Food and Nutrition Service to conduct program monitoring, evaluation, and performance measurements for the Child and Adult Care Food Program
- A casework or other representative from a legally responsible state, local, or tribal welfare agency, who has the right to access a case plan for a child who is in foster care placement
- Appropriate parties on reporting child abuse and neglect, consistent with applicable federal, state, local, and tribal laws
- School districts requesting information regarding records of academic performance and assessments generated within the WDHS program.

## **CHILD ABUSE AND NEGLECT REPORTING**

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Like all public schools and other social service providers, Western Dairyland Head Start is mandated by law to report suspected child abuse and neglect to appropriate parties. Our staff will follow state regulations regarding timeframes, information that must be reported, and confidentiality of reported information.

There are many community resources available to help parents and families under stress. Please talk to our staff if you need any information or support on positive parenting techniques.



## **PARENT GRIEVANCE PROCEDURE**

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A Parent Grievance Procedure is established to encourage parents to feel comfortable with expressing any concerns you may have toward our program or staff. If you have a complaint and would like to file a grievance, please report concerns/complaints in the following order:

- Center Manager/Home-Based Manager
- Head Start Director
- Chief Executive Officer
- Board of Directors

## **INCLUSION OF PEOPLE WITH SPECIAL NEEDS**

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Western Dairyland Head Start strives to provide quality services to all enrolled children and families, including full inclusion of people with special needs. In accordance with the Americans with Disabilities Act (ADA P L 101-336), our policies and procedures are intended to eliminate barriers to program services or facilities.

## **NON-DISCRIMINATION STATEMENT**

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Western Dairyland Economic Opportunity Council, Inc. does not discriminate in any way, including on the basis of race, color, national origin, creed, religion, sex, age, or disability.

## **SMOKE AND DRUG FREE ENVIRONMENT**

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All Western Dairyland buildings and centers are considered tobacco-free, and smoking is prohibited everywhere on the property. This applies to clients, staff, and visitors. There are no designated smoking areas anywhere on the property for anyone.

Federal law mandates that we establish and maintain a drug-free and alcohol-free environment. Western Dairyland will not tolerate the illegal use of drugs or alcohol at any of its offices, worksites, or locations. It is the policy of Western Dairyland that all employees, volunteers, and families are prohibited from the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance at any agency facilities or worksites.

## **REGULATED CHILD CARE**

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All Head Start centers are licensed and regulated by the Wisconsin Department of Children and Families (listed on Page 3). DCF licenses are in effect unless revoked, suspended, or voluntarily surrendered at all licensed centers above. All exceptions and stipulations or conditions to this license shall be posted near the license certificate. The Guide to Regulated Child Care is provided to inform you with a summary of the DCF Licensing regulations that are followed by Western Dairyland Head Start centers in

addition to Head Start Performance Standards.

<https://dcf.wisconsin.gov/files/publications/pdf/2436.pdf>

## COMMUNITY RESOURCE GUIDE

<u>Resource</u>	<u>Contact Information</u>
<b>Western Dairyland E.O.C., Inc.</b>	<a href="http://www.westerndairyland.org">www.westerndairyland.org</a>
<b>Wisconsin Head Start Association</b>	<a href="http://www.whsaonline.org">http://www.whsaonline.org</a>
<b>Early Childhood Learning and Knowledge Center</b>	<a href="http://www.ohs.acf.hhs.gov.hslic">www.ohs.acf.hhs.gov.hslic</a>
<b>Zero to Three</b>	<a href="http://zerotothree.org">http://zerotothree.org</a>
<b>Office of Head Start</b>	<a href="http://acf.hhs.gov/programs/ohs">http://acf.hhs.gov/programs/ohs</a>
<b>Wisconsin Childcare Licensing</b>	<a href="http://www.dcf.wisconsin.gov/childcare/licensed/search.htm">www.dcf.wisconsin.gov/childcare/licensed/search.htm</a>
<b>Department of Health and Human Services Centers for Disease Control and Prevention</b>	<a href="http://www.cdc.gov/family">http://www.cdc.gov/family</a>
<b>Wisconsin Immunization Registry</b>	<a href="http://dhfswir.org">http://dhfswir.org</a>
<b>BUFFALO COUNTY</b>	
<b>Buffalo County Human Services</b>	Phone: (608) 685-4412
<b>Buffalo County WIC</b>	Phone: (608) 685-4412
<b>Buffalo County Birth - 3</b>	Phone: (608) 685-4412
<b>EAU CLAIRE COUNTY</b>	
<b>Eau Claire County Human Services</b>	<a href="http://www.co.eau-claire.wi.us/departments/departments-a-k/human-services">http://www.co.eau-claire.wi.us/departments/departments-a-k/human-services</a> Phone: (715) 839-2300
<b>Eau Claire County WIC</b>	<a href="http://www.eauclairewi.gov/wic">http://www.eauclairewi.gov/wic</a> Phone: (715) 839-5051
<b>Eau Claire County Birth - 3</b>	Phone: (715) 839-6216
<b>JACKSON COUNTY</b>	
<b>Jackson County Human Services</b>	<a href="http://www.co.jackson.wi.us/">http://www.co.jackson.wi.us/</a> Phone: (715) 284-4301
<b>Jackson County Birth - 3</b>	Phone: (715) 284-4301 ext. 301
<b>Jackson County WIC</b>	Phone: (715) 284-4301 ext. 385
<b>TREMPEALEAU COUNTY</b>	
<b>Trempealeau County Human Services</b>	<a href="http://www.trempealeaucounty.com/tchome/human_services/">http://www.trempealeaucounty.com/tchome/human_services/</a> Phone: (715) 538-2311 ext. 290
<b>Trempealeau County Birth - 3</b>	Phone: (715) 538-2311 ext. 396
<b>Trempealeau County WIC</b>	Phone: (715) 538-2311

## RECRUITMENT

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Western Dairyland Head Start maintains a waiting list of eligible children and families and enrolls children whenever there is a vacancy throughout the program year.

**We need your help with recruitment!** As parents, you are the most effective recruiter for our Head Start program. You can help us by "spreading the word" to other families, friends, neighbors that may benefit from our high quality and comprehensive services. Applications for Head Start or Early Head Start can be completed online at [www.wdHeadStart.org/apply](http://www.wdHeadStart.org/apply)

Or scan this code with your smart phone to be taken directly to our online application.



**Head Start Heroes Work Here!** Visit our website at <https://www.wdheadstart.org/work-with-us> to see the latest career opportunities and job postings available in Head Start.